

# **The 9/11 Experience: Mental Health and First Responders**

**New York Academy of Traumatic Brain Injury  
Annual Conference  
March 23rd, 2007**

**Leo J. Shea III, Ph.D.**

**Clinical Assistant Professor of Rehabilitation Medicine  
New York University School of Medicine  
Neuropsychological Evaluation and Treatment Services, P.C.**

**Judith G. Leventhal, Ph.D.**

**Clinical Instructor of Rehabilitation Medicine  
New York University School of Medicine**

## The 9/11 Experience:

- Our 9/11 experience at the NYU Medical Center.
- Mental health services provided.
- Delivery of services.
- Principles in a relational and community context.
- Ambiguous Loss.
- Resilience.

## The 9/11 Experience: Caveat

- “The Elephant in the Room”: While we will not be talking about specific brain processes, we acknowledge that trauma involves disruption in brain function.
- “The Missing Link”: We will not be addressing the children’s mental health needs in the face of trauma. We will be referring to them in the context of the family.

## The 9/11 Experience: Initial Thoughts and Feelings

- Disbelief.
- Confusion about facts (lack/distortion of information).
- Fear and anxiety.
- Concerns about personal safety.

## The 9/11 Experience: Initial Thoughts and Feelings

- Concerns about safety of loved ones.
- Concerns about separation from loved ones.
- Powerlessness.
- Reawakening of painful memories.
- Re-experiencing of past trauma.

## The 9/11 Experience: Initial Actions (No Disaster Plan in Place)

- Community of “victims and helpers.”
- Shifting boundaries.
- Supporting/stabilizing the mental health staff:
  - Acknowledge stress.
  - Identify relevant skills.
  - Identify previous experience.
  - The “self” of the therapist.

## The 9/11 Experience: Initial Actions

- Suspend normal routine.
- Take charge/seek direction.
- Assign/create a role.
- Mobilize initial resources (staff, supplies, etc.).

## The 9/11 Experience: Intervention Process

- Create Intervention Teams: Assigned hospital sites.
- Assess evolving on-site needs.
- Assign responsibilities within the team.
- Identify and access existing resources.
- Create “Pass-On” network.
- Update hospital administration.

## The 9/11 Experience: Disaster Shift

- Mental health focus.
- Front line responsibilities:
  - Secondary victims and families.
  - Hospital staff.
  - Medical examiner staff.
  - Volunteers.
  - Community outreach-linking.

## The 9/11 Experience: Interventions

- Emergency department.
- Family reception.
- Patient discharge.
- Pediatric and adult inpatients.
- NYU Downtown.

## The 9/11 Experience: Interventions

- Medical examiner's office.
- Hospital departments.
- Shift meetings.
- Staff debriefing.

## The 9/11 Experience: Interventions

- Corporate locations.
- Community organizations.
- Ground Zero workers.
- First responders.

## The 9/11 Experience: Addressing Basic Needs - Equilibrium and Control

- Promote a sense of safety.
- Maximize physical comfort.
- Decrease emotional intensity.
- Provide emotional support.
- Address practical needs.
- Update information.
- Reality testing.

## The 9/11 Experience: Principles

- No one is untouched.
- Normal responses to an abnormal situation.
- Mental health needs of direct and indirect victims.
- Inner resources accessed for recovery and healing.
- Mental health factors must be addressed.
- Community factors must be addressed.

## The 9/11 Experience: Principles

- Outreach mental health services focus on the practical.
- Separation from loved ones increases psychological consequences.
- Social supports are crucial to recovery and healing.
- Initial avoidance and numbing may signal later problems.
- Initial re-experiencing and hyperarousal less likely to signal later problems.

## The 9/11 Experience: Principles

---

- Trauma disrupts the normal order:
  - Shattered Assumptions.
  - Creates loss.
  - Produces chaotic thoughts.

## The 9/11 Experience: Principles

---

- Trauma memories tend to be:
  - Fragmented.
  - Concrete.
  - Disorganized.
  - Intensely emotional.

## The 9/11 Experience: Principles: A Key to Trauma Healing

- The ability to create a coherent organized story or narrative about the trauma.
- TBI victims have a particular challenge in the creation of an organized and coherent narrative due to disruption in:
  - Cognition.
  - Memory.
  - Language.
  - Organizational ability.
  - Emotional processing.

## The 9/11 Experience: Mental Health Focus

- Minimize exposure to traumatic stressors:
  - Psychological, physical and social.
- Educate about normal stress responses:
  - Physical, cognitive, emotional and behavioral.
- Assist in resolution of acute stress reactions.
- Facilitate resilience and inner resources.

## The 9/11 Experience: Mental Health Focus

- Minimize secondary trauma.
- Help to provide structure in a chaotic situation.
- Create a safe space.
- Be an active listener.
- Ask how you can be helpful.

## The 9/11 Experience: Mental Health Focus

- Don't make assumptions.
- Meet person "where s/he is!"
- Psycho-support vs. psychotherapy.
- Acknowledge the trauma.
- Validate feelings and reactions to trauma.

## The 9/11 Experience: Mental Health Focus

- Identify existing coping strategies.
- Identify existing resources/support systems.
- Focus on past competence.
- Develop an immediate step-by-step plan.
- “Light At The End Of The Tunnel”.

## The 9/11 Experience: Ambiguous Loss (Pauline Boss)

- Physically Present, Psychologically Absent.
- Psychologically Present, Physically Absent.
- 1970's families of MIA's of the Vietnam era.
- Goodbye Without Leaving: brain injury, depression, chronic illness and addiction.
- Leaving Without Goodbye: missing and natural disasters.
- Individual, family and community issue.

## The 9/11 Experience: Ambiguous Loss

- Life has changed. Life is put on hold.
- Blocked coping and decision-making.
- Increased interpersonal conflicts.
- Ambivalence and guilt.
- Rituals cease.
- Healing within a family and community context.

## The 9/11 Experience: Resilience

- Resilience:
  - The ability to be flexible in the face of everyday stress.
  - The ability to live comfortably with ambiguity.
  - The process by which individuals become stronger in difficult times.

## The 9/11 Experience: Resilience

- Resilience in the context of 9/11 and the wars addressed in this conference is an adaptive process involving:
  - Individual healing.
  - Family healing.
  - Community healing.

## The 9/11 Experience: Resilience Tasks

- Finding Meaning.
- Tempering Mastery.
- Reconstructing Identity.
- Normalizing Ambivalence.
- Revising Attachment.
- Discovering Hope.