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Welcome



Stephen F. Doss MHB Board Member



Welcome to the Fall 2005 issue of “How’s *YOUR* Mental Health?” The St. Louis Mental Health Board (MHB) developed this quarterly e-zine to help St. Louis residents become better informed about mental health and substance abuse issues and problems.

This issue of “How’s *YOUR* Mental Health?” focuses on how to cope with the effects of trauma in our lives. We have included a number of organizations in this e-zine that can help people that are experiencing reactions to a disaster or event that seem extreme either through their intensity or length. The articles that follow discuss varied aspects of this problem, including:

- Special Commentary – the personal story of a family that came to St. Louis after Katrina, the financial and emotional toll, and the health-care crisis now facing the hardest hit areas
- Severe Stress Response – post-traumatic stress disorder, who is at risk, how trauma can affect those with substance abuse and addiction
- Getting help – a list of warning signs that an individual might need stress management assistance, what to look for in a program or treatment
- Helping children cope – dealing with images on television, how children respond to disaster, ways to reduce children’s fear and anxiety
- Self-help and recovery – tips on minimizing possible mental and emotional effects of trauma caused by a disaster
- How to interact with patients after a traumatic event – the special needs of the traumatized person, helping patients cope, those at risk for severe reactions

MHB hopes you will find these articles and references informative and useful. We also hope this issue of our e-zine will help readers to be more aware of depression and stress caused by a disaster and where to get appropriate assistance.

Coping with the Effects of a National Disaster



A Special Commentary



**Regina Trotter, VP
Hopewell Center**

Traumatic events in our lives, such as a natural disaster like fires, floods, tornadoes and hurricanes, can have an effect on all of us, even if we are not directly victims. And an *intentional* disaster such as the terrorist attacks of 9-11 left us shaken and feeling vulnerable.

You may know people that have felt a sense of helplessness and despair recently as you saw the stories unfold of Hurricanes Katrina and Rita. Or you might have seen people who are more directly impacted through a family member that experienced the loss of his or her home and community. Some of you may be caregivers for those displaced.

How well we deal with these events is unique for each one of us. Some might have found it helpful to volunteer their services or donate needed items to help those impacted by the hurricanes. Others might have been more seriously impacted with fear, grief and depression.

A personal story

We recently met and heard first hand the story of Earl Norman, a former resident of a portion of New Orleans, the 9th Ward that was hardest hit by the flooding caused by Hurricane Katrina. Earl, his two sons, and wife Alicia left New Orleans right before the flooding that completely submerged their home, causing extensive damage.

Earl's sister, Debra Shurn, happened to be vacationing in Florida when the hurricane first made landfall. She knew that it was heading his way and that this hurricane was not to be ignored. At her urging the family packed important papers in the car and headed north to her home in St. Louis.

Arriving there at 2 a.m. the next day, they were in time to watch the levee break and follow the flooding of their neighborhood on television. While the Norman family was lucky to have made it out with their lives and have a place to stay, there was still stress.



**Debbie Mackey, Counselor
BJC Behavioral Health Services**

"I had to move my family out and take a last look around my home. I knew when I came back it wouldn't be the same," Earl recalled. "I had to keep calm for my wife and boys, stay strong, not panic and keep a clear head."

Both Earl and his wife were hit hard with the reality that they had lost almost everything they owned. They attempted to introduce some normalcy back into the lives of their children by enrolling them that same week in St. Louis schools. There they received support from teachers and new friends and seemed to adapt.

The financial and emotional toll



Earl Norman
Hurricane Katrina Survivor

In a disaster, financial worries are always a big part of the picture. Earl is a self-employed painter and carpet cleaner, and when we talked he was already looking forward to getting himself established and working again. Luckily he has a skill that will allow him to restore much of his income. But many times individuals will have to adjust to reduced or no income, a change in their standard of living, and the stress of seeking help. Earl found that dealing with his insurance company for his home, relief agencies and other paperwork was time consuming but had to be dealt with before he could begin to get back on his feet.

