



Changes in religious beliefs and the relation of religiosity to posttraumatic stress and life satisfaction after a natural disaster.

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Abstract: To study changes in religious beliefs and predictors of such changes in a community sample exposed to a natural disaster, and to investigate whether religiosity was linked to post-disaster mental distress or life satisfaction. An adult population of 1,180 Norwegian tourists who experienced the 2004 tsunami was surveyed by a postal questionnaire 2 years after the disaster. Data included religiosity, disaster exposure, general psychopathology, posttraumatic stress and life satisfaction. Among the respondents, 8% reported strengthening and 5% reported weakening of their religious beliefs. Strengthening was associated with pre-tsunami mental health problems (OR: 1.82, 95% CI: 1.12-2.95) and posttraumatic stress (OR: 1.62, 95% CI: 1.22-2.16). Weakening was associated with younger age (OR: 0.98, 95% CI: 0.96-1.00) and posttraumatic stress (OR: 1.72, 95% CI: 1.23-2.41). Two years after the tsunami, 11% of the sample considered themselves to be positively religious. There were no significant differences in posttraumatic stress, general psychopathology or life satisfaction between religious and non-religious groups. Religion did not play an important role in the lives of Norwegian tsunami survivors in general. Respondents who had the greatest disaster exposure were more likely to report changes in religious beliefs in both directions. Religious beliefs did not prevent post-disaster long-term mental distress, and religiosity was not related to higher levels of life satisfaction.

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Nonresponse to a population-based postdisaster postal questionnaire study.

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Abstract: We examined nonparticipation in a 2-year postdisaster mail survey of Norwegian tourists evacuated from countries affected by the 2004 tsunami. One hundred seventy-one persons out of a random sample of 330 nonparticipants were telephone interviewed concerning disaster exposure, current posttraumatic stress reactions, and reasons for not participating. Fewer nonparticipants than participants had been in a place directly affected by the tsunami. Nonparticipants reported less perceived threat of death and lower levels of posttraumatic stress reactions. Reasons for not participating were "lack of interest or time" (39.2%), "lack of relevant experiences" (32.2%), and "too personal or emotionally disturbing" (15.2%). Our findings suggest that postdisaster studies may be biased in the direction of more severe disaster exposure and pronounced posttraumatic stress reactions.

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Prevalence of psychiatric disorders and functional impairment after loss of a family member: a longitudinal study after the 2004 Tsunami.

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Mental Disorders - epidemiology - psychology
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Abstract: Bereavement following disasters is a devastating experience for family members. The aim of this study was to examine the long-term mental health effects of losing a loved one in a natural disaster.

Ninety-four Norwegians aged 18-80 years who lost close family members in the 2004 Southeast Asian tsunami were evaluated 2 and 6 years after the disaster. The participants were either staying in an affected area at the time of the disaster (i.e., directly exposed) or not (i.e., not directly exposed). The prevalence of psychiatric disorders was assessed by the MINI International Neuropsychiatric Interview (M.I.N.I.). Prolonged grief disorder (PGD) was self-reported using the Inventory of Complicated Grief (ICG), and functional impairment was self-reported using the Work and Social Adjustment Scale (WSAS).

We did not identify a significant decrease in the prevalence of PGD, posttraumatic stress disorder (PTSD), or major depressive disorder (MDD) from 2 to 6 years. Approximately, one-third of the bereaved (36%) had a psychiatric disorder 6 years after the tsunami. The most common disorder was PGD (12%) followed by general anxiety disorder (GAD, 11%), agoraphobia (11%), and MDD (10%). The prevalence of PTSD and MDD was higher among family members who were directly exposed to the disaster compared to those who were not (21 vs. 0%, and 25 vs. 3%). PGD was associated with functional impairment independent of other disorders.

Loss of a close family member in a natural disaster can have a substantial adverse long-term effect on mental health and everyday functioning.

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