Survivors of Disasters

Every year, millions of Americans are affected by unexpected tragedies and natural disasters. Survivors face the danger of death or physical injury, and the loss of their homes, possessions, and communities. Such stressors place survivors at risk of behavioral and emotional re-adjustment problems.

This fact sheet considers three questions often asked by survivors: What psychological problems may result from disaster experiences? What factors increase the risk of readjustment problems? What can disaster survivors do to reduce the risk of negative psychological consequences and to best recover from disaster stress?

What psychological problems result from disaster experiences?

Most child and adult survivors experience normal stress reactions for several days, such as:

- Emotional reactions: temporary feelings (i.e., for several days to a couple of weeks) of shock, fear, grief, anger, resentment, guilt, shame, helplessness, hopelessness, emotional numbness (difficulty feeling love and intimacy, or in taking interest and pleasure in day-to-day activities)
- Cognitive reactions: confusion, disorientation, indecisiveness, worry, shortened attention span, difficulty concentrating, memory loss, unwanted memories, self-blame
- Physical reactions: tension, fatigue, edginess, difficulty sleeping, bodily aches or pain, being startled easily, racing heartbeat, nausea, change in appetite, change in sex drive
- Interpersonal reactions in relationships at school, work, in friendships, in marriage, or as a parent, such as: distrust, irritability, conflict, withdrawal, isolation, feeling rejected or abandoned, being distant, judgmental, or over-controlling.

Most disaster survivors only experience mild normal stress reactions, and disaster experiences may even promote personal growth and strengthen relationships. However, as many as one in three disaster survivors experience some or all of the following severe stress symptoms, which may lead to lasting post-traumatic stress disorder (PTSD), anxiety disorders, or depression:

- Dissociation (feeling completely unreal or outside yourself, like in a dream; having “blank” periods of time you cannot remember)
- Intrusive re-experiencing (terrifying memories, nightmares, or flashbacks)
- Extreme attempts to avoid disturbing memories (such as substance abuse)
- Extreme emotional numbing (completely unable to feel emotion, as if utterly empty)
- Hyperarousal (panic attacks, rage, extreme irritability, intense agitation)
- Severe anxiety (paralyzing worry, extreme helplessness, compulsions or obsessions)
- Severe depression (complete loss of hope, self-worth, motivation, or purpose in life)

What factors increase the risk of lasting readjustment problems?

Survivors are at greatest risk for severe stress symptoms if any of the following are either directly experienced or witnessed during or after the disaster:

- Life-threatening danger or physical harm (especially to children)
- Exposure to gruesome death, bodily injury, or bodies
- Extreme environmental or human violence or destruction
- Loss of home, valued possessions, neighborhood, or community
- Loss of communication with/support from close relationships

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• Intense emotional demands (such as faced by rescue personnel or caregivers)
• Extreme fatigue, weather exposure, hunger, or sleep deprivation
• Extended exposure to danger, loss, emotional/physical strain
• Exposure to toxic contamination (such as gas or fumes, chemicals, radioactivity)

Studies also show that some individuals have a higher than typical risk for severe stress symptoms and lasting PTSD, including those with a history of:

• Exposure to other traumas (such as severe accidents, abuse, assault, combat, rescue work)
• Chronic medical illness or psychological disorders
• Chronic poverty, homelessness, unemployment, or discrimination
• Recent or subsequent major life stressors or emotional strain (such as single parenting)

Disaster stress may revive memories of prior trauma, as well as possibly intensifying pre-existing social, economic, spiritual, psychological, or medical problems.

**What can disaster survivors do to reduce the risk of negative psychological consequences and to best recover from disaster stress?**

Scientific studies are just beginning to be conducted to answer this question. Observations by disaster 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 liquids, sanitation, privacy, and chances to sit quietly, relax, and sleep at least briefly
- **Direct**: begin setting and working on immediate personal and family priorities to enable you and your significant others to 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 your experiences—take any chance to “tell your story” and to be a listener to others as they tell theirs, so that you and they can release the stress a little bit at a time in disaster’s wake
- **Select**: identify key resources such as FEMA, the Red Cross, the Salvation Army, or the local and state health departments for clean-up, health, housing, and basic emergency assistance

Taking every day one-at-a-time is essential in disaster’s wake. Each day is a new opportunity to **FILL-UP**:

**Focus Inwardly** on what’s most important to you and your family today;

**Look and Listen** to learn what you and your significant others are experiencing, so you’ll remember what is important and let go of what’s not;

**Understand Personally** what these experiences mean to you as a part of your life, so that you will feel able to go on with your life and even grow personally.