

Beyond first aid

Experts shared postdisaster resources and stories of Katrina trauma and resilience.

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New Orleans' slow recovery has underscored the importance of psychological interventions that address the stress and anxiety that linger for months and years after people rebuild homes and children return to school, emphasize disaster and trauma experts at an APA 2006 presidential session on helping families heal after Hurricane Katrina.

"These were tight-knit communities, where three and four generations lived blocks from one another," said Louisiana State University Health Sciences Center (LSUHSC) psychologist Joy Osofsky, PhD. "They had a sense of support and security through family, and most everybody lost all that."

At the session, she and others shared their experiences working with those displaced by Hurricane Katrina and offered up some best practices and resources on helping children and families rebuild and heal.

First-responder support

For months after Katrina hit, Osofsky, along with her husband and fellow panelist Howard Osofsky, MD, PhD, worked with displaced New Orleans-area first-responders such as firefighters, police officers and emergency services and city workers through the federally funded Louisiana Spirit Crisis Counseling Program. Indeed, more than 80 percent of New Orleans-area first-responders lost their houses and lived aboard two cruise ships docked on the Mississippi River as they worked to bring order to the city and aid others displaced by the storm.

The Osofskys found that reuniting families and creating structure and routines for children was key to aiding these displaced workers. The Osofskys also lived on the boat because much of their work was informal. Often, they would simply talk with workers as they ate in the cafeteria. Many first-responders needed help identifying steps for rebuilding their lives post-disaster or referrals to further services, said Joy Osofsky. Others sorely needed to reconnect with their spouse or children; families or partners weren't initially allowed on the boats. "We realized early on that we had to bring their families together again," she recalled. By the fall, workers reunited with their family members and more than 450 children were living on the two boats. To maintain a sense of normalcy for the children, the Osofskys—along with a team from the LSUHSC department of psychiatry—organized a child-care center, arts and entertainment programs, a talent show and a Halloween party. And, since most of the nearby schools were closed, the Osofskys collaborated with the Louisiana Department of Education to register children in schools in nearby Jefferson Parish. "We were able to work with them to have school buses pick them up right on the dock," said Osofsky.

The children proved amazingly resilient living on the boat—which Osofsky believes fueled many first-responder parents to keep doing their jobs.

More than a year later, the Osofskys and others at LSUHSC are continuing their work with children and first-responders: Joy Osofsky now serves as clinical director for child and adolescent initiatives for Louisiana Spirit through the state Office of Mental Health and Department of Education's programs for children and adolescents affected by Katrina, and Howard Osofsky is serving as clinical director for Louisiana Spirit for the state's Office of Mental Health Crisis Services and for services for first responders and their families. Both also serve on the faculty of Louisiana State University Health Sciences Center in New Orleans.

Further help

Speakers also emphasized the need to prepare for the next time a disaster like Katrina hits. To help with that, panelist Josef I. Rusek, PhD, of the National Center for Post-Traumatic Stress Disorder (NCPTSD) in Menlo Park, Calif, noted that NCPTSD and the National Child Traumatic Stress Network have just produced a new evidence-informed "Psychological First Aid Field Operations Guide." The resource offers guidance specific to working with children, adults and families in the immediate aftermath of disasters. Additionally, session chair Melissa J. Brymer, PsyD, of the UCLA/Duke University National Center for Child Traumatic Stress, described a 10-session intermediate post-disaster intervention program she helped develop that was first used to aid children and families throughout two-thirds of Florida after the 2004 hurricane season. The intervention includes ways to help kids cope with anxieties about future storms, strategies for developing emergency plans, and ways families can talk to children and teens about their postdisaster anxieties. The intervention is now slated to be used by mental health professionals and trauma specialists throughout much of the Gulf Coast region with many displaced by Hurricane Katrina. Session discussant Robert S. Pynoos, MD, co-director of the UCLA/Duke University National Center for Child Traumatic Stress, provided attendees with an overview of psychological first aid and the different stages of postdisaster intervention.Y