
Preface

The past decade, more than any other period in our history, has brought home the terrible human, social, and economic consequences of natural and human-made disasters. Media images and headlines of fires, mudslides, hurricanes, floods, and terrorism became part of daily life across the world. No sooner did one disaster pass than another occurred, each time reminding us of the horrors of human suffering and victimization that are part of natural and human-made disasters. The words associated with disasters (i.e., the lexicon – see Appendix A) became familiar to all of us and are no longer restricted to professional vocabularies and discussions. Numerous public and private disaster agencies and organizations (e.g., FEMA, Red Cross, Salvation Army, CARE, International Rescue Committee, Doctors Without Borders, Department of Homeland Security) gained widespread recognition and familiarity, and their acronyms now dot the news media on a regular basis.

During this period, donations and appropriations from private citizens and from national and international organizations to assist in post-disaster healing and rehabilitation reached record amounts, and massive supplies and materials were transported to disaster sites by governmental and private agencies (e.g., NGOs). Volunteers joined professional responders in record numbers working on the frontlines to bring comfort and care. Through all of this, however, what remains at the core of each disaster is the enormous human cost that has been exacted – the tragic deaths, the destructive injuries, the psychic scars in survivors, the enduring and permanently inscribed memories of the terrible experiences involved during the crisis, and the efforts to survive and to rebuild.

Before our eyes, we witnessed buildings being toppled and destroyed, houses razed by fire and flood, roads crushed or swept away, and trees torn from their roots and tossed together in heaping piles of refuse and debris. But, it is in the faces and the minds of the survivors that the true impact of disasters is to be found; it is in the empty stare of an old man still in shock, in the tear-stained cheeks of an orphaned child, in the horror-filled eyes of a mother holding a lifeless child. It is in these images that the toll of disasters must be measured for almost all else can be rebuilt and restored. It is the human cost that is most important, and it is the human cost that most needs our understanding, concern, and healing. More than survival is at stake – we are faced with struggles for hope, purpose, and meaning.

This volume grew from efforts at the National Center for Post-Traumatic Stress Disorder (NC-PTSD) and the Substance Abuse and Mental Health Services Administration (SAMHSA) to better understand, assist, and respond to the human experience of natural and man-made disasters. In a series of meetings that began in 2004 involving Centers for Disease Control (CDC), NC-PTSD, SAMHSA, and other private and public agencies, efforts were made to identify critical issues and concerns involved in preparing for and responding to disasters. Among these issues and concerns was the recognition that even the best of intentions in providing disaster services was insufficient and inadequate because of a failure or inability to understand the diverse human experiences involved in disasters as a result of ethnocultural and racial variations.

We are not speaking here specifically of the apparent racism and classism following Hurricane Katrina when the entire world watched in horror as local and national government agencies failed to respond to the thousands of poor Black Americans and White Americans that were abandoned in cordoned areas of New Orleans. Nor are we speaking here of the widespread humanitarian response to the tragic Asian Tsunami of December 2004, when we watched in horror as tidal waves destroyed lives and villages across South-east Asia only to find in later months that many of our efforts were ineffective in addressing the vast psychological, social, and economic needs of the region because of a failure to grasp the cultural context of the victim's lives and their unique construction of the events.

Rather, we are speaking here of the simple fact that disasters bring together victims and responders of varying ethnocultural and racial backgrounds that may limit or even impair the delivery of disaster services. In the case of medical services, a broken arm, a punctured lung, or a burned face may be treated and healed by providers often independent of the cultural or racial backgrounds of the victim and physician. But, when it comes to the complex and demanding responsibility of assisting a victim who under the pressures of disaster trauma has deteriorated to the point of psychosis or total helplessness, we are faced with a different and more pressing need for an understanding, appreciation, and sensitivity to the cultural and racial backgrounds of those involved. It is at this point – when we refer to mental health – that racial and cultural differences become critical because of the issues of communication, the nature and meaning of health and illness, treatment preferences and reluctance, and the complex social, ethical, and administrative considerations involved. Figure 1 displays the dynamics of cultural interactions in disasters (see Marsella & Christopher, 2004).

Every disaster brings together people from differing cultural traditions and ways of life. This is especially true in the case of developing nations when local aid and resources are typically limited and international assistance is required. Much as an ethnic culture has its reality assumptions, values, leaders, social structure, communication patterns, and ways of knowing and adjusting to meet the needs and challenges of life, a disaster generates a similar culture



Figure 1. Cultural Encounters in Disasters

milieu and context, but this time the situation is increasingly complex because of the addition of outsiders (i.e., other world views) and the pressing burden of the disaster.

