

## Hurricane Maria and a Generation of Resistencia

Public Health Reports  
2018, Vol. 133(3) 223-224  
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DOI: 10.1177/0033354918768288  
journals.sagepub.com/home/phr



My term as Surgeon General began on September 5, 2017, in the terrible aftermath of Hurricane Harvey, which struck southeast Texas on August 30 and, at the time of this writing in early November, had caused catastrophic record flooding and the deaths of more than 80 people.<sup>1</sup> At my swearing-in ceremony at the White House on September 5, everyone in the room took a moment to pray for the people who lost everything in the unprecedented floods in Texas.

But the horror of Hurricane Harvey would soon be followed by 2 other hurricanes to hit American soil. Two days after my swearing in, another massive and powerful hurricane, Irma, made landfall on the US Virgin Islands (USVI). Hurricane Irma caused enormous damage on the islands of St Thomas and St John. The hurricane skirted north of Puerto Rico a day later, causing large-scale power outages, and then struck the Florida Keys and south Florida, again causing enormous damage to those areas.

Then, only 4 days later, Hurricane Maria struck Puerto Rico after hitting the USVI. This storm was one of the most intense Atlantic hurricanes ever recorded,<sup>2</sup> and the damage to Puerto Rico was disastrous. Hurricane Maria brought massive property and environmental damage to these islands, essentially wiping out many of the buildings and much of the vegetation and causing ruinous long-term damage to the electrical grids and other infrastructure. As of early November, only half of the electrical power grid was back in operation.<sup>3</sup> The recovery effort has been heroic at all levels but made extremely difficult by the geography and the sheer size of the damage.

In October, I visited the USVI and Puerto Rico to see the devastation for myself. What I saw on these islands was fearful. I saw appalling damage to lives and property. I saw in all directions buildings that were torn to tiny bits and the leaves all gone from what remained of the trees.

My heart sank as I saw how the people of the islands were suffering. Many had lost all semblance of shelter—their homes gone or irreparably destroyed, roofs missing, walls collapsed, cars turned over. For most, there was no clean water, because the water supply system was fatally



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disrupted. And, of course, for nearly everybody except a few with generators who had gasoline to run them, there was no electricity and none in the offing for months.

The daily life of these islands had come to an abrupt stop. People could not go to jobs that, for now, no longer existed. Businesses were closed, including businesses needed for daily existence, such as grocery stores, gas stations, and government offices. Most hospitals were unable to function. Others were limping along the best they could, with no power or limited power from generators often starved for fuel. At one hospital that I visited in Puerto Rico, staff members told me how they coped with a roof that was broken and no longer held back the rain. As rainwater poured down through the roof, hospital workers kept moving

patients down a floor, and then another floor, to keep them dry. It all seemed as if it would take an act of Providence just to survive another week.

I thought about disasters I had had to deal with in Indiana when I was the health commissioner there. Never did we experience anything like the hurricanes that hit Texas, Florida, and the islands. But when we did have natural disasters, we could move people out to unaffected areas, where services were available. If a tornado hit a town, we could call on surrounding rescue units, hospitals, and the National Guard. People whose homes were devastated could stay with relatives out of the area. But in the USVI and Puerto Rico, all this was impossible. There was nowhere to go, because the islands are small. Help had to be brought in from long distances—often from the US mainland. It all added up to a perfect storm of weather and formidable logistics.

A big problem was mobilizing staff members and volunteers to assist in rescue and the restoration of services. In Indiana, when a disaster occurred, rescuers and emergency management workers could rush in from other parts of the region. There would be people, transportation, communications, and materials to do the job. But on the islands, the lives of first responders, rescuers, and disaster experts were just as disrupted as the lives of everybody else.

When I arrived on Puerto Rico, it seemed to me that the residents would not regain anything near to their daily lives anytime soon. But during my visit, I learned that I had missed 2 big factors. First, I had not accounted for the resiliency and the essential optimism of the people of these islands, and the pride that they have as US citizens. It seemed that the byword for a generation might be *resistencia*—resilience in the face of formidable hardships. Second, I had not accounted for the size and potency of the federal response.

I visited several hospitals and clinics in the USVI and Puerto Rico, and I was impressed by the self-sacrifice of the nurses, rescue and disaster personnel, firefighters, volunteers, and other people who turned to helping others even when their own homes and lives were upended. One nurse who I met in the USVI told me how she had been on duty when the wind began to rise. She took one of the last cell phone calls in the USVI before the towers got knocked down. On the call, her mother shouted that the roof was coming off her house. But the nurse could not help her mother; she had to continue working at the hospital. Patients' needs cannot wait, even for a hurricane.

I thought about the stress and helplessness that nurse must have felt, knowing that her home and family were at risk, while she continued to work at the hospital. A supervisor told me that some of the hospital's employees were still missing. Some employees were living at the hospital because their homes had been damaged or destroyed.

The situation was so dire that anybody with a heart who saw the suffering would want more help faster. I felt that way, too. But what I saw was unprecedented vigor and cooperation. I talked to responders who cited over and over again an almost incredible level of cooperation among federal responders (eg, Federal Emergency Management Agency [FEMA], which was hunkered down in Puerto Rico before the storm hit), nongovernmental organizations, local government, and communities. I saw members of the Army and National Guard from Puerto Rico who asked to be assigned to the island after returning from stints in Afghanistan, even though they were coming home to houses that no longer existed. We all wanted the disaster response to go faster. What I heard from workers, however, was, "I wish we could do more." Not once did I hear, "This is too much for me. I need a break."

Finally, I was proud of the men and women of my own service, the Commissioned Corps of the US Public Health

Service (USPHS). The corps predeployed to Puerto Rico before the storm hit, so that its members, along with FEMA, could respond more quickly. As I traveled around the USVI and Puerto Rico, I was pleased to see how the people welcomed our officers in their blue uniforms. By early November, more than 1200 USPHS officers had served in the USVI or Puerto Rico, along with personnel from other parts of the federal government and military.

The concept of service before self has never been more evident to me than during my visit to the hurricane-stricken regions. I was continuously inspired by the leadership and integrity of our officers. It is truly a privilege to be a part of this team of excellence and service. Only together, with a continued, coordinated response, can we rebuild our communities after a large-scale natural disaster and show *resistencia*—resilience in the face of future challenges.

### Acknowledgments

The author thanks Frederic Shaw, MD, JD, of *Public Health Reports*, for his assistance in drafting this article. Dr Shaw played no role in accepting this article for publication in the journal.

### Declaration of Conflicting Interests

The author declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

### Funding

The author received no financial support for the research, authorship, and/or publication of this article.

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