Within two days of Hurricane Katrina, 90% of the residents of the Greater New Orleans area evacuated. This is the story of the residents who returned immediately after permission was granted by local authorities. It encompasses fragments stitched together of the author and private clients as the rebuilding process began within an environment of chaos and hope. In this laboratory of uncertainty, accelerated and productive changes were occurring, recycling the energy of devastation wrought by nature and man.

Disaster

Hurricane folklore suffuses the air in the Gulf South like the evaporated water droplets containing intense energy of sunlight waves (or particles) during the summer. Sweltering discomfort dominates the senses leading to the platitude; it’s not the heat, it’s the humidity. Stories abound, each one uniquely shaped by the particular reality of a geographic region and its cultural mores, revealing grains of a larger truth. The themes of the majesty, mystery, and power of mother nature are retold with emotion and awe. Life changing events, sudden loss and gains accelerate the pace of life, bringing forth new forms instantly and persistently.

One of the first scientific learning processes in the region in which all elementary school children participate is tracing the path of a hurricane as it languishes and moves between longitude and latitude data points. All children also learn that the city sits significantly below sea level and is protected by earthen levees, which overshadow the mighty Mississippi River.

Until Katrina, the great hurricane fear was that the surge of the Mississippi River would overtop the levees, drowning people and flooding buildings in the bowl that marks New Orleans’ geographic uniqueness. It is well known that if the bowl fills up with water it will take weeks to empty through high powered pumps that are limited in their capacity according to design, age, available electricity, and current states of repair.

It is interesting to note that the one body of water surrounding New Orleans that did not redistribute its power and pressure was the Mississippi River. In fact, the levees surrounding the river were not neglected. Shipping and commerce hold dominion, which is the paramount reason for the City’s existence.

Stories proliferated in New Orleans following Hurricane Betsey in 1965, which snaked its way up the Mississippi River, of people climbing into attics as the water rose in the bowl. People cut holes in roofs hoping for rescue from boats. Horror stories of deaths from dehydration and heat stroke remain in the cultural and social consciousness.

Elements of stories are also left from previous generations. One persistent narrative is water being diverted from higher ground to lower ground and/or from wealthier neighborhoods to poorer ones. Part of this folklore includes the fact that part of the Mississippi River levee was dynamited south of the city during the 1927 Mississippi River flood to prevent the drowning of downtown and uptown New Orleans. The river then inundated and destroyed St. Bernard Parish. A large number of the Parish population had no warning of this planned action. St. Bernard Parish was sacrificed for mighty Orleans Parish with the promise of reparations from the “city fathers.” Unresolved lawsuits concerning this matter navigated through Louisiana and federal court systems for the next 50 years.
Evacuation as a decision-making process is a theme that needs to be addressed when a hurricane approaches the Greater New Orleans region. Over 90% of the population did evacuate as Hurricane Katrina approached. They left for safer ground, prompted by elected officials acting on clear information, one to two days before the storm approached. I was one of the evacuees. I am a full-time private-practice social worker in New Orleans. This is the story of me and my clients as we worked together following the immediate aftermath of the storm.

All of my pre-storm clients did evacuate. Katrina became a Hurricane 5 storm quickly as it traversed hot energy feeding Gulf of Mexico water, following its emergence from Florida, targeting New Orleans.

Thus, like all of my clients and most of the region, we evacuated with a few days of clothes, a full tank of gas and some food and water and expected to return in two or three days. After all, over the last several years, there had been regular evacuations from this region, resulting in returns within a few days after fighting traffic jams and competing for shelter. This was our experience. This is what we expected.

The first clear demarcation of this disaster emerges. Two days after landfall, nobody was coming back immediately. We were evacuees, but felt like refugees, displaced from home with no choice about returning. People were scattered. Cell phones did not work. The geographic region had taken a massive hit. We were to later learn that the disaster area was equivalent to the size of Great Britain. Families were split apart, communities torn asunder, material anchors bedraggled or destroyed by high-powered winds and tornadoes.

