

Victim reactions differ by groups

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For the past few days, we as a nation have been immersed in a major tragedy. Although the terrorist attacks in New York and Washington have far-reaching implications for all of us, four groups of people will suffer the greatest impact. In many cases, their lives will never be the same.

Who are the major victims?

In any disaster or critical event, there are four groups of surviving victims. Television viewers last week were exposed to individuals in all of these groups. Although individuals in all these groups are likely to have traumatic stress reactions, there are important differences between them. The groups are:

- * Immediate victims of a disaster.
- * Rescuers on the scene — paramedics, law-enforcement officers and firefighters.
- * Relatives and friends of those killed in a disaster.
- * Doctors, counselors and therapists who work with the first three groups of victims after a crisis.

The immediate victims

Survivors at the disaster's epicenter are the immediate victims. Because they have experienced a life-threatening situation, whether they were physically injured or not, they likely will suffer from post-traumatic reactions.

Though symptoms will vary with the individual depending upon his or her background, they usually include nightmares, flashbacks or the vivid reliving of the event, increased sensitivity to sound and sight and highly generalized anxiety. Many victims will have physical symptoms such as sleeplessness, stomach upset, muscle tension and headaches. It is normal for anyone who was in a situation where he or she could have been severely injured or killed to show these types of symptoms for a period of time after the event.

Untreated, many will go on to develop a post-traumatic-stress disorder. The symptoms become chronic and interfere with the individual's ability to live a normal life. Efforts to avoid thoughts associated with the trauma lead to overuse of alcohol or drugs, avoidance of anything that reminds them of the event and a feeling of detachment from others.

The person's experiences during the disaster will influence the strength and number of symptoms: How long they were in the life-threatening situation, the severity of their injuries, how prepared they were for the event, effectiveness of rescue efforts and whether the disaster was man-made or natural. In the terrorist attack, there was no

preparation for the impact, it went on for a long time and was highly life-threatening. All of this suggests the post-traumatic reactions are likely to be widespread and intense.

Some personality factors that influence the response are previous experience in coping with danger, the number of other life pressures, age and religious beliefs.

After a crisis, the world is no longer a safe place for the traumatized person. It will not be safe until some understanding and predictability can be restored to his or her worldview. For many people, the world will never seem safe again.

The rescuers

Among those involved in rescue operations after the terrorist attacks are firefighters, paramedics, military and police personnel, medical doctors and nurses and specialists in the use of rescue equipment. They have been helping immediate victims and picking up remains of those who died. Because of the way the buildings collapsed, many rescuers became immediate victims.

Although these workers have been trained to handle critical events, all can encounter horrendous situations that overwhelm their own defenses. This attack is a catastrophe so beyond ordinary human experience that almost anyone would suffer a traumatic response.

Rescuers sometimes feel stressed because they have been involved in an operation where something went wrong or they thought they should have been able to do more. That is, they thought they should have been able to save someone they were not able to save.

The dedication of the rescuers is intense. Many refuse to stop at the end of their work period. As bodies are uncovered of people who survived the initial destruction but died later, some rescuers will feel guilty because of a belief that they were responsible for the person's death by not getting there in time.

The point is, there are events that leave even the professional helper with a traumatic reaction. As a result, it has become standard practice for the workers at disasters to receive critical incident stress debriefing after their tour of duty.

Critical incident stress debriefing is a procedure developed years ago by paramedic Jeff Mitchell to prevent rescuers from developing post-traumatic-stress disorders. After such disasters as the Hyatt Regency collapse in Kansas City, it was discovered that if rescue workers were not debriefed, a significant percentage of them quit their jobs after the event. As a result, the American Red Cross sends disaster mental-health professionals to do critical incident stress debriefing with all its workers after a disaster. Many police departments, including Columbia's, require it for their personnel.

Relatives and friends

We have seen friends and relatives of victims interviewed repeatedly on television. Some of the most moving have been relatives who received calls from loved ones aboard the planes that were about to crash. These relatives have the same reactions anyone would after the sudden unexpected death of someone close to them. The outward expression of this loss varies with the individual, but it results in a life change for all of them.

Besides the sadness that comes with the process of grieving, in this kind of terrorist attack there is often a great deal of anger. This anger might be turned on authorities for their failure to prevent the disaster. If there is any indication facts and information are being held back, the anger will be increased.

Until a body is recovered, a common response is to have a strong feeling that the loved one might have miraculously survived. One reason for working so hard to recover all the bodies is that some people cannot get on with their lives until there is absolute proof their loved one is dead. That means the body must be found and identified.

Often, the best therapy is a discussion group with other victims to work through the grieving process. These survivors often receive some comfort if there are memorials to the dead, such as the one developed in Oklahoma City.

Doctors, counselors and therapists

Secondary victimization or compassion fatigue is the result of working with people who are suffering. It is related to empathetic ability — the ability of the professional helper to respond to the pain of others. Working as a doctor with the injured victims or as a therapist listening to the retelling of the event is highly stressful. This is true even for those helpers who are well-trained in dealing with disaster.

Like rescuers, even well-trained helping professionals will encounter cases that overwhelm their defenses. In the case of these professionals, instead of talking about post-traumatic stress, we are more likely to talk about burnout. After an intense period of working with victims, the professional becomes irritable, tired and less enthusiastic.

In addition, the helper might become cynical and have a strong feeling that what they are doing makes no difference. Family service workers, for example, who deal with abused children and their families, often suffer burnout quickly.

Members of this group should also take steps to protect mental health. Debriefing with other professionals who understand the particular stresses of the disaster helps, as does having outside activities to restore their energy. Professional helpers need to recognize their limits and accept the fact that they are of greater value if they pull back on occasion to conserve energy.

Summing up

During the next weeks and months, Americans are going to become increasingly aware of the psychological damage this terrorist attack has caused. We are fortunate we have

learned much over the past 20 years about traumatic stress and have trained many professionals to recognize and treat it. We no longer expect those who have been in a disaster to walk away undamaged.

Although the mental health of many will be permanently scarred, others will eventually become stronger and able to cope. As a nation we have been traumatized, but eventually we might be stronger for what we have experienced.