

Optimism Averted Suicidality in Katrina Survivors

Experts warn that the low prevalence of suicidal tendencies might reverse if expectations aren't met.

BY DIANA MAHONEY
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BOSTON — The estimated prevalence of serious mental illness among Hurricane Katrina survivors doubled in the months after the disaster. But suicidal ideation among this population decreased significantly during that period, compared with several years ago, a new study has shown.

The jump in mental illness post-Katrina could be predicted, but the decrease in the prevalence of suicidal thoughts among those with serious mental illness “was a surprise,” lead author Robert C. Kessler, Ph.D., said in a teleconference announcing the findings of the first Hurricane Katrina Community Advisory Group survey.

Through questions designed to assess several dimensions of personal growth resulting from the trauma of the hurricane, Dr. Kessler and his colleagues at Harvard Medical School, Boston, determined that the lower conditional prevalence of suicidality was a function of individuals' faith in their ability to rebuild their lives and realization of their inner strength. “The lowering of suicidal tendencies appears to be strongly associated with optimistic expectations for recovery efforts,” he said.

To estimate the impact of Hurricane Katrina on mental illness and suicidality, the investigators surveyed a statistically representative sample of 1,043 adults from Alabama, Louisiana, and Mississippi, and compared the results with those of the National Comorbidity Survey–Replication conducted between February 2001 and February 2003.

The NCS-R included interviews with 826 adults in the regions later affected by Hurricane Katrina. Both surveys asked identical questions about mental illness and suicidality, and the post-Katrina survey included items associated with trauma-related personal growth.

“The [post-Katrina] survey also assessed personal cognitions that have been

identified in previous research to predict adjustment to disasters,” Dr. Kessler said. The survey focused on five dimensions of personal growth, including posttraumatic increases in “emotional closeness to loved ones, faith in the ability to rebuild one's life, spirituality or religiosity, meaning or purpose in life, and recognition of inner strength or competence.”

The comparison of the pre- and posthurricane surveys showed the prevalence of serious mental illness in respondents was 11.3% after Katrina, compared with 6.1% before it, and the prevalence of mild-moderate mental illness was 19.9% after the hurricane, compared with 9.7% before it.

The prevalence of suicidal ideation and plans among respondents estimated to have mental illness was 0.7% after Katrina, compared with 8.4% before it. “The lower conditional prevalence of suicidality was strongly related to two dimensions of personal growth after the trauma,” including faith in individuals' own ability to rebuild their lives and realization of inner strength, Dr. Kessler said. Without these two dimensions, “between-survey differences in suicidality [among mentally ill respondents] were insignificant,” he said.

The investigators hypothesized that the ability to create positive thoughts about the future provide protective “psychological scaffolding” against the suicidality that is often associated with extreme distress. The post-Katrina study “is, to our knowledge, the first to provide quantitative evidence regarding such a pattern in an epidemiological sample of a population that has survived a disaster,” Dr. Kessler said.

The concern, however, “is that the lowering of suicidal tendencies appears to be strongly associated with expectations for recovery efforts that might not be realistic,” he said, noting that it's important to recognize the low prevalence of suicidality might be temporary if positive expectations are not met as time goes on.

The findings could have significant im-

plications in the development of future disaster planning efforts. “A systematic investigation of posttraumatic [positive cognitions and] personal growth might be useful in guiding public health efforts delivered through the mass media in the aftermath of disasters,” said Dr. Kessler, noting that previous studies have shown that public health messages can have a significant impact on psychological reactions to disasters.

The message for policy makers “is that communications with survivors can sometimes build on the temporary reprieve from suicidal tendencies afforded by these protective cognitions,” Dr. Kessler said. “Efforts on the part of public officials to control expectations as recovery moves

forward without destroying the positive cognitions related to these expectations could prove crucial in the process of continued psychological recovery.”

The current report, published in a special online edition of the Bulletin of the World Health Organization (www.who.int/bulletin/en), is the first in a planned series based on ongoing tracking surveys of the Katrina survivors. Subsequent phases of the study will monitor the evolving mental health needs of the population affected by the hurricane.

