



# Disaster Stress References

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## Annotated Bibliography

**Aquilera, D., Planchon, L. (1995). The American Psychological Association-California Psychological Association Disaster Response Project: Lessons From the Past, Guidelines for the Future. *Professional Psychology: Research and Practice*, 26, 550-557.**

This article discusses the role of the APA-CPA Disaster Response Project in the development of state and local disaster response systems. The authors were both involved in the relief efforts following the Loma Prieta earthquake in San Francisco. Based on their experiences the authors offer guidelines for developing and maintaining disaster relief networks as well as suggestions for improvements in training procedures. The authors conclude with a number of suggestions for the future of disaster response in mental health.

**Breton, J., Valla, J., Lambert, J. (1993). Industrial Disaster and Mental Health of Children and Their Parents. *Journal of the American Academy of Child and Adolescent Psychiatry*, 32, 438-445.**

This article offers a study concerning the effects of industrial disasters on children and their parents. This study is based on research done following the Three Mile Island disaster. The researchers in this case sought to determine how long the psychological impact of disasters weighed on children. Also the researchers wanted to determine the amount of understanding between children and their parents. Using a number of different questionnaires for both the children and their parents the authors of this article made findings that were contrary to previous research. They found that a majority of parents accurately estimate the intensity of duration of the disaster's impact on their children. The authors warn at the end of this article that despite their findings there is still a substantial amount of research that needs to be conducted in this area.

**Dixon, P. (1991). Vicarious Victims of a Maritime Disaster. *British Journal of Guidance and Counseling*, 19, 8-12.**

This article highlights a study of the psychological impact of the ìHerald of Free Enterprise Disasterî on a group of English Channel ferry workers. In particular the author addresses the effects on peripheral victims, people not immediately connected with the disaster. The study consisted of seventeen cross channel ferry workers who had had no direct contact with the disaster, but all were afflicted in a way very similar to disaster victims. In particular they all displayed symptoms of PostTraumatic Stress Disorder seemingly related to the accident. The author believes that in situations such as these the group of seventeen is representative of a much larger population of hidden peripheral victims. It is suggested that in the future routine screening should be conducted in order to identify peripheral victims in need of help.

**Granot, H. (1995). Israeli Emergency Social and Mental Health Services in the Gulf War: Observations and Experiences of a Mental Health Professional. *Journal of Mental Health Counseling*, 17, 336-346.**

This article discusses the role of mental health professionals in the Gulf War. More specifically the author explores the treatment strategies that were implemented by Israeli Social and Mental Health Services. The author questions the effectiveness of the treating both the direct and indirect victims of SCUD missile attacks. Although much of the treatment had positive effects, the author found that it was severely lacking in some of the most common areas of crisis intervention. This article concludes with a number of suggestions for future intervention in similar crisis situations.

**Havenaar, J., Van Den Brink, W., Kasyanenko, A., Poelijoe, N., Wohlfarth, T., Meijler-Iljina, L. (1996). Mental Health Problems in the Gomel Region (Belarus): An Analysis of Risk Factors in an Area Affected by the Chernobyl Disaster. *Psychological Medicine*, 26, 845-855.**

This article recaps a study conducted in the Gomel region of the former Soviet Union. The city of Gomel and the surrounding region is one of the areas most severely affected by the Chernobyl disaster. The purpose of the study was to determine whether or not psychological distress was more common in a number of groups thought to have been most intensely impacted by the nuclear disaster. These ìrisk groupsî were tested for general dysfunctionís of mental health using a twelve-item version of the General Health Questionnaire. This study found that even six years after the Chernobyl disaster the prevalence of psychological distress in the Gomel region was unusually high

when compared to other parts of the world. The authors suggest that the long term effects of the Chernobyl disaster cannot be fully understood without first studying a control sample from elsewhere in the former Soviet Union.

**Holaday, M., Smith, A. (1995). Coping Skills Training: Evaluating a Training Model. Journal of Mental Health Counseling, 17, 360-367.**

This study was designed to determine the effectiveness of learning coping strategies prior to exposure to disasters and the rescue operations directly associated with them. The authors of this study used a script compiled from an extensive literature review as their main tool. The participants viewed a videotaped disaster and were asked to place themselves on the scene. The results of this study show that people who have had previous training display a more extensive use of coping skills and a higher level of comfort in the aftermath of a disaster.

**Holaday, M., Warren-Miller, G., Smith, A., Yost, T. (1995). A Preliminary Investigation of On-the-Scene Coping Mechanisms Used by Disaster Workers. Journal of Mental Health Counseling, 17, 347-359.**

This study investigated the different coping mechanisms used by different types of disaster workers. The groups targeted in this study were emergency room personnel, firefighters, police, trauma workshop participants and university personnel. These groups were given questionnaires designed to assess the use of 11 coping mechanisms organized into five coping strategies. These five strategies are task-focused behavior, emotional distancing, cognitive self-talk, altruism and social-peer support. The author briefly discusses previous literature related to the five different strategies. The conclusions reached in this study all point to the social-peer support strategy as an integral part of coping for all five groups of disaster workers.

**Karakashian, M. (1994). Countertransference Issues in Crisis Work with Natural disaster Victims. Psychotherapy, 31, 334-341.**

This article addresses the role of countertransference in therapeutic environments. The author begins by discussing the historical views of countertransference from Freud's belief that it was derogatory to modern day views that it is an essential part of the therapeutic process. These modern day views were illustrated by a comparison of two

groups of counselors working with trauma victims. One group met periodically to discuss the effects of treatment on themselves (countertransference) while the second group did not. A study conducted with the second group revealed symptoms of PTSD and depression. However, when the second group was allowed to discuss the countertransference they experienced while counseling the prevalence of symptoms decreased dramatically. From these results the author concludes that countertransference is indeed an essential part of the therapeutic process.

