

History of Disaster Mental Health ⁱ

- People have always given aid and comfort to each other during and after times of disaster.
- One of the first documented, organized efforts to provide comfort and relief was to the Chicago Fire of 1871.
- As early as 1905 Congress recognized the need to provide organized relief and comfort to survivors of disaster. This is reflected in the Congressional Charter of 1905 which established the American Red Cross.
- In 1906 the Red Cross documented one of its first major relief efforts in response to the 1906 San Francisco Earthquake and fire.
- Though comfort and relief were always part of the disaster response, mental health as a special service came to the attention of many as a result of war.
- There were field hospitals and organized effort to attend to the wounded during the civil war.
- WWI weapons forced the medical community to start addressing “combat stress.” Some vets were described as suffering from a cluster of symptoms that were referred to as shell shock, battle fatigue and combat stress.
- During WWII not only did we recognize these symptoms, we began trying to treat them.
- Documentation of WWII efforts to address combat stress casualties appear in 1944.
- Those who were allowed to talk about their experiences seemed to be ready for battle sooner than those who didn’t speak of their experiences.
- This is the first introduction of the concept that is basic to all disaster mental health work – talk about your experiences.
- At this same time in the United States, disasters continued – both natural and man made. One of the earliest documented responses to an event was the Coconut Grove Nightclub fire in Boston in 1943 with 493 casualties.
- Dr. Lindemann recorded his observations of this event in a 1944 publication. He was a psychiatrist working at Harvard and at the Emergency Room that treated the survivors of the fire. He began noticing how similar the survivors’ stories seemed and how similar their response to the disaster was.
- Dr Lindemann articulated the same lesson learned in combat: Those who talked about their experience seemed to recover faster.
- The US Government officially entered the civilian side of disaster response with the disaster act of 1950.

- Over the years, the government's role has changed. The advent of disaster mental health involvement with the federal government officially began in 1972 with the formation of the mental health emergency section of the National Institute of Mental Health.
- This evolved into a mandated service, when, in 1974, Congress charged NIMH to provide relief to survivors of national disasters and training to relief workers.
- The recognition of mental health as part of the disaster response effort by the federal government was pioneering.
- The recognition of the cluster of symptoms observed in combat and after civilian disasters was finally "officially" recognized by the psychiatric community in 1980. The name given this cluster of symptoms was post traumatic stress disorder.
- Treatments, interventions and prevention strategies began to come to the forefront after PTSD was recognized and named. Jeffrey Mitchell and his colleagues began working with an intervention model called Critical Incident Stress Management. This model has been widely accepted by relief workers and first responders as an organized, non-threatening way to talk about their experiences.
- Nebraska adopted the CISM model in 1987 by adopting a statute that authorized and provided for CISM as an official intervention used with first responders experiencing traumatic events.
- The Red Cross, long known for providing relief and comfort, only separated the mental health function into its own area of service in the early 1990's. Prior to that time it was thought of as a nursing or health function.
- The separation of the MH function has brought further recognition and legitimization of MH as a part of the total disaster response.
- Further evidence of the recognition of MH's increasing importance, is the government mandate of ARC involvement in response to air disasters. MH volunteers serve as the primary contact between families and airlines in the event of a crash.
- The terrorist attacks of 9-11-2001 prompted the Federal Substance Abuse and Mental Health Services Administration to organize state efforts to put together "all hazards" disaster behavioral health plans.
- Nebraska's plan was completed and signed by policy makers on January 20, 2005.

Key point:

- Disaster Mental Health has evolved over the years and is a relative newcomer in the field of disaster response. Given that, pioneering response efforts are works in progress – research is young and theory is still being tested.

ⁱ **adapted from:** Bulling, D. & Harvey, J. Introduction to Disaster Mental Health Response for Emergency Managers. Nebraska Emergency Management Agency, 1999.