

US Military Nurses

Serving Within the Chaos of Disaster



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KEYWORDS

- Disaster response • Emotional response • Unknown • Existential growth
- Military nurses • Phenomenology

KEY POINTS

- Responding to disasters is not the same as going to combat. In war, you know what is expected. Going into a disaster, you are moving into the unknown.
- In war, you are prepared; plans are in place; basic systems are established. In disasters, you make do with what you have and use your ingenuity.
- Military members are expected to be strong and demonstrate endurance. However, during disaster response, their resiliency storehouses diminish. Nurses remarked that emotional issues may arise and linger.
- Disaster response changes an individual's perception of destruction. This new insight led to a greater appreciation of life.

INTRODUCTION

When you hear the word *disaster*, what thoughts or images come to mind? Do you picture a particular event you remember reading about or perhaps one broadcasted on the evening news? For military nurses who participated in this study, the word *disaster* has a very personal meaning because it is something they endured, an experience that will always stimulate special memories.

Disasters have been defined as “an event concentrated in time and space, in which a society ... undergoes physical harm and social disruption”.¹ Millions of individuals

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around the world fall subject to these catastrophic events each year. Moreover, the frequency and intensity of these events continue to increase. During these chaotic times, when the local disaster response efforts become overwhelmed, military forces may be requested to assist. The revised 2004 Stafford Act provides authorization for military units to be deployed for disaster response efforts that may include logistics, surveillance, sanitation, and medical support.² Since these acts have been written, federal health care providers, specifically military nurses, have increasingly been present during domestic and international disaster events to render care to those injured.

Historical nursing disaster response efforts began with the works of Florence Nightingale during the Crimean War, Jean-Henry Dunant's 1859 responses during the War of Italian Unification that lead to the establishment of the International Red Cross, and aid provided by Clara Barton in 1881 during the American Civil War, which resulted in the founding of the American Red Cross.^{3,4} Continuing in 1923, military nurses began what has become an ongoing record of providing care during domestic and international incidents. That year, 2 groups of Army nurses provided disaster relief following an earthquake that destroyed a city in the Philippines. In the 1960s, military nurses responded to Chile, Iran, Alaska, and Yugoslavia after earthquakes and tidal waves to render aid. Responding in the early 1970s, military nurses provided assistance during a Nicaraguan earthquake and supported Operation New Life and New Arrivals involving Indochinese refugees into the United States after the Vietnam War.⁵

In more recent times, thousands of military nurses have continued to be instrumental in both domestic and international disaster responses. Some of these efforts include the 1992 famine crisis in Somalia, the 2004 Banda Aceh tsunami, Hurricane Katrina, the earthquake in Pakistan, the 2010 earthquakes in Haiti, Japan's 2012 earthquake and tsunami, and, in 2013, Hurricane Sandy. However, the number of nurses who have participated in disasters is poorly documented.⁶⁻¹³

The preponderance of existing published research focuses on military nurses' experiences in combat, but little is known about these nurses' experiences in disaster response and how to better provide for their well-being.

Therefore, the purpose of this study was to gain an understanding of the essence of military nurses' experiences in responding to disasters. One research question drove the study: What is the experience of military nurses during and/or following a disaster response? For this study, *disaster* was defined as any noncombat mission, such as humanitarian relief or response to a natural or human-made event outside of warfare.

The military nurses who participated in this study began to fill the gap in scientific knowledge through their stories. As a result, we have a better understanding of what disaster response entails, told to us through the voice of the experts. The outcomes of this research adds to the practical information regarding the overwhelming effects, response actions, readiness, and training needs of military nurses who have responded to disasters in the past. The findings can help us better prepare to assist those who may respond to these traumatic events in the future.

METHODS

A qualitative method was used to illuminate the nurses' experiences in responding to disasters. Existential phenomenology founded on Merleau-Ponty's philosophy, as described by Thomas and Pollio,¹⁴ was used to conduct the research. This method allows the participant to provide data through their words based on experiences as they lived them; their voices become personified and alive as their stories unfold. A purposeful, snowball sampling method was used to elicit participants.

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