The National Institute of Mental Health and the Office of the Assistant Secretary of Health and Human Services for Planning and Evaluation are funding the project. ■

Anxiety and Personal Growth Emerged

Baseline interviews with the Hurricane Community Advisory Group, a statistically representative sample of 1,043 Hurricane Katrina survivors from Alabama, Louisiana, and Mississippi provide important insight into the posttraumatic stress reactions and personal growth experienced by this population.

In addition to a doubling of positive screens for clinically significant anxiety or mood disorders, compared with a survey conducted 2 years before the hurricane, the interviews identified the following posttraumatic stressors:

- ▶ A substantial proportion of respondents reported having emotional problems related to their experiences in the hurricane.
- ▶ One-fourth (25.3%) of survey respondents reported having nightmares about their experiences in the hurricane in the past month.
- ▶ Nearly half (49.6%) of the respondents who were prehurricane residents of New Orleans reported having nightmares.
- ▶ More than half (51.8% of the total survey population and 79.4% of prehurricane residents of New Orleans)

reported being more irritable or angry than usual.

Results also showed posttraumatic personal growth:

- ▶ Most respondents (88.5%) reported that they had developed a deeper sense of meaning or purpose in life as a result of their experiences with the hurricane.
- ▶ More than three-quarters of the respondents (77.3%) said they had become more spiritual or religious through their hurricane experiences.
- ▶ Almost half of the respondents (45%) rated the discovery of inner strength as having happened “a lot” during and after the hurricane.
- ▶ Non-Hispanic blacks (62.4%) and people with low pre-hurricane incomes (57.8%) were most likely to report the discovery of “a lot” of inner strength.
- ▶ Most respondents (83.4%) reported having “a lot” of faith in their own abilities to rebuild their lives.

A complete copy of the report of the baseline interviews with survivors can be found at www.hurricanekatrina.med.harvard.edu/baseline.php.

Depression, PTSD Lingered With Children After the Tsunami

BY MARY ANN MOON
Contributing Writer

Just 2 months after the tsunami struck countries bordering the Indian Ocean almost 2 years ago, rates of depression, anxiety, and posttraumatic stress disorder were elevated among adult survivors in Thailand, according to the findings of two studies.

At 9 months after the December 2004 tragedy, those rates had declined but were still somewhat elevated in adults. In children, the rates of depression and PTSD were also elevated at 2 months and remained high at 9 months, according to the findings from two Thailand Post-Tsunami Men-

tal Health Study Group studies.

The researchers surveyed a random sample of 371 adults and 371 children who lived in the three provinces most severely affected by the tsunami in an effort to identify vulnerable populations and to develop culturally appropriate mental health interventions

In the adult study, at 2 months after the storm, the rate of anxiety was 37%, the rate of depression, 30%, and the rate of PTSD, 12%, in those who had been displaced from their homes. For those who had not been displaced, the corresponding rates were lower at 30%, 27%, and 7%, respectively, reported Dr. Frits van

Griensven of the Thailand Ministry of Public Health–U.S. Centers for Disease Control and Prevention Collaboration, Nonthaburi, Thailand, and his associates.

At the 9-month follow-up, the rates of anxiety, depression, and PTSD had declined significantly among displaced adults, at 25%, 17%, and 7%, respectively. For those who had not been displaced, less significant declines to 26%, 14%, and 2%, respectively, were observed (JAMA 2006;296:537-48).

The significant decrease over time in the prevalence of stress reactions, particularly among the displaced, may be attributable to “spontaneous recovery under im-

proved social and environmental conditions,” the authors wrote. In the interval between the first assessment and the follow-up, numerous programs were established for mental health support, occupational training, restoration of livelihoods, and provision of more permanent housing.

The pediatric study focused on depression and PTSD. At 2 months after the storm, the rate of PTSD was 13% in children who had been displaced from their homes, and the rate of depression was 11%. For those who had not been displaced, the corresponding rates were 11% and 5%, for children who lived in affected villages, and 6% and 8% for

children who lived in villages not directly affected by the tsunami (JAMA 2006;296:549-59).

At the 9-month follow-up, rates of PTSD and depression had not significantly declined in displaced children and remained high at 10% and 12%, respectively. Some of those symptoms may have been associated with the refugee camps themselves, not just with tsunami-specific trauma.

“Follow-up assessments must be conducted to assess the long-term mental health outcomes and the long-term need for mental health services” in this population, Warunee Thienkrua, also of the Thailand Ministry-CDC collaboration, and associates said. ■