

Hurricane Keith in Belize

Post Disaster Stress Management Mental Health Program

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Reporting Areas: San Pedro, Ambergris Caye; Caye Caulker

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The objectives were:

- To provide effective counseling for individuals affected directly or indirectly by a disaster in order to prevent or alleviate any psychological problems.
- To be psychologically equipped to cope in the healthiest way possible.
- To conduct an assessment of the mental health needs of post-disaster survivors.

SAN PEDRO

Staff Assessment

On arrival to the island, we realized that the staff was overworked and stressed. A debriefing session was immediately conducted. The staff was put in a reception room of the Sun Breeze Hotel where the emergencies were being managed. This meeting was unusual for the staff as it was the first time and the instructions were that:

- we were not going to talk about patients
- they were to talk about their family and their reaction to what was happening and of the impact of the disaster
- the issues discussed in the groups were to be kept confidential and were not to be discussed after the session

Group meetings were held with the staff that was present who were mostly medical personnel from Belize City and some volunteer, except for one occasion when one member of staff from San Pedro participated. These meetings were repeated again during the psychiatrist's visits on Monday and Tuesday.

The meetings brought cohesiveness to the group and reinforced the importance of listening to each other's reactions and to their own emotions.

Assessment of Shelters

San Pedro R C Primary School

This was a very devastating scene. We did not do a head count but there was an estimated 130 people there. A group meeting was held with persons over age 30, who

shared their reactions during the storm and about what it was like living in a shelter. Most people felt that they had been unprepared. They had not thought that the hurricane would have been so devastating. Most lost everything. Some were renting and had no place to which to return. Some are foreigners with small children and have no other relatives in Belize to whom to turn. When they were conscious of their emotions of sadness they said, "importante es que estamos vivos" (the most important thing is that we are still alive). Their experiences during the storm were another issue.

The shelter is a two-story school building. People began to use both floors as shelter. However, the roof of the first floor began to lift in the wind forcing the people to go down to the first floor, which was already overcrowded. In the middle of the hurricane when they decided that the room could not take anymore, the men went back on the second floor and the women and children stayed on the ground floor. Since they were not prepared, two days passed without meals. Access to the toilet was a tremendous issue that began to cause fights and arguments. No shelter manager was available and none had been identified up to October 11th.

By October 11th there were 98 people staying at the school who were worrying about their houses and finding food, since the school was to reopen the next week.

A small meeting was conducted for "conflict resolution". The living conditions make some people more cooperative while increasing the stress and decreasing the frustration tolerance for others, resulting in arguments over minor concerns. For example, before my arrival two families were about to fight for clothesline space and another fight had broken out over a tin of Milo.

Other Activities

- A visit to the only radio station on the island: Public service announcements were made that counseling and psychiatric consultation services were available; also a talk was given on reactions to stress and stress management.
- A visit with NEMO personnel to remind them of the importance of stress management for themselves, to take time out, and to be aware of the negative impact of stress.
- Individual meetings with all the MDs on the island in order to discuss their experiences and reactions, and to explore their methods of coping.
- Individual counseling sessions were held at the Sun Breeze Hotel. Most people were self-referred, but some were referred by physicians.

Assessment of Mental Health Status

Common Mental Symptoms included great sadness and emotionality; anger that this happened to them; feeling helpless and hopeless; increased irritability; flashbacks of vivid images and nightmares.

Common Diagnoses: Generalized Anxiety Disorder (GAD), PTSD, Panic Attack and Depression.

Common Physical Symptoms:

- headaches
- palpitations
- breathlessness
- feeling sick

- upset stomach/diarrhea
- fainting spells
- chest pains and discomfort

Most people had somatic symptoms that they did not necessarily connect to their reaction to stress.

Plan of Action

- Continue the presence of PNP on the island for now.
- Conduct public education on stress management and the expected reactions to disasters in order for people to better handle their emotions and behavioural responses.
- Conduct similar intervention on Caye Caulker.

CAYE CAULKER

Assessment Interviewees

- Caye Caulker Health Center: Nurse, Public Health Inspector, Medical Doctors
- Caye Caulker Police Station: Police Corporal
- Caye Caulker Village Council: Chairperson
- Other: Businessperson, Shelter Inhabitant

Assessment of Mental Health Status

Upon arrival at the airstrip in Caye Caulker, one is met by the picture of an island devastated: trees destroyed and piled high everywhere, debris from houses on every corner and along the streets, and water flowing into mud wherever one looks. The other major impression is that there are few inhabitants remaining here, and the hive of activity is focused in a few specific areas, such as near the offices of the Health Center and the Village Council, which are housed in the same building. What strengthens this impression of a village deserted is the presence of a group of Mennonites, Red Cross, BDF, and other such workers from the mainland, who are clearly occupied with the clearing of the land and restoring of order. Yet despite this, the general picture is that of "hope" and "optimism" according to the persons interviewed, especially the health personnel.

