
Recovery 6 Months after Bushfire: Covid-19 Complexities

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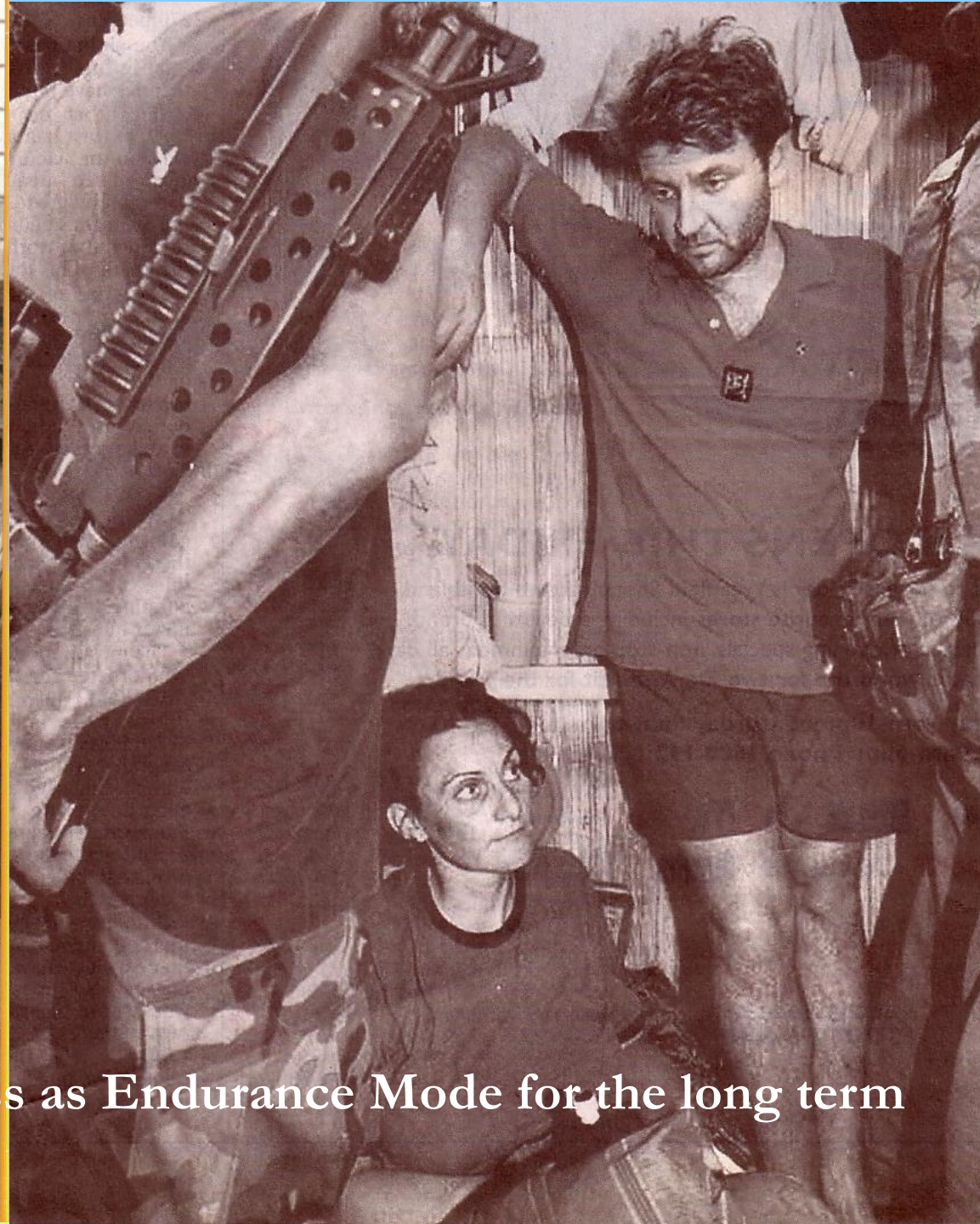
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Disaster Communities 6 months on:

- Relief Applications
- Blocks Cleared
- New Routines forming
- Fatigue
- Looking to an uncertain future
- Constant work and tasks

Calcutta Fire Rescue

Adrenalin Stress as Emergency Mode in the early stage



Gives way to Cortisol Stress as Endurance Mode for the long term

Kentucky Flood (1982)

- No significantly increased “mental illness”
- Levels of distress (depression, anxiety, stress) similar to major life crisis (death or spouse, loss of job)
- Distress made up of 4 Separate Factors:
 - Negative Emotions
 - Negative Thinking or difficulty thinking
 - Psychosomatic (Bodily) problems
 - Reduced positive emotions & attitudes
- Effects shown in those suffering *personal loss* and those exposed to *community destruction* but not loss.
- Required 2 years to regain pre-disaster health.

