Wanted: Mental Health Support for Disaster Trauma

By Ruth Baugher Palmer, Mary McNaughton-Cassill & Mary Schoenfeldt

Disaster response organizations have become increasingly adept at meeting the basic needs of survivors, including shelter, food, water, and medical treatment. However, traumatic disaster-related experiences – including threats to life, exposure to death and injury, and the destruction of homes and communities – also take a psychological toll on survivors. Common responses to disasters include grief, anxiety, and anger, as well as post-traumatic stress disorder (PTSD), depression, and anxiety. Although the presence of social support is known to moderate the impact of trauma on psychological well-being, disasters often disrupt individual and structural social networks causing further distress. Consequently, disaster responses increasingly include mental health components. The Green Cross Academy of Traumatology (GCAT) focuses on providing specialized mental health support in disaster situations at no required cost to the requesting local authorities during gray sky days.

About the Green Cross

Originally organized to serve a need in Oklahoma City following the 1995 bombing of the Alfred P. Murrah federal building, the Green Cross is an international, non-profit, humanitarian assistance organization comprised of volunteer professionals trained to help people in crisis following traumatic events. GCAT provides training to prepare mental health practitioners and other professionals, such as medical and healthcare workers, emergency managers, first responders (law enforcement, fire, emergency medical services), educators, animal service workers, or Community Emergency Response Team (CERT) members for disaster response deployment. Levels of involvement are available, ranging from basic membership to five tiers of specialty certification: Compassion Fatigue Educator, Compassion Fatigue Therapist, Field Traumatologist, Certified Traumatologist, and Master Traumatologist.

To deploy with GCAT, members must have completed the Federal Emergency Management Agency’s (FEMA) independent study courses IS-100 (Introduction to the Incident Command System) and IS-700 (An Introduction to the National Incident Management System). They also must have prior professional experience in crises and have training specifically in disaster field traumatology but do not have to be licensed mental health professionals. An essential element of trauma work is maintaining a non-anxious presence in crises, which means more than simply having the capacity to appear calm. Although staying calm is necessary, the concept of non-anxious presence also includes utilizing positive self-talk and other personal skills to maintain a low level of anxiety in stressful situations. This practice enables the responder to remain non-reactive and to use skills and training, thereby increasing the benefit potential for both the responder and the client.
Similarly, trauma work requires more than desire and training. An essential part of caring for others is the ability to care for self. Even the most accomplished traumatologist is susceptible to compassion fatigue. Therefore, Green Cross members wishing to volunteer for disaster response must complete compassion fatigue self-tests, and their scores must be approved to deploy. Additionally, ongoing monitoring of members’ self-care is a crucial part of every Green Cross deployment.

Each Green Cross response team deploys using an incident command structure to ensure the deployment effort coordinates with and fits into the structure of the overall emergency and disaster response efforts of other agencies. This structure is designed to expand and contract as positions are needed. On a small team, one person might hold more than one position. Green Cross always designates a team leader and a compassion fatigue specialist at a minimum. Within the structure are four functions: operations, logistics, planning/intelligence, and finance/administration. GCAT informally calls these doers, getters, thinkers, and payers and works to match team members to roles that fit their skill sets (see Fig. 1).

![Fig. 1. Green Cross field deployment organizational structure](Source: Green Cross, 2022)

**What Green Cross Does**

Green Cross never self-deploys but responds to invitations following a traumatic event. Sometimes GCAT is known ahead of time by local officials or agencies who extend an invitation directly. Other times previous partners inform a new group of GCAT’s mission, who then reaches out to initiate a memo of understanding (MOU) for services. Green Cross’s on-ground services are free, as it is financially supported by donations, grants, and fees received for membership and trainings. The requests for on-ground services can include any or all the following:
• Crisis intervention and stabilization;
• Psychological first aid;
• Critical incident stress management (CISM) activities;
• Assessment and referral services to survivors;
• Assessment and consultation with management; and
• Training, education, and certification.

For example, Green Cross was invited by a local government agency to Paradise, California, following the “Camp Fire,” one of the deadliest wildfires in California’s history. The fire began on November 8, 2018, and took three weeks to contain. It burned over 150,000 acres, destroying more than 18,000 structures. Many residents fled amid raging fire that burned the equivalent of one football field every second at its peak of destruction. More than 85 people were killed and several injured, including civilians and firefighters.

