



ASTSS

Australasian Society for
Traumatic Stress Studies

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Newsletter for the
**Australasian Society for
Traumatic Stress Studies**

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BUSHFIRE REFLECTIONS

By Paul Valent

With bushfires currently spreading their destruction, and Melbourne being covered with a pall of smoke for the first time since the Ash Wednesday bushfires, I have been asked to write a few reflections on Australian bushfires and their heritage for our Society.

Like the seeds which bushfires release for future growth, so twenty years ago the Ash Wednesday bushfires released seeds, which generated traumatology in Australia,

Indirectly, they gave birth to ASTSS. They were also a seminal personal experience for me.

The current bushfires, with images of burnt houses, human sorrow and heartache, tears and courage, community spirit and blame, indeed evoke déjà vu experiences of our team in Mount Macedon in 1983.

I remember how we saw the media images in raw reality, but we also saw

beyond them. As well as the best in human spirit, we saw alternating altruism and selfishness, survival guilt and secret shames, idiosyncratic meanings, and a wide variety of psychosomatic, psychological, and social consequences. These rippled with their particular harmonics and overtones across the spectra of society, time and generations. We provided our minds and our emotions to promote awareness, understanding, and correction of currently inappropriate responses.

Bushfire Reflections continued

The bushfires were seminal for me, because they opened my eyes to a variety of survival strategies; and their adaptive and maladaptive biological, psychological, and social responses, accounting for the great variety of traumatic stress responses. They and their radiations enabled me to formulate a wholist traumatology framework. The bushfires are the first clinical cases in my books.

Where have we progressed in the last twenty years?

First, the ubiquitous phases and responses of disasters are now well described, and the current one will play itself out accordingly. Second, trauma counselling for survivors and emergency personnel such as fire-fighters is now a given. Third, efforts have been made to educate mental health professionals, disaster managers, and the public about disaster responses and what to do about them. Fourth, ASTSS and its members have been very active in all these efforts, and have been recognized nationally and internationally for their expertise and academic achievements.

Further, we have contributed to two lasting heirlooms whose seeds originated in the previous bushfires. One is a pamphlet 'Coping with a Major Personal Crisis', appreciated during the Ash Wednesday bushfires, subsequent Australian disasters, and overseas.

The other document, 'Guidelines for Psychological Service Practice', is a mutual attempt between ASTSS and Emergency Management Australia (EMA) to promote a world's best practice training manual for psychological assessments and interventions in disasters. It can be found on the EMA website www.ema.gov.au under Canberra bushfires. It was used in the Turkish earthquakes, and has been available on the ISTSS website since immediately after 9/11.

Where may we head in the next twenty years?

Much needs to be done still. It is not clear how well trained are the 'trauma counsellors' supposedly already at work in the bushfires, and who aggregate at other disasters. In spite of education, training has been thin, and often the most experienced trauma workers leave their geographical and clinical areas.

I wonder whether this time a new generation of seeds will be released and sow a much expanded role of ASTSS for the future. Perhaps we are reaching a platform of knowledge and a critical mass of experts to not shy away from teaching trauma, that widespread foe of human happiness. The theme of our March conference augurs well.

Perhaps in the next twenty years there will develop a well recognized discipline of traumatology, with a

training course, accreditation, and career paths for high standard practitioners. Otherwise we will continue to be impotent when disasters such as East Timor and Bali arise, and will tut-tut at trauma counsellors' lack of expertise. Note that had surgery not developed as an expert discipline, barbers may have continued to perform surgery on battle fields.

In conclusion, we have moved a great distance in the last twenty years. However, as guardians of trauma knowledge we have to make sure that it flourishes, is expertly handled, and is channelled in a way that provides maximum welfare to the community.

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