Mental Health of Survivors of the 2010 Haitian Earthquake Living in the United States

[Announcer] This podcast is presented by the Centers for Disease Control and Prevention. CDC – safer, healthier people.

[Susan Laird] On January 12, 2010, Haiti experienced its worst earthquake in the past 200 years. This is Susan Laird and today I'll be interviewing Dr. Marc Safran who is a senior medical officer and the longest serving psychiatrist at the Centers for Disease Control and Prevention. A Captain in the U.S. Public Health Service, Dr. Safran serves as mental health lead for CDC's Haiti earthquake mission. Dr. Safran, thank you so much for being here today.

[Dr. Safran] My pleasure.

[Susan Laird] So, what are some of the mental health challenges experienced after this devastating earthquake in Haiti?

[Dr. Safran] Well first, just the sheer magnitude of the death and destruction and the massive numbers of injuries. Those are difficult for anyone to deal with. Then, there were tremors that just kept happening after the original earthquake, so people didn't know whether, in fact, the earthquake was over, or whether several days later, or weeks later there was going to be another earthquake. So, that the initial disaster never ended for many people. And then, in country, prior to the earthquake, there never were a lot of mental health professionals, and after the earthquake people couldn't get help, even if they needed it right away.

[Susan Laird] Well, how can challenges like that affect people's mental health?

[Dr. Safran] There are lots of ways, and it will affect each person differently. The human body's naturally very resilient and actually people are able to cope with and overcome incredible things that you'd never think they could, but still, something like this often takes time and so, initially, it's normal for, for everyone who's been through something like this to experience some type of mental health effects. Initially, it may even be hard to tell whose mental health effects are going to turn into mental illness and who will recover naturally on their own with the support of their family and friends. There are also normal mourning responses that people go through after losing one loved one; imagine losing so many friends and loved ones; and even what to do to honor the dead and just with those massive numbers of bodies, and maybe not even knowing where the person's dead relatives are. That's very difficult. There are also issues – very practical issues – like sleep. Well, where do you sleep after something like this just happened? People were sleeping out in the street because they were afraid that more buildings would collapse. And so just not getting enough sleep impacts people's mental health right there. Then, there are all of the illnesses that people can be exposed to, lack of food, and the situation changes; every day someone finds out new stressors. So, those can affect people's mental health in many different ways. And, as I said, some people will go on to develop mental illness.

[Susan Laird] Are there mental health issues related to the earthquake that clinicians in the United States need to be aware of when treating survivors?

[Dr. Safran] There are many issues. Probably the most difficult thing for a clinician seeing people who survived an earthquake several months ago, or even right after, the issue is that people won't necessarily tell you about their mental health problems. People often are expected – especially if it's several months later - to have gotten over them. And, in many cultures – in Haitian culture, as in our own culture here in the United States – many people still do not feel comfortable speaking about mental health issues. And so, the first thing for a clinician, often, is that the clinician may not know what the person's mental health issues are; the person may not tell them. Also, many of the symptoms that can appear to be mental health or mental illness symptoms can also be symptoms of general medical conditions. And even head injuries that the person may have sustained during the earthquake or perhaps infections that came about afterwards and many, many other issues that can basically masquerade as mental health problems, so it can be hard for the clinician to be able to tell the difference between a mental health problem and some other general medical problem. Either way, it's important to get a good thorough evaluation by qualified professionals and to consider all possibilities.

[Susan Laird] What are some things a family member can do if a loved one seems to be experiencing mental illness several months after an earthquake?

[Dr. Safran] The first thing is to recognize that not everything that seems like mental illness will necessarily turn out to be mental illness. Sometimes, just a general medical condition could show itself by signs or symptoms that really look like mental illness, but aren't at all. Also, people could sometimes be normally reacting to the stress of what they've experienced, because not everyone has time to think about what they've gone through at the time of the earthquake and sometimes it's just hitting them right then. But, the third possibility is that it could really be a mental illness, and possibly even a very serious mental illness. So, it's very important that if someone is thought to have mental illness, that they get a thorough evaluation by a qualified mental health professional and also by a qualified general medical professional.

[Susan Laird] Can you give us some idea of what we might look for?

[Dr. Safran] Well each mental illness expresses itself differently in different people. Look at whether the person is able to do the things that they're normally able to do – the things they need to do to live. What do they need to do to do their job, to live at home? Are they able to do those things? If they can't, that's a warning sign. If they can, it doesn't necessarily mean they don't have a mental illness, but if they can't, that would be something that would really cue you in that something was wrong. In general, if you think someone might have a mental illness, it's better to get the evaluation than not.

[Susan Laird] Dr. Safran, thank you so much for being with us today. I'm hearing that there's a lot of hope if we can identify the problems and provide support to people affected by this devastation. Thank you.

[Announcer] For the most accurate health information, visit www.cdc.gov or call 1-800-CDC-INFO, 24/7.