
Editorial Note

This third issue of Volume 7 continues a theme introduced in the previous issue, which is a re-conceptualization of traumatic stress reactions. The issue also includes an article about the role of spirituality and personal values in effective treatments for the unwanted consequences of traumatic events. The final article focuses on a telephone system that could be vital in the wake of community disaster.

Shabtai Noy proposes both intensity and duration of the traumatic stressor are critical gradations that must be considered in effectively assessing and treating the traumatized. His exploration of the relationship between the severity of stressors and the immediate stress reaction is both interesting and a contribution to the field. He suggests that stress reactions are adaptive behavior and an important source of information about the traumatized; that the traumatized attempt to communicate with others about how they are or are not coping with their traumatic experiences.

Building on these theoretical principles, Noy presents data on the immediate stress reaction, specifically combat stress reactions (CSR), which he defines as efforts by soldiers to communicate to the system that they cannot take it any more. When viewed more liberally, CSR symptoms include various, accidents, somatic illnesses, behavioral acting out or conduct disorders and other dysfunctional reactions. Using available data on an extensive, longitudinal study of 4000 soldiers in World War II, Noy reanalyzed the data to answer the question: "What kind of objective stress precedes each type of CSR casualties?" Consistent with his model, the results indicated that gradations of stress at the stage of impact significantly influenced the clinical picture in that intensive combat typically produced psychiatric casualties and accidents. In contrast, moderate combat stressors were associated with medical casualties and prolonged, intermittent combat preceded absence without leave (AWOL) and other incidents of malfeasance and disciplinary charges. Data from another study also confirmed his hypothesis.

In the latter section of the paper Noy argues that his gradation hypothesis can be applied to other groups of traumatized people. He suggests, for example, that the loneliness rather the captivity conditions for the prisoners of war and cumulative threats rather than the abuse conditions for the abused child may account for more of the post-traumatic style of adaptation conditions. Similarly, in all trauma settings, the gradation hypothesis predicts that massive and extend threats may lead to suicide, psychosis or death; intermittent threat lead to the loss of sensitivity and numbness in the short run and serious damage to the growing personality in the long run. This hypothesis, of course, must be examined with greater care using prospective data. However, practitioners may want to investigate the utility of Noy's hypothesis in their daily practice.

The Spirituality of Trauma

Like others I have been struck by the lack of attention by scientists of the spirituality variable in both conceptualizing and recovering from traumatic events. It is as if we have a kind of faith phobia; an irrational fear of discussing the theory of trauma that would includes spirituality variables. In this interesting report, Professor AJW Taylor addresses this neglect within the context of disasters and proposes that the World Health Organization (WHO) be more realistic in defining the meaning of health and well-being

that is currently replete with references of human belief and value systems. Similarly, he argues that researchers and academics generally must stop avoiding reality and consider the role of human values in accounting for human behavior generally and reactions to disasters particularly.

Taylor argues that the history of psychology and sociology emerged from a careful analysis of spirituality but has disappeared over the last fifty years with few exceptions and no empirical justification. This includes practitioners and their textbooks that guide their practice.

Indeed, Weaver, et al (2001) noted that a recent Gallup poll (Gallup & Lindsay, 1999), approximately 70% of the nation claim membership in a church or synagogue, and about 40% attend one of these weekly. Almost 90% of Americans want some form of religious education for their children, and 82% of adults feel a need for spiritual growth in their lives. Three of five consider religion "very important" to themselves -- 80% indicate that they use prayer in times of crisis, and 95% of those believe that their prayers are answered. These rates of religious commitment and involvement have remained fairly constant in the United States from the mid-1960s through the 1990s.

Taylor draws upon numerous disasters to confirm this importance of spirituality including an airplane crash in New Zealand, natural disasters and a fire in the Cook Islands and the moderating role in Fiji following two political coups. "At issue," Taylor argues, is the universal search for meaning after catastrophe" Until we find the theoretical and methodological will to fully understanding this search, we fail traumatized people, their supporters, and the field of traumatology generally.

A Telephone Response System Proposal

Perhaps one of the most underutilized media in post-disaster communities is telephone counseling. Most often communities are so overwhelmed that they "forget" this critical resource or because of disruptions in phone service or human resources. In this brief article, Marilyn Gilmour argues that telephone counseling is a vital serve in times of crisis -- but especially following a disaster. At this time the traumatized feel overwhelmed by their experiences and resist seeking help. The traumatized can make contact with a trained counselor when every they need such help -- normally at any time on any day. Post-disaster telephone counseling can be both responsive to the client's needs when it is needed and can be an effective gatekeeper for the client to access needed services.

Gilmour calls for telephone counseling services all communities that can support them. Such services would utilize established standards of practice in working with people in crisis. She suggests that the Internet can assist volunteer counselors with virtual support; consultation and other professional sharing could also be provided via online professional discussion lists.

A final area of concern is noted in the latter section of the article: the potential legal issues implicit in interstate or international counseling, especially as licensure of counselors is defined geographically. This can be addressed through pro bono legal consultation to establish letters of agreement among the various entities as well as cooperative agreements to share resources in times of need. As Gilmour notes in her

conclusion that despite the legal, personal, professional, and logistical challenges, counselor staffed telephone response system to disaster and trauma offers a source of support by members of the community long after the crisis.

It offers them immediately, when the victim is in crisis, conveniently, and anonymously. It cuts through distance, class, appearances, and resistances to therapy. It is a lifeline to engaging the victim at any point.

The Editorial Board and I urge any contributions, including reports from the field, letters to the editor, as well as regular articles.

Charles R. Figley, Ph.D., Editor
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Tallahassee, Florida (USA)

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