A disaster will also affect the dynamics of a family, putting extra pressure on how spouses communicate with each other. Conflicts may increase, and there may be more tension in the relationship. In Earl's case, he had to be there emotionally for his wife as she grieved the home and community they had lost.

The family support the Normans received helped make a difference in their recovery. They still had to learn to take one day at a time and take small steps. They found that counting their blessings and talking to others helped them each day.

Earl's sister, Debra, also felt stressed as she suddenly had her family filling her home. "They looked to me for strength, support and guidance. They were totally helpless, and it was overwhelming. I couldn't cry in front of them, but I often went to work and cried," she said.

While caregivers like Debra are more than willing to be the consummate host, she found that it was important not to do everything for them. It was necessary for Earl and his family to have some control restored, and as a result they moved into their own town-home and have started a new life in St. Louis.

After the wind and rain: a health-care crisis

While the experience is not one they want to repeat, Earl, his family and Debra say that they have grown closer as a family and have been able ultimately to pick up the pieces and move on. They are the lucky ones. There has been a virtual explosion in the number of patients being seen post-Katrina with depression, stress anxiety and insomnia. In a survey released by Louisiana State University

in November 2005, 39 percent of Louisiana residents reported feeling angry and 53 percent said they were depressed.

Health-care professionals are doing what they can – prescribing counseling, drugs and support groups to help survivors cope with grief and despair from losses. The U.S. Department of Health and Human Services estimates that 25 to 30 percent of the population in areas significantly affected by Katrina may experience “clinically significant” mental health needs, with an additional 10 to 20 percent experiencing “sub-clinical, but not trivial” needs. Half a million people may be in need of assistance.



Alicia Taylor
Hurricane Katrina Survivor

Health-care facilities and clinics in the areas affected by the storms are working with skeletal staff, and outreach is becoming increasingly important as it becomes necessary to reach out and visit shelters and trailer parks, and this in an area where mental-health systems were stressed even before the storm. In Louisiana, for example, before Katrina only 28 percent of adults and 3.5 percent of children identified as having a mental illness received care. Experts worry that the underserved will continue to struggle as otherwise healthy Gulf Coast residents succumb to the storm's psychological aftereffects.

In addition to mental health challenges, evacuees have other challenges on their hands. In a survey taken of evacuees in Houston after Katrina, half said they had no health insurance; 41 percent reported suffering from chronic conditions, like heart disease, hypertension, asthma, diabetes and cancer.

As individuals in the area and scattered across the country begin to rebuild their lives, we will continue to learn lessons about how to deal with a national disaster of this magnitude in the future, especially when dealing with the toxic combination of poor health and poverty.

Almost everyone who experiences a life-changing event feels sad or anxious. There may be changes in sleep, and they may have trouble concentrating. But if these feelings go on over time or are extreme, or they begin to feel guilty or worthless, or have thoughts of death or suicide, it's time to seek help. Below are two agencies: more are listed at the end of this e-zine.

Hopewell Center: *The mission of the Hopewell Center is to improve the quality of life for the mentally disabled in the Metropolitan St. Louis community by decreasing the incidence of mental disabilities and their negative impact through hope, treatment, and wellness.*

Hopewell has been recognized for its outstanding, creative and culturally sensitive programs, services and staff. Most recently the Center has expanded its services to include an array of comprehensive psychiatric and rehabilitative services in its newly renovated facility at 1504 South Grand in St. Louis. Contact them at 314-531-1770 or www.hopewellcenter.com

BJC Behavioral Health *is an affiliated member of BJC HealthCare offering comprehensive community-based behavioral health services to children and adults in the St. Louis metropolitan area and in the Missouri counties of Washington, Iron and St. Francois.*

The services offered help people with a range of behavioral health needs. Services are offered at home, school, workplace and other community settings. Contact them at 314-206-3712 or www.bjcbehavioralhealth.org

Who is at Risk for a Severe Stress Response?