Disasters also have complex global political implications for individuals, societies, and nations because of the problematic cultural encounters that occur when victims and service providers from contrasting cultural traditions must work with one another. Michael Wessells, one of the most active and knowledgeable disaster professionals in psychology, identified the problems that can emerge when Western disaster professionals intervene in developing countries. He writes:

In emergency situations, psychologists hired by NGOs or UN agencies often play a lead role in defining the situation, identifying the psychological dimensions of the problems, and suggesting interventions . . . Viewed as experts, they tacitly carry the imprimatur of Western science and Western psychology, regarded globally as embodying the highest standards of research, education, training, and practice . . . Unfortunately, the dynamics of the situation invite a tyranny of Western expertise. The multitude of problems involved usually stems not from any conspiracy or conscious intent but rather from hidden power dynamics and the tacit assumption that Western knowledge trumps local knowledge . . . Local communities have specific methods and tools for healing such as rituals, ceremonies, and practices of remembrance. Since they are grounded in the beliefs, values, and traditions of the local culture, they are both culturally appropriate and more sustainable than methods brought in from the outside

(Wessells, 1999, pp. 274–275).

Consider this rather simple case example from Taiwan in which a woman found Western oriented counseling efforts to be not only unacceptable to her, but also ineffective. Lin (2000) pointed out that “talk therapy” approaches were not effective among some Taiwanese natural disaster victims, but victims did find satisfaction in traditional religious practices (Shou-Jing). She writes the following of one victim:

“I do not know how to communicate with the experts. He told me that I have some kind of disease in my mind but I think I am okay. He kept asking me

to express my feelings toward the earthquake, but I feel embarrassed if I tell people my own feelings I went to a Master in the temporary temple and she taught me how to deal with the situation. How to calm my anxieties through worship and helping others. How to accept grief as an arrangement of the gods. You know that our people have done so many wrong things.”

(Lin, 2000, pp. 10–11)

There are countless examples of the good intentions of disasters responders resulting in increased problems for disaster victims because of failures to grasp the significance of cultural differences in the provision of services. Amidst the countless panoramas of traumas that are part of any disaster, the rendering of care must be responsive to the cultural context of suffering. This means showing sensitivity to the situational and historical dimensions of the disaster including racial, religious, socio-economic, and political aspects. For example, the response to Hurricane Katrina victims revealed that there were far more complications involved than the sheer provision of shelter, housing, food, and medical care. Following Hurricane Katrina there was an acute and painful revelation of racism and cultural insensitivities and biases as victims struggled for survival amidst local and national governmental policies and practices that were painfully oblivious to the socioeconomic disadvantage of the victims.

In the following chapters, disaster responders – professional and volunteer – will find some background knowledge and information that may prevent the problem of “good intentions gone awry” by offering insights into the cultural and racial backgrounds and contexts of different minority groups within the United States. This volume does not cover all minority groups since this would be impossible. However, the volume does address a sampling of major minority groups, and in doing so, it does provide a framework for improving disasters policies and practices by calling attention to every disaster victim’s cultural and personal uniqueness, and the need to respond to this so we may go beyond simple assistance to healing and the restoration of hope and meaning.

To this end, the editors developed a prototypical chapter outline that requested knowledge about critical topical areas that might be useful for increasing responder competencies, sensitivities, and effectiveness with regard to working with particular ethnocultural groups. The chapter outline prototype then became the basis for each ethnocultural group. At that point, the editors identified chapter authors interested in the task and capable of meeting the assignment. The result of these efforts, of course, is this volume, a substantive source of information and insights regarding selected ethnocultural groups (i.e., ethnocultural minorities) and in possible disasters contexts.

