When the Tsunami hit South Asia, it was reported that over 200 Hong Kong residents were missing in Phuket, Thailand. As a result, the Government sent a team of rescuers and health care professionals to assist the families of the missing and the bereaved. This included clinical psychologists who were sent over there to attend to the emotional trauma experienced by the victims and families and to provide support and debriefings to the official rescue team members.

At the same time, there were the non-government groups of relief volunteers from the local community who wanted to offer their volunteer services in Phuket. These included members of the non-government agencies like the Hong Kong Red Cross (HKRC), enthusiastic individuals who bought a ticket and flew there to see how they could help, and corporate groups such as tourist guides who had good knowledge of the city and the Thai language. There were also media reporters who visited the disaster sites and saw the gruesome scenes and damage of the Tsunami. The Critical Incident Team (CIT) of the Division of Clinical Psychology, Hong Kong Psychological Society, which has been a strategic response team providing voluntary community psychological support in major disasters since 1993 after the Lan Kwai Fong Incident, was immediately mobilized.

Like most ordinary Hong Kong citizens, members of the CIT followed the news reported in media with great concerns. "What can we do?" was probably the first question I raised to myself after recovering from the gloomy feelings aroused by the news of the Tsunami. In the midst of helplessness, I also had doubts: "Why were health care professionals in Hong Kong sent to the disaster area?" "What and how can they contribute?"

When I looked back, I am grateful that the motto: "Plan for disaster while you are safe" (居安思危) has governed the development and mission of the CIT. Since 2002, we have formed partnership with the HKRC and provided training for a group of HKRC’s first aiders who wanted to equip themselves with skills of psychological first aid so that they could provide the appropriate psychological support for victims or other emergency helpers in times of disaster. This marked the beginning of the Psychological Support Team (PST) comprising of volunteers in HKRC. The Tsunami disaster was probably the first major disaster that put the role and operations of the PST to test. It also provided the opportunity for me as a member of the CIT to offer on-site psychological support to people in need in a massive disaster. Based on a needs assessment by the HKRC, a PST was sent to Phuket to offer on-site psychological support to victims, emergency helpers and media workers from Hong Kong. As a worldwide humanitarian service provider, the symbol of the Red Cross borne by the PST of HKRC demonstrated to be very helpful in earning the trust of victims, volunteers and media workers from Hong Kong and bridging with the local Red Cross networks in Phuket.

Based on the previous experience of the CIT and later confirmed by the on-site experience of the PST, the victims and families were well taken care of by the government rescue teams, while the most easily overlooked or hard to reach groups were the individual volunteers and reporters. According to the assessment of the HKRC’s headquarters, on-site report of the PST, and experience of the CIT, the CIT seized the chance of providing psychological support for three niche groups: 1) volunteers, 2) reporters, and 3) members of the HKRC’s PST who were sent to Phuket. Psychological ‘pre-briefing’ and ‘debriefing’ were conducted for HKRC’s volunteers in Hong Kong.