After a disaster or traumatic event, the impact can go far beyond the immediate devastation. Just as it takes time to repair damaged buildings, it takes time to grieve and rebuild our lives. But, while most see this as a bump in the road, some individuals experience an intense physical and emotional response to thoughts and reminders of the event that last for many weeks or months after the traumatic event. This is called post-traumatic stress disorder (PTSD).

Studies show that as many as one in three disaster survivors have severe stress symptoms that put them at risk for lasting PTSD. According to the National Center for Post-Traumatic Stress Disorder, some individuals have a higher than normal risk for severe stress symptoms, such as those with a history of:

- Exposure to other traumas (accidents, abuse, assault, combat, rescue work)
- Chronic medical illness or psychological disorders
- Chronic poverty, homelessness, unemployment or discrimination
- Recent or subsequent major life stressors or emotional strain (divorce, single parenting)

The emotional impact and uncertainty stemming from the overwhelming damage to our Gulf Coast and widespread upheaval of Americans may be particularly difficult for people who are vulnerable to substance abuse or who may be recovering from an addictive disorder. We know, for example, that stress is one of the most powerful triggers of relapse, even after prolonged periods of abstinence from drugs.



Both research and clinical experience have shown that PTSD is a strong risk factor for substance abuse and addiction. As events continue to unfold in Louisiana, Mississippi, Alabama and in other states affected by Hurricane Katrina, it is likely that some individuals, including those who are helping with the rescue efforts, may encounter behavioral and emotional readjustment problems of varying severities, and may be prone to use drugs and alcohol to try to escape from the realities of their days.

It is especially important during these stressful and uncertain times that we all focus on restoring our emotional well-being. We must be attentive to how we as individuals are responding to stress - and also to how our family, friends, and colleagues are responding. Be alert for increases in substance use and make

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sure that substance abusers and those with mental health problems seek professional help.

*Information from the National
Center for Post-Traumatic Stress
Disorders, the National Institute
on Drug Abuse and other internet
sources*

When It's Time to Get Help



The following are signs that an individual might need stress management assistance, especially when these symptoms occur over a long period of time or with great intensity:

- Having problems getting to sleep or staying asleep
- Having recurring dreams or nightmares
- Reconstructing the events surrounding the disaster in an effort to work out a different outcome
- Trouble concentrating or problem solving
- Having difficulty communicating thoughts
- Questioning your spiritual or religious beliefs
- Repeated thoughts or memories of the disaster which are hard to stop
- Feeling numb, withdrawn or disconnected
- Experiencing fear and anxiety when things remind you of the event
- Being overprotective of your and your family's safety
- Feeling a lack of involvement or enjoyment in everyday activities
- Feeling depressed or down much of the time
- Feeling bursts of anger, or intense instability
- Crying for no apparent reason
- Feeling a sense of emptiness or hopelessness about the future
- Isolating yourself from others
- Avoiding activities, people or places that remind you of the disaster
- Having increased conflict with family members
- Increased use of drugs or alcohol



Wherever you go for help, the program or treatment should include the following:

Empowerment—You must be in charge of your healing in every way to counteract the effects of the trauma where all control was taken away from you.

Validation—You need others to listen to you, to validate the importance of what happened to you, to bear witness, and to understand the role of this trauma in your life.

Connection—Trauma makes you feel very alone. As part of your healing, you need to reconnect with others. This connection may be part of your treatment.

Data from the National Mental Health Information Center and other Internet sites

How Families Can Help Children Cope with Fear and Anxiety



Whether tragic events touch a family personally or are brought into the home via newspapers and television, these tips can help children cope with the anxiety that violence, death, and disasters can cause.

Helping children deal with images on television

Listening and talking to children about their concerns can reassure them that they will be safe. Parents should start by encouraging them to talk. Even young children may have questions about tragedies and compassion for those affected.

