



Disaster and Traumatic Events

SRBI has extensive experience in surveying the psychiatric and physical outcomes after a major disaster as well as collecting information to evaluate efforts to assist victims. SRBI's expertise in both psychological epidemiology and locating households gives us a special capability in fielding disaster-related surveys given the trauma and displacement that can be associated with them.

Please contact Dr. John Boyle, Managing Partner of SRBI's Health Research Practice, at (301) 608-3883 for additional information.

Study Examples:

- Disasters' Impact Upon Adults and Adolescents
- Disaster Impact Follow-up Study
- Adult Psychological Functioning After Earthquakes (Sierra Madre)
- Client Survey of the Ohio Floods
- Survey of Impact of Hurricane Andrew among Adults
- Survey of Impact of Hurricane Andrew among Adolescents
- Client and Community Survey of Hurricane Hugo
- Client and Community Survey of Hurricane Andrew
- Client and Community Survey of the Loma Prieta Earthquake
- Client and Community Survey of Kansas Tornadoes
- Client and Community Survey of the Oakland Fire
- Assessment of Fire-Related Psychological Injury on Children, Adolescents and their Parents
- Evaluation of Victim Satisfaction and Victim Assistance in the Pan Am Flight 103 Bombing
- And many others

Case Studies:

Psychological Sequelae of the 9/11 Terrorist Attacks in New York City

The first of these surveys involved telephone interviews with 1,000 adults from a geographically stratified, random digit dialing sample of households below 110th Street in Manhattan. The survey generated estimates of both post traumatic stress disorder and depression related to the attacks. The findings were published in the New England Journal of Medicine in March 2002.

Disaster Research Education and Mentoring Center (DREM)

This organization is co-sponsored by the Medical University of South Carolina and the New York Academy of Medicine. Study subjects implemented by SRBI under DREM include the 9/11 attacks and the resulting PTSD, depression, loss of employment and possessions, and other adverse outcomes suffered by victims of the attack.