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Footprints of a Disaster

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Executive Director
Kentucky Community Crisis Response Board

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Learning Objectives

- Overview:
  - Application of assessment principles in disasters, utilizing Katrina as a case study
  - Predictors of PTSD
  - Risk factors associated with pre- and post- exposure to large-scale devastation and human suffering
  - Principles of early intervention & psychological first aid

Little warning
Going to die
Betrayal
World view shaken
Property loss
Relocating
Financial stress
High risk areas
Socio-economic status
Disabilities
Lack of resources
Single parent
Elderly
Fixed income
No home ownership
Separation

Footprints of Katrina

- PTSD predictors
  - Violated world view
  - Dose-response relationship with exposure
  - Personal identification with event

Little warning
Going to die
Betrayal
World view shaken
Property loss
Relocation
Financial stress
High risk areas
Socio-economic status
Disabilities
Lack of resources
Single parent
Elderly
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Separation

Footprints of Katrina

- Violated world view
  - Basic human needs challenged
  - Abandonment
  - Personal safety
  - Fair & just world

Little warning
Going to die
Betrayal
World view shaken
Property loss
Relocation
Financial stress
High risk areas
Socio-economic status
Disabilities
Lack of resources
Single parent
Elderly
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No home ownership
Separation

Footprints of Katrina

- Dose-response exposure relationship
  - Survivors & First Responders
    - Proximity
    - Length of exposure
    - Sights, sounds & smells

Little warning
Going to die
Betrayal
World view shaken
Property loss
Relocation
Financial stress
High risk areas
Socio-economic status
Disabilities
Lack of resources
Single parent
Elderly
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No home ownership
Separation

Footprints of Katrina

- Personal identification with event
  - Life threatening event
  - Injuries
  - Death of family & friends
  - Separation from significant others
  - Evacuated, sheltered, relocated

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Going to die
Betrayal
World view shaken
Property loss
Relocation
Financial stress
High risk areas
Socio-economic status
Disabilities
Lack of resources
Single parent
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Footprints of Katrina

- First Responders
  - Safety & welfare of their own
  - Hopelessness & helplessness
    - Inability to perform job they were trained to do
  - Secondary traumatization

Little warning
Going to die
Betrayal
World view shaken
Property loss
Relocation
Financial stress
High risk areas
Socio-economic status
Disabilities
Lack of resources
Single parent
Elderly
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No home ownership
Separation

Footprints of a Disaster

- General Assessment
  - Influencing factors
  - Impact intensified by pre-existing conditions
  - Impact can be intensified by post-trauma events

Little warning
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Betrayal
World view shaken
Property loss
Relocation
Financial stress
High risk areas
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Disabilities
Lack of resources
Single parent
Elderly
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Influencing Factors

- Cause/appraisal of events
  - Natural disaster & human error
  - Loss of predictability & control
  - Ongoing threat
- Psychological impact
  - Reactions related to losses, relocation, financial stress, and lack of predictability and control
- Subjective experience
  - Life threat
  - Separation from family and community
  - Loss of irreplaceable property
  - Anger & blame toward those responsible for prevention, mitigation, and disaster relief
- World View/basic assumptions challenged
  - Spiritual beliefs challenged
  - Loss of security in “terra firma” that the earth is “solid” and dependable
  - Loss of illusion of invulnerability

U.S. Department of Health and Human Services. Mental Health Response to Mass Violence and Terrorism: A Training Manual. DHHS Pub. No. SMA 3959. Rockville, MD: Center for Mental Health Services, Substance Abuse and Mental Health Services Administration, 2004. Pgs. 34-42.

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Going to die
Betrayal
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Relocation
Financial stress
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Impact Intensified By Pre-existing Conditions

- People with fewer economic resources
- Living in lower cost, structurally vulnerable residences in higher risk areas
- Cultural, racial and ethnic groups
- Elderly on fixed income
- Lack of home ownership or insurance
- Single-parent
- People with disabilities
- Behavioral health issues

Greater Barriers to Recovery & Potential Stigma

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Betrayal
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Relocation
Financial stress
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Single parent
Elderly
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Immediate Needs

- Physical needs
  - Warmth, safety, rest, fluids, & food.
- Emotional needs
  - Protection, comfort, control, reassurance, and a “listening ear”
- Address fear & anxiety
  - Safety & well-being of family, friends, coworkers
- Need for connection
  - With loved ones & support services

U.S. Department of Health and Human Services. Mental Health Response to Mass Violence and Terrorism: A Field Guide, 2005.

