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Exploring Resiliency Factors of Older African American Katrina Survivors

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Through this qualitative study the author explores the resiliency processes demonstrated by older African American Hurricane Katrina survivors who relocated in the aftermath of the storm and were consequently faced with difficult challenges. In-depth interviews were used to assess the multidimensional characteristics of resiliency that enabled these older adults to deal with adversity. These findings highlight distinct processes reflecting resiliency: (a) Trusting in a higher power, and the importance of (b) living in the present, (c) activating resources, (d) creating community, and (e) doing for others. The author concludes this study with suggestions on how these findings may inform social work practice with older adults.

KEYWORDS Older adults, African Americans, resiliency

Hurricane Katrina generated unparalleled devastation on the Gulf Coast region of the United States in August 2005. Catastrophic damages resulted in enormous economic costs, the loss of 1,836 lives (McQuaid, 2006), and the displacement of over a half million people (Kasindorf, 2005). Many of these displaced survivors were African American, poor, and elderly (Horner, 2006). Little is understood regarding the impact of disasters on older adults and it is an area that has been vastly understudied (Sanders, Bowie, & Bowie, 2003) with relatively limited guidance on how these experiences impact people of color. Some research suggests that disasters present a trauma of particular concern for older adults and one that places them as a high-
risk population (Ursano, Fullerton, Norwood, & Holloway, 2003). Traumatic events can further have negative consequences and cause disruption in psychosocial functioning (Lincoln, Chatters, & Taylor, 2005). While it is critical to address any of the psychological, social, or health needs that may face these Hurricane Katrina survivors, it is also informative to understand their experiences outside of a deficit focused perspective that often tends to dehumanize one’s persona. Instead, this study seeks to better understand Katrina survivors in terms of identifying those processes of resiliency that were galvanized to cope with adversity.

The literature on resiliency has increased vastly in the last few decades and promotes understanding those natural capabilities available for individuals to deal with stress. Much of the early resiliency literature focused on children and their remarkable capacity to overcome enormous odds (Hill, 1998). This theoretical perspective complements the strengths-based movement (Saleeby, 2001), underscoring the importance of taking into account the inherent capabilities of individuals to resolve their own problems. Glicken (2004) clarifies the distinction between strengths as attributes that assist one in coping and resiliency as “the ability to cope with serious traumas and stressors and not be significantly affected by them” (p. 77).

In a definition by Henry (1999), resilience is conceptualized as “the capacity for successful adaptation, positive functioning, or competence despite high risk, chronic stress, or prolonged or severe trauma” (p. 521). It has further been described as “observing a normal or even exceptionally positive developmental outcome in spite of exposure to major risk for the development of serious social or health problems” (Fraser, Kirby, & Smokowski, 2004, p. 22). These definitions provide guidance in assessing the positive dimensions of recovery and protective efforts that ultimately may be formed to enhance outcomes for Katrina survivors, enabling them to overcome some of the challenges shaped by Hurricane Katrina. Saleebey (2001) acknowledged that resiliency can be characterized as a process that involves “meeting the demands and challenges of one’s world” (p. 11). This body of literature on resiliency provides a necessary and significant perspective that acknowledges the capability, choice, and power of individuals to advance their own diverse approaches for dealing with difficult conditions.

Few studies have explored understanding resiliency or the inherent capacities of an older African American population forced to endure harsh circumstances such as that divulged by Hurricane Katrina. Through the present study the author helps to fill this gap. In this article the author will describe, in the words of Katrina survivors, themes of resiliency evidenced by this population. First, some of the literature on resiliency for African Americans is reviewed. Second, this article will present analysis of resiliency themes accessed by Katrina survivors to cope with their experiences. Third, discussion and recommendations for practice strategies that enhance resiliency for older African Americans are offered.
RESILIENCY FACTORS OF AFRICAN AMERICANS

Understanding the effect of disaster and trauma on older African Americans is particularly salient in light of other compounding factors that may impact the mental health of this population due to vast discrimination, rejection, stressors, oppression, and societal exclusion (Bagley & Carroll, 1998); the extent of which has faced few racial or ethnic groups. However, despite the historical exposure to these challenges—a resilient and adaptive people have emerged (Billingsley, 1992) through reliance on a number of protective value orientations and mechanisms. Regrettably, the resiliency of African Americans in view of these diminished odds has been considered in itself dysfunctional (Billingsley, 1974); a view that further erodes fair interpretation and understanding of the strengths and adaptive abilities of this population. Efforts to eliminate this bias has resulted in increased interest in identifying the coping resources employed by African Americans—producing a considerable body of literature that helps highlight a culture of resiliency.

