



Phases of Traumatic Stress Reactions in a Disaster

Disasters and terrorist attacks are often widespread with many people who directly experience the event and many more who may witness or be indirectly impacted. Many people may encounter behavioral and emotional readjustment problems. Many posttraumatic stress symptoms are normal responses to overwhelming stressors. Exposure to these overwhelming stressors may change our assumptions about life and create distress, but the intensity of this distress will subside with time. Experts agree that the amount of time it takes people to recover depends both on what happened to them and on what meaning they give to those events.

Terroristic acts may result in a whole society questioning the fundamental view of the world as a predictable, just, and meaningful place to live. This questioning is amplified by the fact that organized violence is intentional; it often has a political agenda; and it is meant to create terror, destroy, and hurt. Studies have shown that deliberate violence creates longer lasting mental-health effects than natural disasters or accidents. The consequences for individuals and the community are long lasting and survivors often feel that injustice has been done to them. This can lead to anger, frustration, helplessness, fear, and a desire for revenge. Reestablishing meaningful patterns of interactions in the community after a trauma may facilitate reconstruction of a sense of meaning and purpose. Prior research into terroristic events and disasters has shown that reactions to these events may be categorized into different phases.

Impact phase

Most people respond appropriately during the impact of a disaster and react to protect their own lives and the lives of others. This is a natural and basic reaction. A range of such behaviors can occur, and these may also need to be dealt with and understood in the postdisaster period. After the fact, people may judge their actions during the disaster as not having fulfilled their own or others' expectations of themselves.

During the impact phase, some people respond in a way that is disorganized and stunned, and they may not be able to respond appropriately to protect themselves. Such disorganized or apathetic behavior may be transient or may extend into the postdisaster period, so that people may be found wandering helpless in the devastation afterwards. These reactions may reflect cognitive distortions in response to the severe disaster stressors and may for some indicate a level of dissociation.

Several stressors may occur during impact, which may subsequently have consequences for the person:

- Threat to life and encounter with death
- Feelings of helplessness and powerlessness
- Loss (e.g., loved ones, home, possessions)
- Dislocation (i.e., separation from loved ones, home, familiar settings, neighborhood, community)
- Feeling responsible (e.g., feeling as though could have done more)
- Inescapable horror (e.g., being trapped or tortured)
- Human malevolence (It is particularly difficult to cope with a disaster if it is seen as the result of deliberate human actions.)

Immediate postdisaster phase: recoil and rescue

This is the phase where there is recoil from the impact and the initial rescue activities commence. Initial mental-health effects may appear (e.g., people show confusion, are stunned, or demonstrate high anxiety levels). Emotional reactions will be variable and depend on the individual's perceptions and experience of the different stressor elements noted earlier. Necessary activities of the rescue phase may delay these reactions, and they may appear more as the recovery processes get under way. Reactions may include:

- Numbness
- Denial or shock
- Flashbacks and nightmares
- Grief reactions to loss
- Anger
- Despair
- Sadness
- Hopelessness

Conversely, relief and survival may lead to feelings of elation, which may be difficult to accept in the face of the destruction the disaster has wrought.

Recovery phase

The recovery phase is the prolonged period of adjustment or return to equilibrium that the community and individuals must go through. It commences as rescue is completed and individuals and communities face the task of bringing their lives and activities back to normal. Much will depend on the extent of devastation and destruction that has occurred as well as injuries and lives lost (Raphael, 1993).

This period may be associated with a honeymoon phase deriving from the altruistic and therapeutic community response immediately following the disaster. A disillusionment phase may soon follow when the disaster is no longer on the front pages of newspapers, organized support starts to be withdrawn, and the realities of losses, bureaucratic constraints, and the changes wrought by the disaster must be faced and resolved (Raphael, 1986).

During the stage of acute danger the priority for all is basic safety and survival. Once this is relatively secured, other needs emerge that are both existential and psychological. And once manifest, these needs are typically left frustrated and unfulfilled for a prolonged period of time. Many times, through the media, retribution, or continued violence, the community in question is exposed to further traumatic events.

It is particularly important to remember that emotional needs may be very significant, especially for those who have been severely affected. They may only start to appear during this phase. People may also be hesitant to express distress, concern, or dissatisfaction, feeling they should be grateful for the aid given or because they have suffered less than others have. It should be noted that sometimes emotional reactions may present as physical health symptoms, such as sleep disturbance, indigestion, and fatigue, or they may present as social effects such as relationship or work difficulties.

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Copies available from:

The NSW Institute of Psychiatry

Telephone: (02) 9840 3833

Fax: (02) 9840 3838

Email: inspsy@magna.com.au

Website: www.nswiop.nsw.edu.au