I had evacuated to North Louisiana. We were staying with my son, a university student, in his apartment. At least we had a private place to stay with electricity and access to the world around us.

Over the next two weeks I obsessively sought information through the Internet and mass media. Sleep was broken. I had difficulty staying anchored. The order of life had suddenly changed. First of all, where were other family members and friends? What was the next move? Mostly questions, few answers.

Two weeks following the storm, through the Internet I obtained a business pass to return to the site of my office in Jefferson Parish, which is adjacent to Orleans Parish. My son and I journeyed from North Louisiana to the area to assess damage and begin the rebuilding process. Web sites had already told me several feet of water were sitting in my home in Orleans Parish. It was inaccessible. However my office was probably safe. It was upstairs and only a foot of water had penetrated that particular geographic area.

Driving into the area, we could see the wind-torn broken buildings and scattered debris and feel the eeriness and emptiness of the few present indigents. Driving onto the street that housed my office resulted in shock. Half the roof was gone and all the windows had been blown out of their frameworks. My office had been destroyed. The humid atmosphere had caused the mold to grow exponentially. Bacteria were now in charge.

Disasters, like all complex systems, are highly variable in their effects. The name itself implies deleterious consequences. Research has not delineated any clear effects from disasters on the psyche other than the fact that longer exposure and greater severity of damage predict increased psychiatric symptoms. Each disaster is unique with its own causation, circumstances, and response sets. This was a large community disaster where links between individuals, families, groups, and institutions were going to be the means for recovery, change, or a continuation of tragic events. At this juncture, one year later, recovery and the continuation of tragic events are occurring simultaneously.

As a social worker and psychotherapist for over 25 years, I have learned that emerging frameworks within and across systems dissolve, reorganize, and re-form through clear, concrete, and identifiable links. Addressing and approaching the links undercuts polarization, prejudice, fear, and destructive hierarchal grouping. The quality of the links becomes an overriding factor in the management of stress points, where change inevitably occurs.
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Stress

Stress has become an overused word in our current culture and has lost its meaning through its multiple uses. However, I would like to be more specific in this narrative. I am talking about a biological process where the hypothalamus-pituitary-adrenal axis in the brain is constantly stimulated as the familiar environment changes, affecting all types of memory, learning, and general information processing.

Stress energizes the organism. The sympathetic nervous system is on, increasing attention and allowing access to more information. There is no choice following chaos. The management of this system is paramount. The judicious use of this system leads to a more fit adaptation, which hopefully generalizes into other aspects of life. Poor management of stress as defined above can lead to anxiety, depression, post-trauma symptoms, and obsessive thoughts, keeping us stuck. Or as General Honore so eloquently stated several days after the storm, prior to coordinated rescue efforts, “Stuck on Stupid.”

Emotions are intensified, meanings are reconstructed. Rebuilding begins immediately or fragmentation continues without recourse.

Three weeks following the storm I was able to get my destroyed office phone system forwarded to my cell phone. I was back in business. The phone was ringing. Everybody was stressed. Everybody was affected. Even if you had not lost a material possession, home, or automobile, the routine linkages had been broken. Quick decisions had to be made. Information was abundant but scattered in bits. Sorting through it was another matter. Uncertainty reigned. Judgment and wisdom were needed. The therapeutic hour which calls for a special conversation, where safety and order prevail, accesses these two archetypal healing processes.

Four weeks following the storm I was renting a different office with some of my old furniture, seeing clients again. Luckily, through previous links and willfulness, I was able to locate an office within one mile of my old one.

In addition, I was living in the office. My home had been flooded. Still a year later, despite ongoing diligent attention and appropriate insurance reimbursement, we have not been able to move into our home, which is located in one of the more devastated areas.