One prominent value orientation that has consistently been espoused by African Americans is the importance of religion and spirituality (Billingsley, 1992). In a national study, Chatters, Taylor, and Lincoln (1999) found that religious beliefs are very important for 8 out of 10 African Americans. In addition they found that 43.6% of African Americans reported seeking spiritual consolation “almost always” through religion. This prevalence is also evident in that 70% of Black adults belong to the Black church (Billingsley, 1992). Indeed, religious involvement and higher levels of attendance to religious services is generally higher for African Americans than the general U.S. population (Taylor, Chatters, Jayakody, & Levin, 1996). For instance, 52.3% of African Americans are reported to attend religious services at least two or three times per month (Chatters, Taylor, & Lincoln, 1999).

A number of sociodemographic variables such as age, gender, and region also distinguish African American religious participation from other populations. Research in this realm suggests that older adults, females, and southern African Americans have greater religious involvement than younger populations, men, or their counterparts in other U.S. regions. According to Chatters, Taylor, and Lincoln (1999), these specified groups also have higher levels of nonorganizational religious participation. Therefore, it must also be noted that a spiritual life may still be prominent for African Americans “without attending worship services or ascribing to an established religion” (Tully, 1999, p. 33).

The terms religion and spirituality are often used interchangeable and reflect both formal and less traditional elements that offer hope and support during trying times. These processes may be expressed in a variety of ways such as reading religious materials, watching or listening to programming, prayer or meditation, music, singing, symbolism, and imagery (Chatters, Taylor, & Lincoln, 1999; Frame & Williams, 1996). These religious
and spiritual activities have been credited with increasing one’s sense of well-being (Frazier, Mintz, & Mobley, 2005; Krause & Tran, 1989); features which provide protective effects from negative circumstances. Specifically, Krause and Tran (1989) found that those involved in religiousness buffers the effects of negative life events by supporting feelings of self-worth and personal control among African American older adults, thereby reducing psychological distress.

This underscores the prevalence of religion or spirituality as a preferred means for coping and dealing with problems (Boyd–Franklin, 1991). These factors among African Americans are evident in research that expands such social problems as dealing with mental or health concerns (Cohen, Magai, Yaffee, & Walcott–Brown, 2005; Johnson, Elbert–Avila, & Tulskey, 2005), violence (Bryant–Davis, 2005; El-Khoury et al., 2004), substance abuse (Brome, Owens, Allen, & Vevaina, 2000), disaster (Constantine, Alleyne, Caldwell, McRae, & Suzuki, 2005; Lawson & Thomas, 2007), and other adversities such as managing stress, hardship, or life events (Hill, Hawkins, Raposa, & Carr, 1995; McAdoo, 1995).

African Americans also initiate other mechanisms that facilitate resiliency by sustaining collaboration and cooperation in the community. For instance, African Americans have an extensive reliance on support systems such as the extended family or strong kinship ties, mutual aid societies, and informal networks (Billingsley, 1992; Boyd–Franklin, 1991). These informal networks are particularly prominent for African Americans during stress and difficulty (Boyd–Franklin, 1991; Lincoln, Chatters, & Taylor, 2005; Sanders, Bowie, & Bowie, 2003)—providing enhanced support and comfort. Nonkin networks form important instruments of these connections or alliances from such associations as friends, neighbors, and religious institutions; their importance of which cannot be undervalued (Billingsley, 1992). These networks have been beneficial in providing support for the many negative societal conditions that have been faced by African Americans in the United States and provide an added layer of protection for the African American community (Thorton, 1998). Lincoln, Chatters, and Taylor (2005) asserted that this “access to a supportive network is crucial for recovery” (p. 756). These connections further suggest the significance of a collective orientation which have been important in helping mobilize limited resources and to subsequently adapt or cope with adverse circumstances (Daly, Jennings, Bectett, & Leashore, 1995; McAdoo, 1998). Historically, mutuality has been considered more important than individualism for the African American community. This communal ideology aids in promoting an interest other than ‘self’ and values developing cooperative support and exchanges among group members in order to meet societal needs (Stacks, 1974).