**Krug, R., Nixon, S., Vincent, R. (1996). Invited Editorial Psychological Response to the Oklahoma City Bombing. *Journal of Clinical Psychology*, 52, 103-105.**

This article discusses the Oklahoma City Bombing from the viewpoint of people whose lives were directly effected by the disaster. The authors share a number of personal feelings about the aftermath of the devastating terrorist action, but more importantly they discuss the treatment methods that they witnessed and participated in first-hand. The authors conclude the article with a number of suggestions for minimizing the lingering effects of the Oklahoma City Bombing as well as treatment suggestions for similar disasters that may occur in the future.

**Linton, J. (1995). Acute Stress Management with Public Safety Personnel: Opportunities for Clinical Training and Pro Bono Community Service. *Professional Psychology: Research and Practice*, 26, 566-573.**

This article discusses the twofold usage of Critical Incident Stress Management (CISM) programs. The author explores CISM first as an effective means of treating victims of traumatic events, and second as an important opportunity to present future mental health professionals with real life situations and invaluable experience. The author concludes that although CISM is an effective means of treating acute stress, it could perhaps be more important as a training and development tool.

**Morgan, J. (1995). American Red Cross Disaster Mental Health Services: Implementation and Recent Developments. *Journal of Mental Health Counseling*, 17, 291-300.**

This article discusses the history of the American Red Cross and the underlying reasons for the development of the Disaster Mental Health Services. The DMHS, which was first tested in response to Hurricane

Andrew in 1992, operates with three main goals. These goals are to maintain the emotional health of Red Cross staff, promote crisis reduction in disaster victims and to aid local mental health services in meeting the community mental health needs that result from disaster. The author covers the training techniques used by the DHMS along with a number of the most recent developments pertaining to the disaster relief efforts of the American Red Cross. The author closes the article by making a number of suggestions and predictions for the future of the DMHS.

**Rosen, G. (1995). The Aleutian Enterprise Sinking and Posttraumatic Stress Disorder: Misdiagnosis in Clinical Forensic Settings. Professional Psychology: Research and Practice, 26, 82-87.**

This article explores the potential misdiagnosis of PTSD when certain outside factors are involved. In particular the author addresses the misdiagnoses of PTSD following the sinking of the Aleutian Enterprise. In this particular case 19 of 22 survivors of the marine disaster were diagnosed with PTSD, yielding an incidence rate of 86%. The outside factor interfering with these diagnoses was that all 19 of the individuals diagnosed or with PTSD were involved in litigation. The authors caution clinicians to consider more than clients' self-reports in the diagnosis of PTSD and they warn that to properly diagnose a disorder outside factors must be considered.

**Thompson, M., Norris, F., Hanacek, B. (1993). Age Differences in the Psychological Consequences of Hurricane Hugo. Psychology and Aging, 8, 606-616.**

This study deals with the influences of age on disaster recovery. More specifically this study deals with how age influenced vulnerability to multiple stressors in the aftermath of Hurricane Hugo. This longitudinal study involved 831 adults who were interviewed 12, 18 and 24 months after Hurricane Hugo. The participants in this study were questioned about four main stressors, injury, life threat, financial loss and personal loss. The results of this study supported previous results, but at the same time made a number of new findings. The authors conclude with a number of suggestions for future research and applications based on their findings.

**Tschacher, W. (1996). The Dynamics of Psychosocial Crises: Time Courses and Causal Models. The Journal of Nervous and Mental Disease, 184, 172-179.**

This study investigates the time course of disaster related stress, including the changes in subjects behavior and the individual's reactions to these changes. The subjects were asked to rate tension, activity and mood three times a day. The study was first conducted in a group setting, however, because of the diversity of disaster stress no significant findings were made. When the study was shifted to an individual setting the results were far more useful. The individual results were grouped together based on certain criteria to form data for sub-groups. The results of this study led directly to a number of conclusions, including duration of treatment is in no way correlated to the effect of treatment.

**Winje, D., Ulvick, A. (1995). Confrontations with Reality: Intervention Services for Traumatized Families after a School Bus Accident in Norway. *Journal of Traumatic Stress*, 8, 429-444.**

This article discusses the uses of and reactions to crisis intervention strategies following particularly traumatic situations. The author presents a brief overview of typical crisis intervention strategies and the main issues related to these strategies. In particular this article discusses the implementation of a Psychosocial Support Service. This PSS was developed as a midpoint between overprotective avoidance and anxiety-provoking confrontation. The PSS in this case involved detailed information about the accident, a visit to the accident site and viewing of the deceased. On the one year anniversary of the accident a survey was sent out to the survivors and relatives of the victims. The majority of the respondents did not regret their participation in the PSS, in fact the data indicated that the confrontation elements were entirely beneficial.

**Wollman, D. (1993). Critical Incident Stress Debriefing And Crisis Groups: A Review of the Literature. *GROUP*, 17, 70-83.**

This article is a review of literature concerned with critical incident stress debriefing. More specifically the author is concerned with CISD as it applies to people exposed to traumatic events as part of their work role. There are several case studies presented in this article describing the processes that take place during debriefing. The article also discusses the brief history and development of crisis theory and the subsequent development of crisis groups treatments such as CISD.




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