The initial request was to provide support services to first responders as they grappled with their professional roles and personal losses in confronting the reality of this disaster. Green Cross team members met with local first responders, bearing witness in individual and group conversations to their heroism and (at times) their own vicarious trauma experienced in the rescue efforts and attempts to contain the fire’s destruction. Green Cross teams also worked with Butte County Behavioral Health staff at the disaster recovery centers, where displaced residents sought services from FEMA, the Red Cross, and local municipal departments. GCAT members dispersed across the town of Paradise and surrounding communities to local businesses where fire survivors gathered and churches distributing meals and supplies. There they met individually and in groups to help residents process the traumatic events they experienced and deal with the aftermath of their overwhelming losses. Green Cross returned to Paradise on the fire’s first anniversary to support and guide the community as they continued to work toward recovery.

**How Green Cross Helps**

GCAT’s disaster mental health efforts are based on best practice field traumatology principles, including psychological first aid (PFA). PFA’s core actions include:

• Establishing contact with community members in non-intrusive ways,
• Addressing immediate safety and practical concerns,
• Helping people to manage emotional distress,
• Creating recovery and action plans, and
• Linking survivors to sources of long-term support.

Disaster response interventions focus on helping people deal with the acute stress they are experiencing. GCAT-trained teams can also assess for further services and encourage the use of local resources.

**Disaster research** suggests that people typically show signs of acute stress in the weeks following a disaster and are at increased risk for developing PTSD. They may also
experience a range of difficulties, including clinically significant depression or anxiety, disturbances in sleep, appetite, or libido, and somatic complaints such as headaches and gastrointestinal problems. Those who experience disaster trauma also have difficulty problem-solving, remembering, or using critical thinking skills. In addition, people who have lost a loved one, a pet, or property may exhibit responses characteristic of bereavement. Typically, disaster responders, including trained and certified GCAT members, focus on helping the bereaved to understand their feelings, meet their basic needs, take care of their families, and manage the logistics of coping in a disrupted world.

The mission of any Green Cross deployment is to transform disaster victims into survivors. Immediately following a traumatic event, survivors attempt to address five fundamental questions:

- What happened to me/others? (shock, disbelief, disorientation, confusion)
- Why did it happen to me/us? (fear)
- Why did I/we do what I/we did during and right after this disaster? (guilt and feelings of inadequacy)
- Why have I/we acted as I/we have since the disaster? (confusion and worry about their sanity and ability to recover)
- Will I/we be able to cope if this disaster happens again?
Green Cross teams invite these conversations in formal meetings offered to communities, as well as informal activities and chats that emerge as they hand out water to people waiting in line for meals and services. Teams provide support and do not press people to talk about their experiences. Often, casual conversation builds a relationship and helps people know they are not alone. The goal is to help normalize what survivors are experiencing in a disorienting, abnormal situation and to enhance their coping resources and resilience. With this support, survivors become more stable and better able to problem solve and cope with the overwhelming experience. GCAT teams are trained in mental health interventions, which include suicide assessment, CISM, and emotional calming and grounding techniques. Green Cross teams also offer compassion fatigue support for first responders and volunteers participating in the disaster response. This includes support groups for emergency responders and healthcare workers.

Join Green Cross

Mental health professionals, paraprofessionals, health care workers, emergency management professionals, educators, and other interested professionals are encouraged to join the Green Cross Academy of Traumatology. GCAT members are an energetic and dedicated group of colleagues committed to applying the knowledge and skills of their respective fields to individuals, families, and communities in the aftermath of disasters. Alert to the risk of personal compassion fatigue and vicarious trauma, team members tend to each other carefully on deployments. They also support one another with kindness, respect, and lots of humor as they seek to serve those experiencing loss and pain. In doing so, they find hope and camaraderie amid the devastation.

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Mary McNaughton-Cassill, Ph.D., is a professor of clinical psychology at the University of Texas at San Antonio. Her research focuses on coping with the stress of modern life, and she has written two books on the topic ("Mind the Gap" and "Give Way"). She also has a blog on the Psychology Today website entitled "Mental Health Matters." She is a fellow of the University of Texas Academy of Distinguished Teachers and a licensed therapist with experience working with trauma survivors in various settings, including a college counseling center, a U.S. Department of Veterans Affairs hospital, and private practice. In addition, she has deployed with Green Cross as a team member, compassion fatigue coordinator, team leader, and stress management educator in Puerto Rico, Texas, California, and Oregon.

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