In developing the standard chapter information protocol, the editors asked themselves what knowledge might be useful in increasing and improving responder services. It was decided that “formulaic” clinical information

would be far less important than information that would enable the responder to grasp the historical and situational complexities of assisting a specific ethnocultural group (i.e., to know and to understand the group in its uniqueness and similarities) amidst a disaster context. The editors asked each chapter author(s) to provide information about ten major topics including: **(1) population demographics** (e.g., number, age distribution, gender distribution, primary locations, background demographics such as religion and education, and ethnic customs. In addition, the chapter authors were asked to provide information about **(2) ten key historical events** that have shaped identity and behavior arranged in a chronology and **(3) ten key values** associated with the ethnic group. To this array of information, editors also asked for information about **(4) communication styles**, **(5) valid assessment instruments**, **(6) special disorder considerations**, especially “culture-specific” disorders, and **(7) special therapies and healing considerations** including concerns for **(8) medications and therapies**. Lastly, the editors requested information regarding **(9) disasters and trauma insights** on ethnocultural groups’ inclinations to respond to disasters with particular patterns of individual or group behavior, and **(10) special recommendations for improving services**. While there is some variation in coverage within the topics, the material across the chapters is similar in basic format.

In our opinion, the response of the invited chapter authors to meeting the task before them was exceptional as the volume’s contents will demonstrate. The reader – be they professional or lay person – will find a substantive overview of knowledge about selected ethnocultural groups that should enhance and increase their technical, personal, and professional skills and behaviors. Perhaps, above all, the material will be cause for the responder to appreciate the complexities of rendering human services and assistances to diverse populations during crisis situations.

The editors designed the volume to have three different but mutually supporting sections. **Section I** is to provide basic and essential information on disasters and critical ethnocultural considerations. In **Chapter 1**, the editors introduce the reader to basic terminology (e.g., culture, disaster, disaster parameters) and the need to appreciate and support cultural variation and diversity during disaster responses. **Chapter 2**, written by Fran Norris, is a reprint of a publication distributed by the National Center for PTSD in the face of the pressing need for information about cultural considerations in disasters following the South Asia Tsunami. The chapter offers a brief but relatively comprehensive summary of research publications on ethnic variations in disaster responses. While the chapter does not critique the research in meeting cultural research requirements, it does raise important questions and considerations about the cultural encounter.

Section II constitutes the heart of the volume and its major contribution to the field. In **Section II**, expert writers belonging to different American ethnocultural minority groups prepared chapters on their respective groups

using the ten discussion criteria cited previously as guidelines for their comments. This resulted in nine chapters filled with useful information about the different groups. **Chapter 3** focuses on African Americans. It was written by Steve Carswell, a sociologist, and Melissa Carswell, a psychologist. Their complimentary expertise in research and clinical practice results in an enlightening presentation regarding disaster service delivery considerations for African Americans. As is well known, African Americans do not constitute a homogenous group because of widespread differences in income, education, social class, urban vs. rural living, and ancestral histories. Yet, in spite of these profound differences, the Carswells offer the reader a portrayal of African American culture, history, and behavior patterns that is filled with insights and suggestions that will be informative and useful. **Chapter 4**, American Indians, was written by a group of scholars and practitioners led by Jeannette Johnson, a developmental psychologist with a long history of involvement in the American Indian community. She was joined in her efforts by Julie Baldwin, Rodney C. Haring, Shelly A. Wiechelt, Susan Roth, Jan Gryczynski, and Henry Lozano. In spite of the enormous variations in American Indian tribes and their respective cultures, the chapter authors managed to provide a careful and informative discussion of material for consideration in disasters.

In **Chapter 5**, Naji Abi-Hashem, an Arab American psychologist with a successful history of clinical practice and research regarding Arab Americans, offers a detailed discussion of Arab American culture and behavior patterns. Among American ethnic minority groups, Arab Americans have often been ignored in favor of the more populous groups. As a result, little is known about this growing community which is now faced with considerable challenges due to the current Middle Eastern crisis. Abi-Hashem's comments provide a thorough introduction to this recent group of arrivals to America's shores. B. J. Prashantham, an Asian Indian psychologist practicing in the Pacific Northwest area, authored **Chapter 6** on Asian Indians with comments on related South Asian groups. Like Arab Americans, Asian Indians have frequently been ignored in the minority group literature. Yet, given the new economic, political, and social attachments of the US to India and the increasing Asian Indian population in the US, it is essential that we expand our understanding and regard for this culture whose civilization is more than 4000 years old.