Thus, under the new normal as we call it here, my conversations began to change with my clients. First, each of us had to tell our story, which encompassed the previous four weeks. Embedded in each story were moments of despair, heroism, adaptation, fear, confusion, the break down of the surrounding infrastructure, the breaking of family links, the loss of community, new connections, the quick formation of new communities. What and who had immediately returned. Stress points were common.

My clients wanted to be a part of my story. We were embedded together. They saw the destruction of my pre-Katrina office. How was my home? Where did I live? What about my family? Where was I living? Information sharing was broad based as we all had to deal with insurance companies, financial institutions, food procurement, and transportation as we navigated new routes with population shifts. Debris was everywhere. We were now part of a new community. Everyone talked to everyone. Coyness had lost its allure and adaptive powers. Unmitigated support for those who had returned was the clarion call. We were going to be part of the rebuilding process. What was weak and not effectual was washed away by the storm. New institutions and methods were going to be adopted. Out of the suffering and displacement the phoenix will rise: a new day.

Stress springs eternal. Little goals bring jolts of ecstasy. Dopamine connections are aroused in the brain when that street is cleared, a road is open, a first repair is made, an energy line restored. The dopamine and serotonin become depleted as the totality of the devastation is experienced, including lost memorabilia, lost friends and family, lost familiar environmental niches that make New Orleans unique and unexplainable. Crying is common. Anger is everywhere. Thinking is peripatetic. There is no center. Take it day by day. Keep your decision making limited to small chunks of time. All issues cannot be resolved today.
The above was part of the therapeutic conversation. The present dwarfs past and future. There is no holding back. Some of my home, including baubles, art pieces, and kitchen items, lined various corners of the office. The microwave and small refrigerator were visible. Boundaries were permeable. The discussion was straightforward. It remains like that today. The emotions are not necessarily analyzed. They are simply experienced. There is no other choice. The lines of caretaker are blurred. By necessity we all seek to care for each other. This, however, requires concreteness, courage, sincerity, genuineness, and regard for others. These are the traits in the therapeutic conversation originally identified by Carl Rogers which lead to change.

**Information Processing**

Cognitive science in the form of associative and social learning, evolutionary theory principles of variation, selection and adaptation, brain imaging of in vivo neuro circuits, molecular biology, the study of change processes, and folk psychology are the varied streams feeding the gumbo of psychotherapy today. Best practices are derived from empirically valid research. However, much of the research remains flawed in the social sciences. Methodology is generally poor with inadequate samples and opaquely defined variables. Statistical norms continue to tell us little in relation to everyday case practice. This is generally recognized as other types of studies become valid. For instance, single case situations can now be examined within their own unique universe, using tools to measure outcomes and the effectiveness of processes. From these more defined case studies with narrow outcome and process measures we have learned that psychotherapy practice in general is effective.

I have spent a great deal of my professional life working in the field of addiction, at all levels of care, and teaching courses at the graduate and undergraduate levels. The field has taught me numerous things over the years. The recovery process includes a reorganizing of events, feelings, and emotions such that new stories are created, which then serve as maps and identity markers. In ongoing recovery, protecting the addictive relationship dissolves, leading to new and different relationship approaches. Reward set points in the brain are lowered. Joy is more easily experienced in the everyday. The addictive process raises the reward threshold point which significantly contributes to relapse and difficulties in change.

With ongoing stress and disorder from the disaster it is necessary to access previous networks and develop new ones in the brain. Trust the dopamine system. Progress can be measured. Pay attention to feedback. There are no previous fully developed maps. However, there are fragments of previously used maps. The adjustments that had to be made after feeling betrayed in a particular relationship, for instance, may now be useful.

Thus, this is a unique opportunity to apply emotional and cognitive learning modules in the surrounding uncertainty that calls for action and ongoing decision making.