The U.S. Department of Health and Human Services offers these pointers for parents and other caregivers:

- **Encourage children to ask questions.** Listen to what they say. Provide comfort and assurance that address their fears. It's okay to admit you can't answer all of their questions.
- **Talk on their level.** Communicate with your children in a way they can understand. Don't get too technical or complicated.
- **Find out what frightens them.** Encourage your children to talk about fears they may have. They may worry that someone will harm them or that someone will try to hurt *you*.
- **Focus on the positive.** Reinforce the fact that most people are kind and caring. Remind your child of the heroic actions taken by ordinary people to help victims of tragedy.
- **Pay attention.** Your children's play and drawings may give you a glimpse into their questions or concerns. Ask them to tell you what is going on in the game or the picture. It's an opportunity to clarify any misconceptions, answer questions, and give reassurance.
- **Develop a plan.** Establish a family emergency plan for the future, such as a meeting place where everyone should gather if something unexpected happens in your family or neighborhood. It can help you and your children

Disaster may strike quickly and without warning. These events can be frightening for adults, but they are traumatic for children if they don't know what to do.

During a disaster, your family may have to leave your home and daily routine. Children may become anxious, confused or frightened. As an adult, you'll need to cope with the disaster in a way that will help children avoid developing a

permanent sense of loss. It is important to give children guidance that will help them reduce their fears.

The Federal Emergency Management Agency (FEMA) and the American Red Cross have prepared these suggestions as guidelines.

Children and their response to disaster

Children depend on daily routines: They wake up, eat breakfast, go to school, play with friends. When emergencies or disasters interrupt this routine, children may become anxious.



In a disaster, they'll look to you and other adults for help. How you react to an emergency gives them clues on how to act. If you react with alarm, a child may become more scared. They see our fear as proof that the danger is real. If you seem overcome with a sense of loss, a child may feel their losses more strongly.

Children's fears also may stem from their imagination, and you should take these feelings seriously. A child who feels afraid is afraid. Your words and actions can provide reassurance. When talking with your child, be sure to present a realistic picture that is both honest and manageable.

Feelings of fear are healthy and natural for adults and children. But as an adult, you need to keep control of the situation. When you're sure that danger has passed, concentrate on your child's emotional needs by asking the child what's uppermost in his or her mind. Having children participate in the family's recovery activities will help them feel that their life will return to "normal." Your response during this time may have a lasting impact.

Be aware that after a disaster, children are most afraid that

- the event will happen again
- someone will be injured or killed
- they will be separated from the family
- they will be left alone.

Advice to parents: Prepare for disaster

You can help children to be prepared to deal with a disaster by teaching them the simple lessons below:

- Teach children how to recognize danger signals. Make sure your child knows what smoke detectors, fire alarms and local community warning systems (horns, sirens) sound like.
- Explain how to call for help. Teach your child how and when to call for help. Check the telephone directory for local emergency phone numbers and post these phone numbers by all telephones. If you live in a 9-1-1 service area, tell your child to call 9-1-1.
- Help children memorize important family information. Children should memorize their family name, address and phone number. They should also know where to meet in case of an emergency. Some children may not be old enough to memorize the information. They could carry a small index card that lists emergency information to give to an adult or babysitter.

After the disaster: Time for recovery

Immediately after the disaster, try to reduce a child's fear and anxiety.

- Keep the family together. While you look for housing and assistance, you may want to leave your children with relatives or friends. Instead, keep the family together as much as possible and make children a part of what you are doing to get the family back on its feet. Children get anxious, and they'll worry that their parents won't return.
- Calmly and firmly explain the situation. As best as you can, tell children what you know about the disaster. Explain what will happen next. For example, say, "Tonight, we will all stay together in the shelter." Get down to the child's eye level and talk to them.
- Encourage children to talk. Let children talk about the disaster and ask questions as much as they want. Encourage children to describe what they're feeling. Listen to what they say. If possible, include the entire family in the discussion.
- Include children in recovery activities. Give children chores that are their responsibility. This will help children feel they are part of the recovery. Having a task will help them understand that everything will be all right.

