

Psychological first aid for survivors of disaster

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Even as we breathe a sigh of relief watching the rescue of 33 miners trapped in a Chilean mine for more than two months, there is recognition that their recovery from this traumatic experience involves more than just their physical health. Survivors of disasters are at significant risk for such problems as post-traumatic-stress-disorder (PTSD), depression, anxiety, and substance abuse. But research on the psychological effects of disasters indicates that the risk varies among individuals and, further, that the most common psychological interventions currently in use are at best ineffective and at worst may actually be harmful in some instances. Fortunately, there is strong scientific evidence pointing to the effectiveness of other psychological interventions for disaster survivors.

In an upcoming report on the psychological effects of disasters in [Psychological Science](#) *in the Public Interest*, a journal of the Association for Psychological Science, George A. Bonanno and colleagues note that disasters result in extreme psychological harm in a minority of individuals—less than 30% of samples (including New Yorkers who lost loved ones on 9/11) experience severe levels of these psychological problems. Just as there are a wide range of problems experienced following disasters, Bonanno and his co-authors observe there are also a number of outcome patterns. Some survivors will exhibit chronic dysfunction but the majority will go on to recover psychological function within a few months or years.

Following disasters, the most common form of immediate psychological intervention is a single session known as critical incident stress

debriefing (CISD). However, following a review of studies on the effectiveness of CISD, Bonanno and co-authors conclude that "multiple studies have shown that CISD is not only ineffective but, as suggested earlier, in some cases can actually be psychologically harmful."

In a 2007 report in *Perspectives on Psychological Science*, a journal of the Association for Psychological Science, Scott O. Lilienfeld shows that a number of psychological therapies, including CISD, especially if forced upon survivors, may actually be harmful.

"The data on crisis debriefing suggest that imposing such interventions on individuals doesn't work and may, paradoxically, increase risk for PTSD," Lilienfeld says. "If any of the miners want to talk to somebody to express their feelings, then by all means mental health professionals should be there to listen to them and support them. But for miners who would prefer not to talk much about the experience, it's best to leave them alone and respect their own coping mechanisms."

According to Bonanno and his co-authors, there are therapies that may be effective in helping survivors recover from disasters. Psychological first aid (PFA)—which, among other things, provides practical assistance and helps promote a sense of safety and calmness among survivors—is a promising approach. In addition, community-centered interventions—those that help maintain a sense of continuity, connectedness, and quality of community life—may be beneficial to [survivors](#) of [disasters](#).

Provided by Association for Psychological Science

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