For instance:

Dr. and Mrs. Q. had both been involved in individual therapy over the last several years. They had been married for over 30 years. Hopelessness, anger, boredom, and distance had set in. Working 60 hours per week was now bearing small rewards. The children had grown. Focusing on the children only brought frustration. Various medical issues had constrained their energy. Most importantly, frustrations, conflicts, betrayals, unfairness, and ethical dilemmas contributed to a difficult work environment which had continually spilled into their home life. The couple was referred to me by their individual therapists. I had worked with them for about 18 months before the storm. Polarization had been minimized. There was less projecting onto each other. Distance had decreased. However, consequences from a lifetime do not just magically disappear. There were setbacks at times, though the learning experiences in dealing with these crises led to overall progress. Experienced anger could now be linked to iterated themes as they each sought to take responsibility for the relationship. The false issue of possibly separating dampened down. Better questions emerged during the pre-storm therapy process, such as how do
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we address anxiety differently? What is the symbolic and concrete meaning of triggers? How do we show care again? How do we imagine living in the future?

The storm comes. One of the previous themes that had been identified was inappropriate attachments to families of origin, resulting in long term grudges, unhealthy coalitions, and political squabbling. The soap operas that resulted from this were consistently in play.

One of the attachment issues had been played out many years ago, when an opportunity to practice in a prestigious teaching institution, where a fellowship had been completed, was quashed in order to move home to New Orleans. From a distance now, both parties expressed regret, each admitting their anxiety and desire to please had probably interfered in their fully launching from their family of origins at that time. The consequent theme of having difficulty managing each of their anxieties was clear from this past distant episode. However, at that time, I hypothesized, their self-organizing couple-relationship system created a set point which continually reiterated. Triangulation consistently occurred with a family member from that time forward in the couple system, creating drama and political intrigue. Both were acting out their roles in predictable and salient modes. The scenes within this play began to change as they discussed and tried new strategies.

The after-storm comes. They are traveling throughout the country. In the middle of the evacuation period a medical conference was being held in the old fellowship clinic. He had previously planned to attend the conference. He is the center of attention. He is from New Orleans. The punch line is clear. He is offered a position. Without hesitation, he takes the position. The couple moves to the new location. By the time I return he is already beginning to work. She is here, preparing for the move. Her anxiety is increased again. She sees me for several individual sessions before selling their home and moving on. The conversation is clear. They both know the meaning of the move and the opportunity. She reports that his anxiety is practically non-existent. Remember, they were still leaving family here. Of course, family members were in need. However, the final scene of this play involves launching and de-triangulating. Decisions are made with this theme in mind. Plans are created to deal more appropriately with family intrigue and crises. The fear of leaving the old practice is undercut. An appropriate plan is made.

The learning of new processes is now being applied. Old issues of seeming forgetfulness and wandering attention have been arrested. The dopaminergic system seems to be leading this couple to helpful and salient goal-directed behavior. Memories are being used as markers to guide rather than increase anxiety and helplessness. Hopefulness and new energy are now emerging.

If no storm had occurred and an offer was made to work at the clinic, the couple would have probably turned it down. It was half the money, not to mention the heavy obligations already being experienced in New Orleans. The old ways of processing information would have led the couple to focus on the stress (anxiety, fear) and a decision to continue living as is would have been the outcome. This is what they essentially told me as we processed the upcoming change in their life. In the new order the future reward possibilities became the focus, leading to a better overall decision.

Accelerated Applied Learning

A sigh of relief was felt two days after the evacuation began and the storm had passed. The hurricane had edged slightly east toward the Mississippi Coast. In previous storms, especially over the last several years, this meant that the power of the storm spared New Orleans, and the fact that a levee system was protecting the highly populated regions meant we could probably return home. You know the rest of this part of the story. The reason I mention it is that for those of us who were out of town this was our first real experience of devastation. We knew that the bowl of New Orleans was filling up. It would be weeks, maybe months, before we could return, not to mention the reality of the damage.

Suddenly, the disaster lies in your GI tract like a heavy stone. Flight or fight. Or, nowadays, freeze or withdraw. What do you
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do? It's not just your home, but your livelihood, your whole way of life that is at stake.