In assessing the mental health of the residents of the island, the health personnel agree that incidences of poor mental health are few. The clinical picture is one of relative well being, within the normal parameters of human reactions to a disaster. They reported a total of two families who are clearly distressed by the loss of their homes, and of one other case of a person presenting with symptoms of trauma, specifically depression, during this period. While some people were obviously "broken-hearted" at the loss of their homes, the sentiment expressed was that of stoicism; that is, people were glad to be alive and were more concerned with daily survival, such as finding food and safe water. In addition, the persons who were observed to be more traumatized by the situation were those who were not Belizeans per se but foreigners who had relocated to Belize and had not experienced such conditions previously. According to the health personnel, many such persons have left the island. Others who have left have been sent away by their families because they also were unable to handle the aftermath of the hurricane. These include some of the elderly, who were seen as having some difficulties coping as well.

Assessment of Drug Use/Abuse

Factors of risk for the islanders include drug use/abuse, specifically alcohol. The island, however, is currently still under curfew, and no alcohol is allowed to be for sale at any time on the island. This has served to curb the normally greater amount of drinking and drunkenness that the islanders are said to experience on weekends or during holidays. The Chairperson of the Village Council noted that he was aware that the biggest problem for them would have been alcohol consumption, and that Caye Caulker presented a unique case in this regard. As such, upon advisement, he advocated for the prohibition of the sale of alcohol. Nevertheless, the patrol for the curfew has picked up several (approx. 4-5) persons severely under the influence of alcohol. Drug use is otherwise reported as minimal.

The Chair also reported that people were certainly dealing with highly stressful conditions, and those who have lost their homes are particularly vulnerable at this time. He described a sense of "worry" regarding their water situation, the debris and garbage remaining, and the rebuilding effort, but felt that other issues were not dominant at this time. The general picture is that, while many islanders have pulled together with others coming in to provide assistance to address the needs of the community, some are still involved in individual or personal efforts at rehabilitation of property and the like. A health interviewee suggested that a factor of resilience in their sense of "calmness" is the relatively high religiosity of the community.

Assessment of Level of Violence

This tranquil atmosphere is noted as well in the absence of public violence. The general report was that "people are tending to their own business", respecting the curfew regulations, and otherwise being concerned about life on a personal level. No reports of fights, looting or other forms of robbery have been made since the curfew went into effect immediately after the hurricane. Most interviewees noted that the problems found, such as with loitering or alcoholism, were with those who were prone to such behaviour before the storm. The Police suggested that the increased monitoring activity on their part, with assistance from the BDF and others, has perhaps moderated this situation. This relatively 'laid back' and individualistic orientation, however, appears to be the norm for these island inhabitants.

In summary, the interviewees report a relative tranquility of atmosphere, and very few incidences of mental illness or reactions to stress. This may be attributed to factors such as the imposition of the curfew, the departure of persons who were having greater difficulties coping with the situation, and the original 'island personality', which has been described touristically as a 'sleepy fishing village'.

Recommendations

Nevertheless, the recommendation is for continued monitoring of the mental health situation among the inhabitants of Caye Caulker. This suggestion is made on the basis of the comments made by the health personnel regarding the nature of the situation: specifically, the current unusual conditions have geared people to survival mode but have not provided them with time to assess the personal nature of the damage. Reactions to traumatic experiences, such as natural disasters, vary widely, and are part of a process of integration of the new circumstances and feelings. Such feelings range from denial and anger to acceptance, among others. As such, the stage in the process in which people find themselves at any given time must be taken into consideration in assessing the needs of the islanders now as compared to the future. Furthermore, the more

individualistic orientation of the islanders may prove an obstacle in terms of facilitating support on other levels. Another concern is that the externally imposed order will be removed and the islanders will be lacking the support this provides at this time in dealing with the long-term consequences of the hurricane. The socioeconomic conditions will be of particular importance in this respect as they move from 'survival' to 'normal' modes of functioning. How they will react to their drastically changed circumstances, once the 'crisis' is over is yet to be determined.

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