These processes for African Americans are further combined with the embodiment of a more far-reaching or extensive concern for others. In this sense, African Americans display awareness and worth in the ‘good of
Exploring Resiliency Factors

others’—encompassing care and responsibility for others, as well as sharing that benefits others (Billingsley, 1992; Schiele, 2007). Effective communication styles, affective expressiveness, and positive social interactions (Hill, 1998) help extend successful negotiations within other community level subsystems (Hill, 1998). These efforts are beneficial in empowering others and making sense of distress and suffering (Bryant–Davis, 2005). This need for empowerment is further related to cognitive reframing and determination as psychological processes that have been found advantageous for African Americans during times of distress (Tyagi, 2001) and contribute to the need to reinterpret difficult conditions to facilitate adequate coping (Houston, 1990). Similarly, employing cultural mechanisms as a route to handle and manage obstacles through display of cultural pride and activism has been effective for African Americans (Bryant–Davis, 2005; Spencer, Fegley, & Harpalani, 2003). These components may be further broadened to incorporate other protective factors. For instance, an increase in one’s activities, as a means to remain occupied, promotes the use of both pro-active and avoidance styles of coping. These may further demonstrate creativity in releasing feelings related to trauma (Constantine et al., 2005; Wyatt & Newcomb, 1990) and provides added mechanisms to cope with adverse events.

METHOD

Participants and Design

Eligibility for inclusion in this study required that participants were (a) African American, (b) age 55 or older, (c) English speaking, and (d) not cognitively impaired. Local agencies and government entities were initially involved in finding placements for Katrina survivors and were helpful in identifying and recruiting study participants. Participants in this study consisted of Katrina survivors ($n = 10$) who relocated to a large metropolitan area in the southwestern United States after escaping Hurricane Katrina. The survivors were predominately women ($n = 8$), with two male participants ($n = 2$). The ages ranged from 55 to 76 years of age. None of the participants were currently married and four were widowed. The educational attainment for the majority of the survivors was high school, though one reported only finishing elementary school and another participant completed college.

A qualitative paradigm was used to highlight and capture the participants’ perspective (Marshall & Rossman, 1995) and to better promote attention to the interplay of age, culture, class, and race (Sankar & Gubrium, 1994). In whole, the focus of this study was an effort to better understand the participants’ lived experience.
Procedures and Data Collection

A senior citizen complex that housed a number of relocated Katrina survivors was selected as the study site. This site initially housed approximately 20 Katrina survivors. The site facilitator informed Katrina survivors about the research study and those willing to participate were contacted for interviews. Thus, study participants self-selected for the study and a snow-ball methodology was used for recruitment of additional respondents.

Institutional approval was granted for the study. Participation in the study was voluntary and all participants gave signed consent. Face-to-face, in-depth interviewing was the primary method employed to collect data—involving a minimum of two interviews per respondent. Open-ended interview questions were used to capture the meaning of the experience for the Katrina survivors. Some of these sample probes are presented in Table 1. Interviews began in the immediate aftermath of the hurricane. The interviews provided the participants with the opportunity to reflect upon their experiences and were used to identify primary resiliency factors most effective in dealing with the perceived challenges of their situation. Participant observation was also used during this time period and field notes provided further context on the lived experiences of the study participants. All of the interviews were audiotaped and were transcribed verbatim.

Data Analysis

Grounded theory’s constant comparison approach was used to analyze the transcripts, entailing comparisons of emerging themes and using an inductive process of interpretation that emerges from the data (Strauss & Corbin, 1990). Initial line by line, open coding was used requiring iterative reading of transcripts and making notations of emerging patterns or themes (Marshall & Rossman, 1995) to categorize the data. Focused coding, a higher level of abstraction was then utilized to further synthesize and refine the codes (Charmaz, 2006)—improving understanding of the conditions, properties, and consequences embedded in phenomenon (Straus & Corbin, 1990).

Data quality for qualitative inquiry was guided by attention to trustworthiness and credibility (Lincoln & Guba, 1985). Techniques to enhance these processes included the triangulation of data sources (interviews, participant
observation, and field notes), the utilization of multiple methods, and interpretation by several coders. Other components in place to ensure quality of the data included efforts to assure the dependability of the data findings (Lincoln & Guba, 1985). Member checks were also employed to determine if interpretations seemed true from the perspective of the participants (Jaffe & Miller, 1994). As customary in qualitative research, this study is less concerned with generalizability (Hendricks, 1996) and focuses instead on providing rich, thick descriptions that resonate with the reader’s experiences and therefore are transferable (Lincoln & Guba, 1985).