I have spent the last thirteen years in full-time private practice. Prior to that, I worked in agencies and hospitals. I am involved in peer groups and active in the field. I am not isolated. However, in many ways, in private practice you are on your own. Your work is in reality fully accountable to your clients. Sometimes, when the phone doesn’t ring that morning, that afternoon, you wonder what that means. You have to organize yourself. There is no clock to punch. It is easy to overwork. Nobody tells you to stay or to go home. There is no immediate visible community when the clients walk in. They have to feel safe and willing to share. In the long run, everything in that office and about that office is a reflection of you. The immediate feeling was all is lost. Ruefully, the refrain of many survivors is “I lost everything.” It is here that one begins to process information and an accelerated learning process has the potential to begin or the stress overwhelms, resulting in avoidance and hopelessness.

Learning has many elements. Memory, an indication of learning, is a complex process. It includes the elements of consolidation, reconsolidation, and recall. The field has had to come to grips with the fact that just as reality is a distortion of our perceptions and own unique information processing, memory is ephemeral as well, driven by emotions, attention, the saliency of events, and our own particular network of relationships.

New stories are about to be written. The beginning point is August 29, 2005. However, every story will be infused with the elements of the past. The present is different. In the stress and dopamine-charged brain, where new goals are sought and new behaviors are about to be utilized, an accelerated learning process can be the new experience.

The first contacts I had when reopening (I began seeing clients on October 4, 2005) were the clients who were actively being seen prior to the storm. I was struck by the high energy and the desire to move forward, to focus and delineate on what was important and to shed the negativity. It is clear in traumatic and disaster situations that once the event is immediately past, a rebound of energy takes place. People initially become hopeful. Sometime later, a letdown usually occurs as reality creeps into consciousness.

Several of my clients were able to let go of previous, difficult intimate relationships that had been painful, resulting in consistent dysphoria. The learning curve was now accelerated.

For instance:

John Q. is a successful businessman who had been married for over 28 years. Several months before the storm his wife left the house. One of the salient cognitions connected to the pain of the separation was “I had failed,” as well as “I didn’t love her the way she wanted or needed to be loved.” The latter was the feedback he preserved from his interactions with her as the state of the relationship changed. These two statements are packed with historical and emotional events, creating their own unique tapestry.

His duty was to take care of his wife through the course of their life. How this worked was not always clear. However, due to cultural mores, role prescriptions, difficulties in their own launching from family of origins, this was the standard. The standard had been breached over the years at different times, mainly precipitated by the normal stages of a family life cycle. However, like all couples, they had their own unique and difficult stress points.

Over the last several years the caretaking became tested. Resentments as well as fear began to emotionally dominate. The couple had difficulty processing these emotions, became distant and more polarized in their own perceptions and feelings. After the separation, John Q. was lost in shame, guilt, and grief. He was hopeless and self denigrating.

After the storm, John Q. returned to his job, his home, and his life. His home had been significantly flooded. His job was extremely important in regard to the economy of New Orleans. It involved one of ancient economic blood lines that had fed New Orleans over the years. John Q. had more to take care of than ever could be imagined.

Trying to be a better caretaker was no longer going to work. Priorities had to be set.
Decisions had to be made. At an emotional level, the extreme caretaking standard was no longer salutary.

Following the storm, he was able to weave a narrative that helped him understand how the above standard had been created and the difficulty in making changes when reality overwhelmed the standard. His caretaking meant the expression of love; the hero role was the aspiring energy. As the couple matured, a partnership needed to be developed that took into consideration their own particular circumstances as they navigated the rough waters of launching their own children. He came to grips with the loneliness he had felt over the years and the self-imposed pressure of performing well. In fact, at an unconscious level, over the last several years he was seeking to remediate the loneliness. However, the solution always included trying harder to take care of things.

