

Box 14.4 (continued)

or the intensity of storms. Whether or not human activity and climate change played a role in Katrina's intensity, it is clear that a number of policy decisions and the government's response before and after Katrina hit impacted the scale of the devastation and human suffering.

Analyzing the Situation

Research the basic science of climate change and its impact on major storms. Do the data support a human connection? Given what you have learned about the human cost of Hurricane Katrina from news reports and in various chapters in this text, is the issue of climate change and possible related disasters something that social workers should be involved in? How does it fit with the profession's values and ethics? What can you learn about the policy decisions made both before and after

the storm that had an impact on the scope and scale of this disaster?

What Can Social Workers Do?

Given your analysis, what can social workers do to help reduce the human suffering that comes from natural disasters? What type of prevention seems possible? What types of interventions could be undertaken at the individual and family levels? What could be done at the community and policy levels?

What Can You Do?

What one step might you take now, alone or working with others, to reduce suffering caused by a recent natural or human-caused disaster? What are the barriers that might keep you from taking this step? What could you do to reduce those barriers?

International Events

Even after the 9/11 terrorist attacks, Americans are still relatively sheltered from the level of devastation and trauma experienced by people around the world. There are a number of examples of disasters of enormous proportions, affecting hundreds of thousands of people around the world. The 2008 Myanmar (formerly known as Burma) cyclone killed over 150,000 people and displaced millions more. The 2008 Sichuan, China, earthquake killed approximately 80,000 people, and left 5 million people homeless. Although China accepted some international aid, Myanmar is a closed country and was therefore very reluctant to accept international aid or allow international aid workers into the country. In 2010, an earthquake in Haiti devastated much of that country. Much of the capital, Port-au-Prince, was left in ruins. According to government estimates, more than 300,000 people were killed and hundreds of thousands were injured, many permanently disabled. More than 3,000 schools were destroyed, and more than 1.5 million people were displaced. Months after the earthquake hit, many Haitians were still living in the streets (Sontag, 2010).

However, another example may give us insight into the kinds of activities aid workers and social workers undertook in Myanmar, China, and Haiti. In December 2003, a devastating earthquake hit the city of Bam, Iran. Social workers were among the professionals who joined the rescue efforts. Javadian (2008) describes the activities of social workers in Bam. They helped those who survived find their family members, consoled victims by helping them deal with feelings of anger, loss, fear, and grief, helped set up makeshift shelters and find transportation, and collected and distributed food and supplies. And they linked survivors with resources (Cronin, Ryan, & Bret, 2008). These are the roles that social workers take in responding to crises and disasters.



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Secondary Traumatic Stress

The Iraq War Although studying social welfare policy is a requirement of social work education, we do not always include global policies as an important area of understanding. Military engagement in Iraq is a powerful example of human-made disaster that had a long political and economic history leading up to the actual war. The devastating impact of the Iraq war and the preceding events and circumstances on the Iraqi people has not received much attention, even though it is one of the most destructive human-made disasters in recent history. Harding (2008) summarizes the events prior to the 2003 war and the effects of the war itself. During the 1980s, the Reagan administration, the Soviet Union, and France, among others, implemented foreign policies in Iraq that condoned and supported, through trade agreements and military support, the repressive regime of Saddam Hussein, a regime that committed unconscionable human rights violations on its own people. Some people argue that the economic and strategic interests of the United States and other countries were the focus, not human rights. In the early 1990s, the United Nations imposed economic sanctions on Iraq for its invasion of Kuwait, which caused severe hardship for the Iraqi people. The Iraqi infrastructure was destroyed during the US bombing in the 1991 Gulf War. As a result of these events and the repressive regime, by 2003 (before the Iraq war), the Iraqi health care system, which had been one of the best in the region, was almost nonexistent. In addition, child malnutrition, disease, and infant mortality skyrocketed; long-standing family networks were destroyed; one-fifth of the Iraqi population was living in poverty; and emotional and psychological stress was pervasive. In the 1990s alone, it is estimated that 300,000 to 500,000 Iraqis lost their lives due to economic sanctions and the effects of the Kuwait war.

The US-led war in 2003 produced a deepening disaster for the Iraqi people. The war created more than 3 million refugees. The Iraqi government estimates that the war has been responsible for over 300,000 civilian deaths, with more than 100,000 deaths caused directly by US troop actions, and water, sewer, and electricity systems are unreliable, generating even more health problems. Unemployment is as high as 40 percent. Violence has become normalized, as sectarian violence and retaliatory killings have destroyed entire neighborhoods. Although no one event created terrorism, the war and disruption of people's lives in the region helps to contribute to conditions that gave rise to militant in-fighting and the rise of factions including terror groups. The impact of these traumas touched those living there and those who served there in deep and lasting ways.

Prolonged exposure to combat-related stress over multiple rotations has taken a devastating psychological toll on the men and women in uniform (Rand Report, 2011). In fact, the psychological effects may be disproportionately high compared with the physical injuries of combat. Although the two most debilitating combat-related injuries are post-traumatic stress disorder and traumatic brain injury, as already discussed, there is also a lingering impact that can affect those who are charged with the work of helping survivors of disasters.

Workers who feel emotionally spent or drained are considered to suffer from burnout and can be found in high-stress areas of social work, such as child