**FINDINGS**

First level analysis included initial coding to explain emerging data. Using focused coding; these were further analyzed and collapsed to reflect prominent themes that substantiated resilience during the Hurricane and its aftermath. Functioning through the trauma of Hurricane Katrina was supported by a number of processes that reflected key efforts employed to help participants adapt. Resiliency was demonstrated in the manner in which these survivors made meaning of their experiences. One major theme was evidenced in (a) trusting in a higher power. Other prominent themes were; (b) living in the moment, (c) activating resources, (d) creating community, and (e) doing for others. These components will be described and authenticated through the voices of Katrina survivors. Pseudonyms are used in the presentation of findings to better personalize their experiences.

**Trusting a Higher Power**

The Katrina survivors expressed an overarching belief that their path was being protected by a higher power through the ordeal of the Hurricane and subsequent relocation. This belief was substantiated through an established trust that dictated strong faith in God. All of the participants constantly made references to the importance of putting their trust in an entity beyond human comprehension. This level of faithfulness was perceived as sound and passionately expressed by Karen Q: “Believe me, there is a God.”

During the immediate hours after the flooding of the breached levies and separation from her grandchildren, one Katrina survivor reported finding strength by depending on God to “work it out for me.” These survivors acknowledged reliance and dependence on God—taken at face value—and a position that was not subjected to second guessing. For example Pearl K. emphatically indicated that, “You just have to go to God and pray, go to God, tell God about it. Put it on him, pray, you just have to pray.” Many also described the value of scriptures from the Bible as a means to
find comfort and refuge, reciting verses, and envisioning God’s spirit. They suggested that this provided the opportunity to be encouraged and closer to God during their trials; ultimately providing them with strength. From this standpoint, participants reported they were in a position to be guided by the “Lord’s spirit” and rescued by angels for God’s protection. Mr. James stated the importance in trust in a God; “If you trust in the Lord and if you have faith, then he is going to protect you, rescue you, and deliver you.”

For these participants, trust was essential in view of God’s intercession from circumstances that many felt were not conductive to their well-being. One survivor indicated, “God removed me from all that.” Trust enabled these survivors to be guided by God and sovereignty in being placed in new situations. Once relocated and placed in a shelter, Patricia N. stated “I was not upset . . . they had everything there we needed. So, we can’t complain, cause God sent us there—that was the best shelter that was organized.” Another survivor also elaborated that everything that happened to her was purposeful which confirmed her trust in God’s plan; “He put me here for a reason—to learn to live by myself.” This was notably echoed by another who stated, “Everything I went through was because of God.” Last, this related attribute of trust reflected progression toward deeper understanding that enabled participants to provide explanations of the Hurricane itself, as well as their personal trials and circumstances in a context that was meaningful to them. Margie B. relayed the circumstances surrounding getting items stolen from her while she was at the Superdome in New Orleans, days following the Hurricane and subsequent flooding. She resigned, “But God will find them—and they will have to answer to God.” She reflected that this stance provided her with a means to deal with the subsequent pain and betrayal she felt as a result of the incident. Another astutely observed that as a Katrina survivor “if I were stripped of my belief in God, then that would hurt my ability to be a survivor.”

Living in the Moment

For these Katrina survivors’, living in the present was key and consisted of properties such as relying on instinct and survival strategies. They were adamant about the necessity of being adaptable and flexible as the need arose. This seemed most poignant while they were encountering experiences in New Orleans with the flood and conditions at the Superdome. However, once they were relocated, there was a need to advance toward a more psychological shift; an effort that permitted them to keep focused on what was important and helped them maintain a sense of security. For example frequent statements were made such as “I don’t know about the future, “I ain’t got to that stage yet,” “I’m just going to go one day at a time,” “The issue for me is to get settled,” “I live day by day.” After experiencing three
different moves Barbara I. stated, “I need to stay stable ... [one needs to] know where you are going, what you’re going to do. People going from one place to the other—I don’t like that.” Further, there was evidence that living in the present required one to stay occupied as active participants in their new environment. Linda S. reflected on how important this was for her upon relocation. “You know, I keep myself busy all the time.”