Chapter 7 was written by G. Rita Dudely-Grant and Wayne Etheridge, two resident psychologists from the Virgin Islands with considerable experience working with Caribbean Island Black populations. Their chapter offers rich insight into the cultural complexities of the Caribbean Blacks who inhabit these fabled islands in the sun. Behind the tourist facade so often associated with the Caribbean, one finds both a history and current life context that requires understanding and admiration for the adaptation skills of the diverse peoples of this region. **Chapter 8**, Chinese Americans, prepared by Fred Leong and Szu-Hui Lee, offers the reader a detailed presentation of Chinese culture. Chinese laborers did much to build the American West through generational

sacrifices of difficult work and poor living conditions. The Chinese civilization is thousands of years old, with an extraordinarily complex culture shaped to a large extent by the teachings of the great sages Confucius, Buddha, and Lao Tze (Taoism). Understanding Chinese Americans requires a grasp of their history and their culture's capacity to promote survival and success amidst new settings.

In **Chapter 9**, Laurie McCubbin, Michele Ishikawa, and Hamilton McCubbin lead the reader through the rich cultural beliefs and practices of the indigenous people of Hawaii (Kanaka Maole), whose very existence was once threatened by the many Westerners who came to their idyllic shores as whalers, missionaries, business people, and military conquerors. What emerges from their writing is a moving story of a lifestyle that was at odds with Western ways of life and that remains even today as tourists flock to the Islands to see their beauty and to encounter a culture that goes far beyond the commercialized hula dancing, luaus, and lei-bedecked airport greeters. The growing populations of Mexican, Caribbean, and other Latin Americans in the US are discussed in **Chapter 10** by Patricia Arredondo, Veronica Bordes, and Freddy Paniagua, prominent psychologists of Hispanic heritage whose writings and public leadership activities have established them as respected voices for their culture's members. Within the first few pages of their chapter, readers are made aware of the heterogeneity and diversity of this population that is often erroneously lumped together as a single group. The information provided by the chapter authors will enrich the reader's understanding of the wonderful shared cultural traditions and ways of life that characterize these groups.

In **Chapter 11**, Aaron Kaplan and Uyen Kim Huynh, both clinical psychologists, discuss one of the newest arrivals to America's shores, the Vietnamese. As is well known, the tragedies of the ill-fated Vietnam War resulted in the forced departure of hundreds of thousands of Vietnamese people. Their journey to the US and other countries of asylum and refuge were filled with as many horrors as the land they left behind. Yet, they endured the brutalities of pirates at sea and the burdens of life in refugee camps throughout South East Asia to begin a new life in a strange land. Their cultural resiliency is testimony to the critical role that culture plays in impacting adaptation and adjustment amidst the turmoil of starting a new life.

Lastly, **Chapter 12**, written by John Wilson, a leading trauma theorist and prolific publisher on the psychology of trauma, offers a rich and sensitive journey into the meaning and implications of the trauma experience, and the complexities of understanding trauma across cultures. The chapter raises serious questions about the cultural variations in trauma and the necessity of using care and sensitivity when treating people from different cultural traditions.

The appendices included at the end of the volume in **Section III** make an additional contribution to the reader's knowledge and skills regarding disasters. These appendices were selected on the basis of their capacity to enhance

the disaster worker's abilities by increasing their familiarity and mastery of the many disaster terms and organizations. Appendix A summarizes specific terms used by disaster-response professionals. Appendix B augments the material through careful and meticulous summaries of the empirical research. Finally, Appendix C calls attention to the stresses associated with being a disaster worker.

In brief, this volume offers the reader a unique combination of chapters on basic disaster concepts, knowledge, and skills, as well as essential information on specific ethnocultural and racial groups. This combination is unduplicated in the research and professional literature and in the training and educational arenas. We feel confident that a careful reading of this volume will provide the reader with a much improved and expanded competency to deal with members of different ethnocultural groups throughout the disaster cycle. To the disaster worker seeking to better understand the behavior and needs of disaster victims from different ethnocultural traditions, we say, this volume is the beginning of a lifelong journey into cultural understanding and cultural competency.

The Editors: Anthony J. Marsella, Jeannette L. Johnson, Patricia Watson, & Jan Gryczynski

References

- Lin, S.-P. (2000). Why counseling, why not shou-jing? Why shou-jing, why not counseling? *Cross-Cultural Psychology Bulletin*, 34(3), 10–15.
- Marsella, A. J., & Christopher, M. A. (2004). Ethnocultural considerations in disasters: An overview of research, issues, and directions. *Psychiatric Clinics of North America*, 27(30), 521–539.
- Wessells, M. (1999). Culture, power and community: Intercultural approaches to psychosocial assistance and healing. In K. Nader, N. Dubrow, & B. Stamm (Eds.), *Honoring differences. Cultural issues in the treatment of trauma and loss*. Philadelphia: Bruner/Mazel.

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