Disasters commonly occur. They may be caused by nature, including earthquakes, floods, wildfires, hurricanes, or tornadoes. In addition, disasters may be human-made, caused by people through mishap or neglect, such as a work accident or an apartment fire, or by deliberate intention, as with terrorism. Often large numbers of people are affected and they share their experience of trauma and traumatic loss. Many losses may occur after a disaster, including loss of loved ones, coworkers, neighbors, and pets, and loss of homes, workplaces, schools, houses of worship, possessions, and communities. Survivors may also lose their routine way of living and working, going to school, and being with others. Some may lose their confidence in the future.
Some disasters, such as terrorism, continue over a long period of time and may create an on-going insecurity and exposure to danger or threat of danger which may make it more difficult for some people to function in their lives. After a disaster, it is normal to experience a number of stress reactions that may continue for a significant period. And after the sudden, traumatic loss caused by disasters, it is normal for grieving and mourning to be uneven, more intensely felt, and extended over time. In all disasters, the experience of safety, security, and predictability in the world is challenged, and a sense of uncertainty becomes a part of life.
What can I expect after experiencing a disaster?

Most child, adolescent, adult, and older adult survivors experience some of the following normal stress responses to varying degrees. They may last for many months after the disaster has ended, and even longer. Normal stress reactions include:

- Emotional (feeling) reactions: feelings of shock, disbelief, anxiety, fear, grief, anger, resentment, guilt, shame, helplessness, hopelessness, betrayal, depression, emotional numbness (difficulty having feelings, including those of love and intimacy, or taking interest and pleasure in day-to-day activities)

- Cognitive (thinking) reactions: confusion, disorientation, indecisiveness, worry, shortened attention span, difficulty concentrating, memory loss, unwanted memories, repeated imagery, self-blame

- Physical (bodily) reactions: tension, fatigue, edginess, difficulty sleeping, nightmares, being startled easily, racing heartbeat, nausea, aches and pains, worsening health conditions, change in appetite, change in sex drive
• Interpersonal reactions: neediness, dependency, distrust, irritability, conflict, withdrawal, isolation, feeling rejected or abandoned, being distant, judgmental, or over-controlling in friendships, marriages, family, or other relationships.

• Spiritual (meaning) reactions: wondering why, why me where was God; feeling as if life is not worth living.
What factors increase the risk of lasting vulnerability?

During or after massive disasters, many survivors may be directly exposed to or witness things that may make them particularly vulnerable to serious stress reactions. Disaster stress may revive memories or experiences of earlier trauma, as well as possibly intensifying pre-existing social, economic, spiritual, psychological, or medical problems. While trauma reactions can become lasting problems, the shared experience of disasters and people’s resiliency can provide support. Being aware of risk factors is important. They include:

- Loss of family, neighborhood, or community
- Life-threatening danger or physical harm (especially to children)
- Exposure to horrible death, bodily injury, or bodies
- Extreme environmental or human violence or destruction
- Loss of home or valued possessions
- Loss of communication with or support from important people in one’s life
- Intense emotional demands
- Extreme fatigue, weather exposure, hunger, or sleep deprivation
- Extended exposure to danger, loss, emotional/physical strain
• Exposure to toxic contamination (such as gas, fumes, chemicals, radioactivity, or biological agents)

Studies show that some individuals are more vulnerable to serious stress reactions and lasting difficulty, including those with a history of:

• Other traumatic experiences (such as severe accidents, abuse, assault, combat, immigrant and refugee experiences, rescue work)

• Chronic medical illness or psychological problems

• Chronic poverty, homelessness, unemployment, or discrimination

• Recent or earlier major life stressors or emotional strain (such as divorce or job loss.)
What can survivors do to reduce vulnerability to serious emotional reactions and to achieve the best recovery from disaster stress?

Observations by mental health specialists who assist survivors in the wake of disaster suggest that the following steps help to reduce stress symptoms and to promote post-disaster readjustment:

- Protect: find a safe haven that provides shelter, food and water, sanitation, privacy, and opportunities to sit quietly, relax, and sleep, at least briefly.

- Direct: begin working on immediate personal and family priorities to help you and your loved ones preserve or regain a sense of hope, purpose, and self-esteem.

- Connect: maintain or re-establish communication with family, peers and counselors in order to talk about the experiences. Survivors may want to find opportunities to "tell their stories" to others who express interest and concern and, when they are able, to listen to others as they tell theirs, in order to release the stress a little bit at a time and try to create meaning.

- Select: identify key resources such as Federal Emergency Management Agency (FEMA), the Red Cross, the Salvation Army, local and state health departments for clean-up, health, housing, and basic emergency assistance. Identify local cultural or community supports to help maintain or reestablish normal activities such as attending religious services.
Taking every day one at a time is essential in disaster's wake. Each day is a new opportunity to take steps toward recovery. People affected by disasters should try to:

• Focus on what’s most important to themselves and their families today;

• Try to learn and understand what they and their loved ones are experiencing, to help remember what's important;

• Understand personally what these experiences mean as a part of their lives, so that they will feel able to go on with their lives and even grow personally;

• Take good care of themselves physically, including exercising regularly, eating well, and getting enough sleep, to reduce stress and prevent physical illness;

• Work together with others in their communities to improve conditions, reach out to persons who are marginalized or isolated, and otherwise promote recovery.
How would I decide I need professional help?

Most disaster survivors experience many normal responses and for some, their personal resources and capacities may grow and their relationships may strengthen. However, many disaster survivors experience reactions during and after disasters that concern them, often when the disaster was caused by human action or included horror or loss of life. Some problematic responses are as follows:

- Intrusive re-experiencing (terrifying memories, nightmares, or flashbacks)
- Unsafe attempts to avoid disturbing memories (such as through substance use or alcohol)
- Complete emotional numbing (unable to feel emotion, as if empty)
- Extended hyperarousal (panic attacks, rage, extreme irritability, intense agitation, exaggerated startle response)
- Severe anxiety (paralyzing worry, extreme helplessness)
- Severe depression (loss of energy, interest, self-worth, or motivation)
- Loss of meaning and hope
- Sustained anger or rage
- Dissociation (feeling unreal or outside oneself, as in a dream; having "blank" periods of time one cannot remember)
If after the end of a disaster, these normal experiences do not slowly improve or if they worsen with time, it is helpful to find professional support. People who wish to consider therapy should select a trained mental health professional who is knowledgeable about trauma and natural disasters.

This pamphlet is adapted from a fact sheet designed by the National Center for PTSD and edited by the Public Education Committee of the International Society for Traumatic Stress Studies.

**Where to Go for Help**

People who wish to consider therapy should select a trained mental health professional who is knowledgeable about trauma and natural disasters. A family doctor, clergy person, local mental health association, state psychiatric, psychological, or social work association, or health insurer may be helpful in providing a referral to a counselor or therapist with experience in treating people affected by traumatic stress. For more information about traumatic stress or the International Society of Traumatic Stress Studies, call 1-800-469-PTSD (7873).
What is ISTSS?

The International Society for Traumatic Stress Studies is a nonprofit organization whose goal is to ensure that everyone affected by trauma receives the best possible professional response, and to reduce traumatic stressors and their immediate and long-term consequences worldwide.

ISTSS provides an independent community for supporting and sharing research, clinical strategies, public policy concerns and theoretical formulations on trauma. ISTSS members include psychiatrists, psychologists, social workers, nurses, counselors, researchers, journalists, clergy, law enforcement, correctional facilities administrators, advocates and others with an interest in the treatment and study of traumatic stress.

Members work in clinical and nonclinical settings around the world, including public and private health facilities, private practice, universities and research foundations.

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