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Impact Intensified by Post-Trauma Events

- Evacuation, relocation & need for permanent housing
- Loss of community
- Disconnected from:
  - emotional support
  - financial support
  - medical support
  - faith communities
- Red Tape: The Second Disaster
- Property loss and damage still present

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Property loss
Relocation
Financial stress
High risk areas
Socio-economic status
Disabilities
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Elderly
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Psychological Crisis

- An acute response to a trauma, disaster, or other critical incident in which:
  - Psychological balance is disrupted
  - One's usual coping mechanisms have failed
  - Evidence of significant distress, impairment, dysfunction

Little warning
Going to die
Betrayal
World view shaken
Property loss
Relocation
Financial stress
High risk areas
Socio-economic status
Disabilities
Lack of resources
Single parent
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Psychological First Aid

- Psychological First Aid is the application of three basic concepts:
  - Protect
  - Direct
  - Connect

Little warning
Going to die
Betrayal
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Property loss
Relocation
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High risk areas
Socio-economic status
Disabilities
Lack of resources
Single parent
Elderly
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Psychological First Aid Includes:

- addressing immediate physical needs;
- comforting and consoling survivors, victims, first responders and others;
- providing concrete information about what will happen next;
- listening to and validating feelings;
- linking survivors to support systems;
- normalizing stress reactions to trauma and sudden loss;
- reinforcing positive coping skills;
- facilitating telling their story and supporting reality-based practical tasks.

Little warning
Going to die
Betrayal
World view shaken
Property loss
Relocation
Financial stress
High risk areas
Socio-economic status
Disabilities
Lack of resources
Single parent
Elderly
Fixed income
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Overview of Psychological First Aid

- Preparing to Deliver Psychological First Aid
- Contact & Engagement
- Safety & Comfort
- Stabilization
- Information Gathering: Current Needs & Concerns
- Practical Assistance
- Connection with Social Supports
- Information & Coping
- Linkage with Collaborative Services

National Center for PTSD: National Center for Child Traumatic Stress, Terrorism & Disaster Branch

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Betrayal
World view shaken
Property loss
Relocation
Financial stress
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Elderly
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Overview of Psychological First Aid

- Preparing to Deliver Psychological First Aid
  - Maintain a calm presence
  - Be sensitive to culture & diversity
  - Be aware of at-risk populations

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Betrayal
World view shaken
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Relocation
Financial stress
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Overview of Psychological First Aid

- Contact & Engagement
  - Establish rapport
  - Ask about immediate needs
- Safety & Comfort
  - Ensure immediate physical safety
  - Provide information about disaster response activities & services
  - Promote social engagement
  - Protect from additional traumatic experiences and trauma reminders
  - Give special consideration for acutely bereaved individuals
- Stabilization
  - Stabilize emotionally-overwhelmed survivors

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Going to die
Betrayal
World view shaken
Property loss
Relocation
Financial stress
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Disabilities
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Overview of Psychological First Aid

- Information Gathering: Current Needs & Concerns
  - Nature & severity of experiences during disaster
  - Death of family member or friend
  - Concerns about immediate post-disaster circumstances
  - Physical illness/need for medications
  - Losses incurred
  - Feelings of guilt/shame
  - Thoughts of harming self/others
  - Lack of supportive social network
  - Prior alcohol/drug use
  - Prior exposure to trauma & loss
  - Prior psychological problems

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World view shaken
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Relocation
Financial stress
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Overview of Psychological First Aid

- Practical assistance
  - Identify immediate needs
  - Discuss an action plan
- Connection with Social Supports
  - Enhance access to primary support persons
  - Encourage use of immediately available support persons

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Relocation
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Overview of Psychological First Aid

- Information on Coping
  - Provide information on stress reactions
  - Provide information on ways of coping
  - Demonstrate simple relaxation techniques
- Linkage with Collaborative Services
  - Provide direct link to needed services

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World view shaken
Property loss
Relocation
Financial stress
High risk areas
Socio-economic status
Disabilities
Lack of resources
Single parent
Elderly
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Reminder:
Main Goals of Psychological First Aid

- Protect
- Direct
- Connect

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Betrayal
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Property loss
Relocation
Financial stress
High risk areas
Socio-economic status
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Single parent
Elderly
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Notice the Footprints

For more information:

- KCCRB Web: www.kccrb.ky.gov
- National Center for PTSD
- U.S. Department of Health and Human Services. *Mental Health Response to Mass Violence and Terrorism: A Training Manual.*
- George S. Everly, Jr., Ph.D., F.A.P.M. *Individual Crisis Intervention & Peer Support*

Photos: ***NOAA, DirectNIC, KatrinaHelp***

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Betrayal
World view shaken
Property loss
Relocation
Financial stress
High risk areas
Socio-economic status
Disabilities
Lack of resources
Single parent
Elderly
Fixed income
No home ownership
Separation

Self-Care

Little warning
Going to die
Betrayal
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Property loss
Relocation
Financial stress
High risk areas
Socio-economic status
Disabilities
Lack of resources
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Separation

Emotional Care

- Set Boundaries
  - Limiting exposure to media coverage
  - Setting work hours (e.g., limiting shifts to 12 hours or less)
  - Referring someone to another provider if the issues that come up are beyond one's expertise
- Be attentive to own stress responses
- Continual self-monitor
- Do the Self-Monitoring Checklist
  - Remember most reactions are normal and anticipated.
- By doing good self-care, you will be better able to care for the families.