Activating Resources

The capacity to activate resources was attributable to the need for increased control as evidenced by these Katrina survivors. Control incorporated meeting one’s individual needs while also viewing one’s self as capable of adapting to environmental changes. For these survivors, this denoted an additional dimension that requires one to actively interact with one’s surroundings as a means to influence the outcomes—identifying and accessing needed resources. These actions helped them more meaningfully frame their worldview of their situation and of ‘self;’ providing a sense of empowerment. This included using the system or community to get needs met or the utilization of self as the instrument to influence this access.

Being resourceful included making use of societal conditions to meet the needs at hand. For example, while still in New Orleans some reported on efforts to find boats or other means for people to get out once flooding occurred. Notably, Pearl K. marveled at making ends meet and stated, “We made like one little homeless shelter, like cardboards and that is where we stayed until we left.” One gentleman, Harry O. indicated the adjustments his group made once they elected not to try to go down to the Superdome—staying instead in a house. He reported the need to get provisions before the waters got too high, and acknowledged looting to obtain food by ‘whatever means possible.’ Further, he described the ordeal of making a hole in the attic without an axe, but with a small hammer; using large appliances such as a refrigerator for people to climb on, and using a generator for electricity for several days until they eventually ran out of gas.

We hung out in the house about 4 days. We had to break a hole through the roof. The only way we could get rescued from helicopters is if we were on top of the roof. So we got 15 people at the house up there.

Efforts to access resources were also evident once Katrina survivors had relocated. Mary U. observed how another Katrina survivor effectively utilized the system to get what she needed.

She’s the kind of person, if she can get something out of it, she will. Like she found out that they were giving out free phones to all the Katrina victims. And one day she dragged me all over the damn town to get the phone.
This was no easy task in a new city and required multiple bus transfers across the city and extensive waits in lines at various agency service providers.

Personal resourcefulness also aided Katrina survivors with the process of evaluating their own needs. Many remarked on these aspects which were interpreted as significant considering their situation. For instance, Karen Q. remarked on how she made the initial decision to escape once the waters begin to rise in her group. “I was like the brain, I said let’s get out of here.” Linda S. noted how she reinterpreted the Katrina experience as an opportunity for personal strength and development. She stated “… the reason why I went through this [not evacuating], I have never been through anything like this, now I wanted the experiences, and that was my reason.” She observed this event made her a stronger person and noted, “You never know if you are going to be by yourself and there is nobody but you—you gotta learn how to live.” Another commented on this discovery of self efficacy and strength observing, “I can stay by myself, I can get along.” Finally, this was evident in such statements as Janice G. upon entering the water to escape the dangerous flooding:

Me, I never gave it a second thought. I did what I had to do. I jumped in the water and this guy had a mattress, and started to pull it, and the water was up to here [waist], but I was never afraid—it’s kind of strange—never afraid, cause I knew we had to get out of there.

Creating Community

During the aftermath of the Hurricane and breeched levees, many Katrina survivors lost connections with their family and friends. This void was often compensated through the development of surrogate relationships and substitutions—forming a type of communal alliance. This community took on the functions of family; thereby providing protection, food, shelter, and attention to interpersonal needs. Patricia N. noted that she found herself alone because her family had already evacuated. Subsequently, another family helped to fill the gap. “There was a group of us, and I was the only one that was not part of the family … They adopted me into their family.” Several survivors noted that the formation of these spontaneous coalitions provided vital linkages, encouragement, and support during the hardships that followed relocation. Efforts to, in a sense, ‘formalize’ these associations were evident as people commented, “We developed a community here since we don’t have any other family.”

Additionally, concentrated efforts were made to reach others who might have been isolated and to bring them into the fold. Harry O., for instance, reported on reaching out to someone who had been left alone at the Superdome and reported “So we took care of her. We took care of her until the buses came.”
Doing for Others
This component of resiliency was evident in efforts to give of ‘self’ to others and to contribute positively to the well-being of fellow Katrina survivors. This was substantiated through sensitivity of what was needed and understanding of what others might be going through. These processes were observed during escape and evacuation from the Hurricane. Barbara I., for instance, reported that as she and a group of people walked through the waters and headed to the Superdome—they observed that one older adult had difficulty with this task; so was consequently carried by others. There seemed to be a concerted effort to make such needed accommodations for others as much as possible. Another described a similar incident in which efforts were made to accommodate the physical needs of another in reaching the Superdome stating “We had to stop because she could not walk any further—so we slept on the bridge.”

Provisions of personal assistance were frequently mentioned as a means to feel useful and supportive. Linda S. remarked that while she was in the Superdome, “I was there to help anybody that I could by talking to them, by them not being alone.” James T. further elaborated on how he helped people with preparing food packages while he was being evacuated.