He was now able to move into a different narrative. Stop measuring yourself in terms of outcomes. Relate to others as they are. Don't seek to please. Serve others with judgment and wisdom. Performance is important but it is in the exchange of energy that needs are better met, especially in intimate relationships. These themes began to develop in his life.

Luckily, in the laboratory of the chaos, he met someone and was able to apply the above principles. The storm helped accelerate the process.

Another example:

Suzie R. is 28 years old and has been in recovery for five years. Over the last 2 years prior to the storm she was suffering from symptoms of some type of autoimmune system dysfunction. I am unable to state what the specific system dysfunction is because it was never clearly diagnosed, as is often the case in these syndromes, where stress and past trauma are instrumental in the progression and coping. In any event, she was in constant pain, had become highly dependent on her family, and seemed lost. She had just graduated from college and been accepted into graduate school when her symptoms became disabling, obviating graduate school attendance. There is a history of sexual trauma, physical abuse and, of course, consequences from alcoholism which contributed to her present story. Symptoms related to alcoholism began when she was 16 years old.

She did not suffer any particular material loss or devastation related to the storm. She had been in therapy with me about three years prior to the storm. Much of the work centered on her consistent replaying of trauma in her present life, revolving around interpersonal relationships. The progress made before the storm was the change experienced in reorganizing the trauma stories, examining her role, trying new roles, and attending to information differently, resulting in new outcomes where devastating loss and betrayal stopped being themes in her life. She worked hard in therapy, was honest and non-defensive. However, just prior to the storm she remained impeded by the pain, lack of energy, and general malaise from her medical condition.

After the storm, over the next four months, she began what we labeled a rebirthing process. Immediately after the storm, there was the scent of death in the air. There was the destruction of buildings, neighborhoods, communities, and lives. Many deaths had occurred several months after the storm, especially among the infirm for whom medical care was interrupted. Most community members had experienced the loss or death of someone.

When the scent and feel of death is experienced, an awakening often occurs. This is the story behind the famous jazz funerals in New Orleans, where the grief of death is experienced and then transformed into a joy-of-life celebration.

As stated above she had been working through the trauma reenactments. The work now accelerated with her applying the previous four years of work to a thorough reworking of the trauma memories. She methodically examined old writings, music, pictures, and other memorabilia. There had been talk in the community of the loss of precious artifacts and family heirlooms, signifying one's journey. Beyond the bedraggled furniture, walls and floors, this was the irreplaceable loss. That talk triggered her into beginning to look at these types of items. She moved deeper into the trauma memory work, reorganizing her story,
being more precise in her responsibilities, examining the false self she had created to negotiate her needs in the world around her. The false self, ignited by addict energy, began to melt away as she accessed a nurturing energy. At the same time, her medical condition significantly improved. Her daily pain was no longer depleting her energy. She was alive again. The type of work she was now doing has been documented by many clinicians. The re-birth was simply triggered by the “new normal.” She moved out of the walking-dead energy that was encompassing a significant part of the community.

Recovery

A year after the storm recovery is slow. This type of devastation doesn’t just go away. We call it slow because nobody really knows the timetable. How long does it take to recover from a difficult marriage, from past trauma, from addiction, from depression, etc? There is no time-table. Recovery always involves a reworking and transformation of some type of energy.

What is energy? A physicist will tell you it is measured through movement, where constant motion is differentiated from accelerated or decelerated motion. Isaac Newton gave us the formulas. Albert Einstein significantly revised them, as well as our concepts of cosmology.

This devastation has included material as well as significant immeasurable social-network losses. The cultural fabric tore. Fragments float, in constant motion, as we attempt to stitch parts together. At times the motion accelerates; at other times it decelerates.

The therapy room provides a special atmosphere for inter-subjective, meaningful conversation. The work and process has been exhilarating, when not weighted by the vacuum of broken links.

So, we cry together, laugh together, get angry together. What else is there? In the long run, life continues to dominate. Energy does not die. It simply recycles. Like a hurricane.

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