Key to understanding stress responses:

- Physical and mental exhaustion
- Unable to progress recovery tasks
- Unable to think clearly, problem solve
- Short term adaptations break down
- Loss of emotional control
- Unhelpful coping (substance use, diet, lifestyle, social problems)
- Isolation and poor self esteem

What happens to Trauma Responses?

- Early posttraumatic stress may resolve if addressed
- Many have the capacity to shut it down
- As exhaustion increases, adaptations break down
- Early coping deteriorates and posttraumatic stress appears (nightmares, startle, concentration problems, irritability etc)
- Anxiety and anger expressed in community and to services

Help Seeking as a factor

- Personal definition of the problem
- Understanding of helping services
- Cultural values of the role of using help
- Collective definitions of the problem by the community for each other
- Understanding peer support and professional help
- Self awareness of distress (stress shuts down self awareness)
- Community norms respecting need and avoiding myths of weakness
- Informal contacts with services facilitate use
- Most people are inexperienced in using services

Supporting Recovery

- **Pace of Recovery – Slow marathon not a sprint**
- **Participate in community – collective identity**
- **Use services**
- **Early self care plan**
- **Community values of quality of life during recovery**
- **Communal knowledge, information, access to networks –**
- **Quality of Social capital is the best predictor of speed and completeness of Recovery (Aldrich)**

COVID-19 & ISOLATION STRESSORS

- Uncertainty, invisibility and indeterminacy of threat
- Informational trauma - no clear sensory basis
- Depends on the idea – vulnerable to emotion
- Threat + Uncertainty = Anxiety
- Anxiety → Activation:
 - Anger
 - Self or other blame,
 - antagonism

Moving communication online

- Social structure expressed as communication system
- 80% of communication is **redundant** - adds no new information
- Redundancy carries
 - Embodiment of organisational values & priorities
 - Roles & structures
 - Knowledge & tradition
 - Ideas of how whole and parts fit together
 - Interpersonal values of support and care
 - Processing and integration of experience and task
 - Routines give orientation and security

Threat to identity

- Identity is the product of the reflection of self and activity in the world around me.
- Maintained by constant reciprocal flow of informal communication
- Disruption of the flow causes identity loss
 - Seems unreal, weird
 - Feel invisible, rejected, forgotten, devalued, helpless
 - Don't feel like me, uncertain, anxious
 - Loss of confidence in role, role confusion or role conflict

Consequences of identity threat

- Difference between Introverts & Extraverts.
- Stress leads to focus on external, concrete issues
- Contract perspective, loss of whole, focus on details
- Do what we can not what is needed
- Organisational Symptoms:
 - Redundant emails – jokes, trivia, gossip, details
 - Social withdrawal or engagement
 - Drawing or sharp boundaries,
 - Emotions of antipathy and distrust

Identity Promotion Strategies

- Informal, redundant communication
- Reflective time – meetings without agenda
- Communication without request – conveys value, care, interest, feedback (verbal has to carry more)
- Encourage self-expression to provide
 - Visibility; Reality; Normality
 - Confirm roles and organisational structures.
 - New Routines and systems to support memory and thinking
 - Attention to role adjustments and changes
 - Increased feedback, supervision and support opportunities
 - Normalise talk about reactions, worries, feelings

Recovery during Covid:

- Prioritise community building
- Create communication processes any way possible
- Values of stories and narratives of recovery
- Value informal exchange
- Online meetings to process information and work through tensions and worries
- Record Webinars and talks for groups around their issues
- DVD's and USB sticks as well as online
- Make links towards the post-Covid future.