You can help children cope by understanding what causes their anxieties and fears. Reassure them with firmness and love. Your children will realize that life will eventually return to normal. Parents concerned about a child's reaction to stress or trauma should call the child's physician, or one of the mental health resources listed at the end of this newsletter.

Data from U.S. Department of Health and Human Services, FEMA and other internet sites

Self-help and Recovery



The American Psychiatric Association offers tips on how to minimize possible mental and emotional effects of trauma caused by a disaster:

- Attempt to get back to a normal routine to the greatest extent possible.
- Get enough sleep and maintain a proper diet.
- Find ways to give meaning to the situation and your life. People who volunteer and help others in the face of disaster are less prone to feelings of hopelessness and depression.
- Be realistic about what you can accomplish. Recognize that you cannot do everything for everyone, but you can make a difference.
- Some disruptions of sleep, concentration, appetite and mood (increased sadness or fearfulness) are natural responses to traumatic events. If sleep becomes impossible, if thinking is severely impaired, if fear becomes crippling, if sadness is overwhelming or you have thoughts of dying or suicide, you should get help immediately.
- For many people, symptoms will ease with the passage of time. If things appear to be worsening, counseling and possibly some short-term medication may be enough to get back on track. Sometimes people may need support for longer periods of time.
- When necessary, treatment helps.

Data from the American Psychiatric Association

Resources:



The following local agencies have the ability to help people that are directly affected by the recent National disasters and are funded by MHB. Please contact the agencies below for more information.

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Where to call for mental health help:

National Information Center for Children and Youth with Disabilities

www.nichcy.org

1-800-695-0285

National Mental Health Association

www.nmha.org

1-800-969-NMHA

American Academy of Child and Adolescent Psychiatry

www.aacap.org

1-202-966-7300

Council for Exceptional Children

<http://ericec.org>

1-800-328-0272

Federation of Families for Children's Mental Health

www.ffcmh.org

703-684-7710

**National Clearinghouse on Family Support and
Children's Mental Health**

www.rtc.pdx.edu/

1-800-628-1696

Behavioral Health Response (BHR)

24-hour crisis hotline staffed

by professional counselor

www.bhrstl.org

314-469-6644

St. Louis

Mental Health Board

www.stlmhb.com

314-535-6964

Help with Gambling

1 800 BETS OFF

Life Crisis Service

24-hour hotline staffed

by trained volunteers

www.lifecrisis.org

314-647-4357

**Missouri Department of
Mental Health**

Eastern Region Office

dmhmail@mail.dmh.state.mo.us

314-877-0370

The Greater St. Louis

Treatment Network

www.stlouis.missouri.org/gsltn

1-888-287-6060

Web Sites

The following web sites can provide more information about dealing with depression and grief following a disaster:

www.mentalhealth.samhsa.gov – from the United States Department of Health and Human Services – Substance Abuse and Mental Health Services Administration, National Mental Health Information Center. A number of helpful pages on disaster information.

www.bt.cdc.gov/masstrauma - from the Center for Disease Control on coping with a traumatic event.

www.bt.cdc.gov/mentalhealth/#hp – a number of links from the Center for Disease Control for disaster mental health resources

www.healthyminds.org/katrinatipsforcollege.cfm - mental health recommendations for college students disrupted by Hurricane Katrina from the American Psychiatric Association

<http://panicdisorder.about.com/od/emergencyresponseworkers/a/selfcaretips.htm>
- Self-care tips for emergency and disaster response workers from about.com

www.drugabuse.gov/about/welcome/messagestress905.html - information on the effects of stress on drug abuse from the national Institute on Drug Abuse