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MENTAL HEALTH PRACTICES IN DISASTERS

By **SHARE DeCROIX BANE**

Natural disasters usually come with little or no time for preparation. Elders caught in such catastrophes find that their lives are turned upside down and that there is little they can do but ask for help. They soon discover that no single agency is equipped to provide all the assistance they need and agencies often don't have effective plans for working together. For weeks or months, as has been seen in the aftermath of Hurricane Katrina, an older adult may go from one agency to another trying to get answers. When answers do come, they may not bring resolution—and they certainly do not restore the sense of community and security that the elder once felt.

Professionals in mental health can play a vital role in helping elders in such circumstances. Working with the Red Cross, I have served a number of times as a volunteer counselor for older adults caught up in natural disasters. My colleagues Joanne Mermelstein, professor emeritus at the University of Missouri-Columbia, and Beth Kallmyer, associate director of the national Alzheimer's Association, have filled similar positions. Drawing on our conversations and on my own experience, I would like to sketch out some of the major issues faced by practitioners who volunteer for frontline disaster-response work with elders.

CHAOS AND STRESS

Mental health professionals in this setting must find ways to handle both the initial chaos of the disaster and the ongoing stress of the aftermath, both for themselves and for the elders they seek to help. Following are a few of the major challenges in disaster-response work with older adults:

- *If you are volunteering away from home, your accommodations often are meager, as the area you are called to work in also is trying to accommodate victims of the disaster.*
- *Your workday is long, as well as unpredictable.*
- *Your working environment often is in turmoil.*
- *You often will feel you are not adequately prepared and are being asked for help beyond your capacity.*
- *You must cope with your own frustration and avoid taking personally the anger that clients and fellow workers will express.*

All of these circumstances produce stress. To work effectively, you will need to call on your inner resources to sustain your own well-being. You also will need to quickly establish teamwork with other workers and volunteers so that some degree of structure and order can be put in place.

During and immediately after a natural disaster, workers are overwhelmingly engaged in crisis response and basic search and rescue. At this initial stage, mental health volunteers often can do little beyond listening to elders' concerns—yet this simple act can provide invaluable support to those whose lives have been thrown into chaos. Because most workers from social services agencies will be focused on arranging food, clothing and shelter for those affected by the disaster, you may be the one volunteer on hand who offers people a chance to express their anger, sadness and confusion.

To make yourself accessible in this situation, it often is better not to identify yourself as a mental health professional, but rather to get acquainted informally with the affected older adults so that they feel free to express themselves. After the 1993 Mississippi floods in the Midwest, for example, good interventions often took place as 10-minute to 30-minute conversations at the back of a pickup truck. This

approach was particularly effective in connecting with men, who might customarily shy away from a more formally structured intervention.

RECOVERY

The second phase of response to a disaster involves recovery in the long-term aftermath of the event itself. Because circumstances are less dramatic than during the immediate crisis, the needs of older adults during this phase sometimes are neglected by social services agencies and helping professionals. Yet during this period, older adults can be faced with the stress of ongoing practical challenges and an extended process of grieving and learning to cope with disaster-related loss.

Mental health professionals continue to have an important role to play during the postdisaster period. Older adults can find it hard to grieve at the same time they are trying to cope day to day. They may receive inadequate support from nearby friends and family, who are themselves dealing with the aftermath of the disaster. Even if their social network is able to reach out, people don't always know how to talk about the loss of a home, a farm, a sense of community.

In such circumstances, elders sometimes feel as if a large part of themselves is gone or that they are now obsolete. At the same time, their old ways of coping with the challenges of life may no longer work. Mental health professionals can make a significant contribution by helping elders grieve their losses and develop new coping skills.

Following are examples of some practical, useful interventions for older adults during the period of recovery from a disaster:

Peer Discussions. Bringing older adults together for facilitated peer discussions enables them to reestablish a feeling of usefulness and a sense of meaning by sharing ideas and resources with each other.

Use of Images. For older adults who have been displaced and whose homes have been destroyed, I have found it helpful in many cases to discuss with them pictures or a video of the destruction wreaked by the disaster. Such conversations can help older adults stop expending emotional energy imagining what they might recover and can aid them in moving toward closure.

Visiting the Disaster Area. Older adults who have been displaced sometimes don't know how to reach old neighbors and friends. Arranging a visit to the area can be helpful because it allows elders to see what is now happening and perhaps find people they have lost touch with.

ADVOCACY

My experience helping on the front line during disasters has made it clear to me that mental health professionals have yet another crucial role to play. Because the most important resource for crisis response is advance planning, we must advocate preparedness that takes the mental health concerns of older adults into account.

Agencies not only should have plans in place to ensure continuity of services, but also should reach out to their communities to educate older adults and their families about the practical and psychological resources they will need should disaster strike. ♦

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THE RED CROSS

The Red Cross provides the best-organized national system of disaster relief in the United States. This system explicitly acknowledges the importance of supporting the mental health of those who are living through disasters and their aftermath. For at least 10 years, the local chapters of the organization have offered two-day training sessions for mental health workers focused specifically on this topic. Once trained, professionals can volunteer to assist the Red Cross during crises in their local area or during major disasters anywhere in the country. For more information on available training, contact your local Red Cross or visit www.redcross.org.

—Share DeCroix Bane