I found some food packages that had the little heating thing, you could heat it up . . . And some folks didn’t know how to make the little heater bag work. So, I walked around showing all the people how to heat the bag up.

Others interceded in efforts to keep children safe in the shelters. For example, Karen Q. stated that she was concerned about children being left alone and in one incident decided to address these dangers with a young mother. “I told her don’t let your daughter come down here by herself anymore.” Similarly another noted, “I always talked to people and tried to get involved,” while she was at the shelter. Pearl K. specifically mentioned intervening to assist with an older man who had been ill and acknowledged these efforts to help. “I had been doing a lot of stuff for him and checking up on him.” These efforts were summarized by one survivor who remarked on the importance of aiding others, “If I can help them, I would help them.”

Another component of doing for others was letting people ‘do for you’—suggesting a type of reciprocal element to the helping relationship. Several noted while helping, there were also occasions when one might need someone to “take care of me.” This was most eloquently identified by Mary U. who astutely remarked on this need for some survivors to be helpful. She dealt with this dynamic by accommodating them. “They come and they want to be helpful, so I let them be helpful.”
DISCUSSION AND IMPLICATIONS

There has previously been little research that examines resiliency as it relates to older survivors of trauma. This study fills the gap in this knowledge base with older African Americans, a population that has been underrepresented in both the trauma and relocation literature. This study looks at those processes that were effective for these Katrina survivors—providing them with a level of protection from adversity and hardship. The qualitative nature of this empirical study deepens our understanding of resiliency in facing trauma and highlights the unique voices of these older African Americans. Their experiences provide a rare glance of the underlying mechanisms that are effective for dealing with difficult events.

The various aspects of resiliency illuminated in this study reflect its many differing dimensions and their importance in helping these Katrina survivors better adapt during adverse circumstances. Cultural factors which influenced the coping framework adopted by this population were inherent in the findings. Primarily, resiliency factors were noted in themes that demonstrated conviction as evidenced by trusting in a higher power. The importance of a religious and spiritual foundation for African American has been well documented (Billingsley, 1992; Taylor et al., 1996) and is a prominent orientation accessed across many differing problem areas, including disaster (Constantine et al., 2005; Lawson & Thomas, 2007). The merit of trust in God demonstrated by this population in relation to a strong reliance on a higher power has been delineated in previous research findings (Krause, 2004)—providing a sense of contentment that ultimately provided protection.

Further, among these survivors, there was evidence of more cognitive expressions to appraise their circumstances—with observable reframing of their condition in terms of a concern for the present. This is similar to findings from other studies emphasizing the advantage of cognitive reframing or reinterpretation in dealing with distress (Houston, 1990; Tyagi, 2001). In addition, the activation of needed resources demonstrated among these older adults has been reported in the literature (Wyatt & Newcomb, 1990) and was representative of their dynamism and need to shape their environment. They were actively engaged in getting their needs met during the ordeal of the storm and throughout their relocation. This required a great deal of flexibility and creativity to adapt to a new environment, geographical area, and the onslaught of numerous structural barriers they faced.

Forming meaningful alliances with others were another coping strategy utilized that resulted in the development of a cooperative community to substitute for that which was lost. These natural social networks that operate in a collective orientation allowed support from an expanded conceptualization of kin. This is congruent with other studies regarding the importance of informal networks (Billingsley, 1992; Boyd–Franklin, 1991), and formations
of meaningful social interactions with those in like circumstances; important for the creation of a protective system (Hill, 1998). It was evident that these aspects were essential components of coping that benefited this sample of older adults. Special connections may have also been influenced by a sense of camaraderie from common racial identification—another source of strength for African Americans (Spencer et al., 2003; Bryant–Davis, 2005). Coping strategies further incorporated efficacy of self through helping others in need of assistance. The literature supports this mode of taking responsibility for and supporting others (Billingsley, 1992; Bryant–Davis, 2005; Schiele, 2007; Lawson & Thomas, 2007) as yet another key value orientation frequently employed by African Americans. Combined, these diverse strategies demonstrate great resiliency and enabled this population of Katrina survivors to successfully deal with adversity.

