

## Surviving the trauma of Victoria's Bushfires: The mental health consequences

The massive bushfires across Victoria over the weekend were a highly distressing and potentially traumatic experience for those involved. The extent of the devastation was such that, for many, it will be a long time before their lives return to normal.

Almost everyone who goes through a traumatic event like the fires in Kilmore East, Bunyip Forest, the Yarra Ranges, Beechworth and Murrindindi will be affected in some way. The loss of homes, and the security that they provide, will make the recovery process longer and more difficult. How organisations and health services respond to trauma can have a lasting impact on a person's ability to cope, according to experts at the Australian Centre for Posttraumatic Mental Health in Melbourne.

Human beings are very resilient and most of those involved in the bushfires will find that their lives gradually return to normal, according to Professor Mark Creamer, Director of the Australian Centre for Posttraumatic Mental Health at the University of Melbourne. *"Obviously those involved will feel some distress, and the widespread loss of homes and valuable possessions will take time to come to terms with. But most will not experience severe mental health problems that prevent them from being able to function effectively over the coming days and weeks"*.

While most people regain a sense of wellbeing on their own, with the support of family and friends, a minority may develop mental health problems and need more help. Some survivors and witnesses to these fast moving, destructive bushfires may experience mental and physical symptoms that can last long after the event has passed. Their problems may include anxiety, depression, posttraumatic stress and risky alcohol and drug use, as well as difficulties with relationships or work. Mental health experts have several names for these reactions, including adjustment disorder, acute stress disorder (ASD), and posttraumatic stress disorder (PTSD).

Anyone can suffer these problems, regardless of age, sex or ethnic background. They can follow any kind of trauma like violence or sexual assault, natural disaster (bushfire, earthquakes, and floods), serious unexpected injury, or the traumatic injury or death of a loved one.

*"About two thirds of people experience one or more traumatic events at some stage in their lives, but only a small proportion – maybe 10-15% – go on to experience stress disorders"*, says Associate Professor David Forbes from the Australian Centre for Posttraumatic Mental Health.

Whether those involved in this weekend's fires will go on to experience longer term problems depends on a whole range of factors such as:

- (a) Whether they've experienced serious traumatic events in the past that still trouble them.
- (b) How exposed they were to the traumatic event, how long their experience lasted, and the extent of the losses both human and material.
- (c) How much social support they have in the weeks following the event. Of great importance following large natural disasters such as this is how the local community responds and their ability to support each other through the recovery phases.

After the event, people may experience:

- a) shock and disbelief at what happened;
- b) fear and apprehension that it might happen again, and for the safety of themselves and loved ones;
- c) anger at the unfairness and senselessness of it all;
- d) shame and guilt for not having acted differently and somehow feeling they are to blame.

Some may have trouble sleeping, get tired easily, have trouble concentrating, and experience nightmares and feelings of 'reliving' the experience which happen without warning. They may become socially withdrawn, lose interest in their normal activities and not want to go to work. They may use alcohol or other drugs to dampen down the symptoms (which come back when they've sobered up). Their relationships may suffer. Loved ones may find the person jumpy, and easily startled, as well as irritable and angry.

According to Professor Mark Creamer, the symptoms usually fade over a period of weeks. With the loss of life, as well as the property and livestock destroyed in these fires, it will be a long while until life returns to normality. But from the perspective of mental health and psychological well being, most people will be back on track before too long. Recovery is easier and quicker if the person:

- (a) accepts what is happening rather than denying it
- (b) looks after themselves physically – gets plenty of exercise, eats a balanced diet and avoids drugs and alcohol
- (c) resumes a normal routine as far as possible, getting back to school, study, work, sport etc (without trying to do too much in an attempt to block out the event).

Relaxation techniques like meditation and yoga can help. Some people find keeping a journal or diary is helpful.

But most important of all is to have good social contacts – friends, family and work colleagues with whom the person can talk through their experiences if and when they feel ready. These people can help the traumatised person by

spending time with them, listening to them and being supportive and understanding. They should avoid blaming the person or dismissing the experience by saying things like "pull yourself together" or "it could have been worse" and accept that they may be angry and irritable at times.

In this situation, how the community responds is crucial. At times like this, it is often easy for angry feelings to be directed at friends and neighbours, sometimes causing the community to split apart. It is important that this does not happen. Members of the community with shared experiences of the disaster are often in the best position to help each other through the recovery process and, hopefully, emerge stronger the other side.

If the symptoms are too severe, or go on for more than a few weeks, the person should try to get professional help. Many people are reluctant to seek treatment and may need some gentle encouragement from concerned friends or family.

*"Initially, if the person is not coping too well, it's a good idea to talk the issues through with a GP" said Professor Creamer. "Then, if the symptoms persist, get a referral to a competent psychologist, psychiatrist, or other mental health professional".*

The most effective treatment is trauma-focused psychological therapy in which the person is helped to confront the painful memories in a safe and controlled way. Medication can also be helpful in some cases.

In 2007, the Australian Centre for Posttraumatic Mental Health released a set of guidelines for people with ASD and PTSD and for health workers to help them manage these conditions. These guidelines, as well as a range of other information, are available for free download from ACPMH's website: [www.acpmh.unimelb.edu.au](http://www.acpmh.unimelb.edu.au)

For further information, interview and contact details contact Tania Ewing on 0408378422