Potential Methodological Strengths and Limitations

The limitations of this study include that it is self-report only and subject to the unique perceptions of these study participants. In addition, this small number of participants may have demonstrated resiliency in a manner much different than other Katrina survivors. The voluntary nature of participants must also be considered and may reflect some bias in the interpretation of their experiences. Additionally, it is important to note that given this study is qualitative in nature, generalizability is low. However, the strengths of this study are the inclusion of an underrepresented and marginalized population. It provides a distinct opportunity to learn about the patterns of resiliency adopted by this population in an effort to manage an event of such an intense scope. Resiliency proved to be a protective factor that prevented Katrina survivors from becoming overwhelmed with the severe stressors they were exposed to.

CONCLUSION

This research chronicles the experiences and coping strategies adopted by older African Americans in dealing with trauma and provide better understanding of significant processes of resiliency. The older adults in this study were profoundly resilient, a process that allowed them to cope with day-to-day changes and uncertainties resulting from the effects of Hurricane Katrina and its aftermath. This study informs social work practice with marginalized older adults about the nature of coping and adapting prominent for these older African American Katrina survivors and is therefore of great significance to social workers. For instance, attributes of resiliency found in this study can be utilized by practitioners for case planning and the development of
intervention strategies that may help diminish the risk factors and vulnerabilities that face older adults during trauma. Enhancing these processes can help alleviate stress and barriers that impede the capacity of elders to cope and adapt during difficult circumstances and ultimately impact their health and mental health status.

Most importantly, this study suggests that practitioners cannot ignore discussions of religion and spirituality that may manifest itself differently in African Americans. Social workers need to understand how these processes are manifested in the behaviors, values, and belief systems of African Americans. Sensitivity and commitment to apply this knowledge in practice requires a willingness to engage in dialogue with trauma survivors about religious and spiritual issues. For example, intervention strategies may be broadened and expanded to meet these unique needs by providing materials upon request that may encourage multiple means of expressing religion and spirituality (meditation, study, services, praying, songs etc.).

This study is valuable in understanding how culture and race influence dimensions of resiliency. A deeper understanding of these prominent processes of resiliency are crucial in adequately attending to the needs of diverse populations; offering a foundation to guide development of comprehensive assessments that identify resiliency or risk factors. This may serve to provide expertise toward the development and use of appropriate treatment approaches. This study also highlights the need for social workers to demonstrate respect and to be involved with clients throughout the helping process. Additionally, it suggests the importance of practice that involves older adults in the decision-making process, encouraging opportunities to tell one’s story, and to be effectively engaged in the helping process.

Continued efforts must be made to highlight and understand the unique perspectives of this population and the subsequent consequences they endure. Capturing this experience is important for both practice and policy and may directly impact the well-being of this population. Overall, many psychological, interpersonal, and social processes assisted these older adults during stress; providing the capability to adapt during complex and difficult conditions. These elements were important in aiding these survivors in adapting to the changes in their circumstances, close proximity to family members, and the loss of home, possessions, and sense of place. The processes explored in this sample of hurricane survivors provide guidance to helping professionals on how to promote resiliency for African Americans in a cultural context. Professionals need to take notice of the strengths of their clients and how these strengths can be used to provide the resources that are needed to overcome adversity. Further, it is important to recognize the multidimensional aspects of resiliency and how it serves many purposes. This suggests the advantage of efforts that build on increased formal and informal entities that support ‘coping.’
It is important that helping these professionals become more flexible in their service delivery methods to enhance their capacity to assist individuals in distress. Social workers can be effective in helping older adults experiencing trauma and in the provision of preparatory or relief efforts that meet their many complex service needs. The application of this knowledge base for social work practitioners is summarized below with some recommendations for practice.

Below are some practice considerations for work with older African American trauma survivors. It is important for social workers to:

- Understand the importance of comprehensive assessment of previous and active coping strategies of older adults and their service needs;
- Develop an appreciation and respect for the unique adaptive capabilities, resiliency and strength of older adults and utilize these factors in the helping process;
- Seek education on culturally salient coping processes and strategies adopted by diverse populations in order to understand coping in a cultural context;
- Partner with religious institutions and other faith-based organizations to address distinct manifestations of religious and spiritual values in diverse groups in order to meet their individualized needs;
- Increase efforts to enhance connections with informal networks and demonstrate sensitivity to individual conceptualizations of ‘family’ that transcend kinship ties;
- Enhance resources that incorporate the value of support for connections of strong group identity to empower marginalized populations; and
- Provide frequent opportunities and support as older African Americans share their story, in their own time, as a path towards recovery and growth.

REFERENCES