Little warning
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World view shaken
Property loss
Relocation
Financial stress
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Socio-economic status
Disabilities
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Elderly
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Self-Monitoring Checklist

- **Behavioral**
  - I am more or less active than normal.
  - I am not as effective or efficient as usual.
  - People do not seem to understand what I am trying to say.
  - I feel irritable or angry all the time.
  - I cannot seem to rest, relax, or let down.
  - I am eating a lot more/less than usual.
  - I have trouble sleeping/am sleeping too much.
  - I cry a lot or feel like crying all the time.
  - I am drinking or smoking more than I usually do.

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World view shaken
Property loss
Relocation
Financial stress
High risk areas
Socio-economic status
Disabilities
Lack of resources
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Elderly
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Separation

Self-Monitoring Checklist

- **Physical**
  - My heart seems to beat fast all the time.
  - I have an upset stomach, nausea, or diarrhea more often than normal.
  - I have been gaining/losing a lot of weight.
  - I perspire more than normal or often have chills.
  - I have been having headaches.
  - I have sore or aching muscles.
  - My eyes are more sensitive to light.
  - I have lower back pain.
  - I feel there is a "lump in my throat" all the time.
  - I jump at loud noises or when people come up behind me.
  - I sleep okay, but I am still tired.
  - I cannot get rid of this cold/I feel I am coming down with the flu.
  - My allergies, asthma, arthritis, or other chronic health condition(s) have been bothering me more than usual.

Little warning
Going to die
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World view shaken
Property loss
Relocating
Financial stress
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Disabilities
Lack of resources
Single parent
Elderly
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Separation

Self-Monitoring Checklist

- **Psychological/Emotional**
  - I have been on a natural high/an adrenaline rush for days.
  - I feel anxious or fearful often.
  - I can't keep my mind on my work.
  - I feel sad, moody, or depressed.
  - I have been having disturbing dreams.
  - I feel guilty about what the survivors are going through.
  - I feel overwhelmed, helpless, or hopeless.
  - I feel isolated, lost, or alone.
  - No one seems to understand or appreciate me.

Little warning
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World view shaken
Property loss
Relocating
Financial stress
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Socio-economic status
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Single parent
Elderly
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Separation

Self-Monitoring Checklist

- **Cognitive**
  - I am having trouble remembering things.
  - I get confused easily.
  - I cannot figure things out as quickly as I usually do.
  - I keep making mistakes or cannot make decisions well.
  - I have trouble concentrating.
  - I cannot quit thinking about the disaster or incident.

Little warning
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Betrayal
World view shaken
Property loss
Relocating
Financial stress
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Socio-economic status
Disabilities
Lack of resources
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Elderly
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Self-Monitoring Checklist

- **Social**
  - I do not want to be around people.
  - I do not want to listen to people.
  - Trying to work with the group seems like a waste.
  - I just do not like to ask for help.
  - People seem so slow or unresponsive.

[1] Carter, N.C. (Draft, 2001). Stress management handbook for disaster response and crisis response personnel. Rockville, MD: Center for Mental Health Services, Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services.

Little warning
Going to die
Betrayal
World view shaken
Property loss
Relocation
Financial stress
High risk areas
Socio-economic status
Disabilities
Lack of resources
Single parent
Elderly
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Separation

Self-Monitoring Checklist

- **Spiritual**
  - My level of faith has changed.
  - My interest in my belief system has changed.
  - I feel disconnected.
  - I feel hopeless.
  - My life seems out of balance.

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Betrayal
World view shaken
Property loss
Relocation
Financial stress
High risk areas
Socio-economic status
Disabilities
Lack of resources
Single parent
Elderly
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Separation

Things To Do
To Reduce Stress & Renew Energy

- Take a walk or stretch.
- Stop and breathe deeply for a few moments.
- Talk to a trusted friend about your situation.
- Eat nutritious foods (e.g., lean protein, whole grains, fruits and vegetables) and avoid sugar, caffeine, and alcohol.
- Take a hot bath.
- Read a humorous or interesting book on a topic completely unrelated to what you are dealing with.
- Sit in a dark room for a few minutes to help relieve headaches.
- Get to sleep early, if possible.

Little warning
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Betrayal
World view shaken
Property loss
Relocation
Financial stress
High risk areas
Socio-economic status
Disabilities
Lack of resources
Single parent
Elderly
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Separation

Things To Do
To Reduce Stress & Renew Energy

- Be patient with yourself.
- Ask people who have been through a similar experience how they handle their stress.
- Get a friend to partner with you for stress monitoring and reduction.
- If you feel lonely or isolated, ask someone to go to dinner or a movie.
- Meditate.
- Exercise.
- Spend some time with friends, family, and/or pets.
- Try to stick to your morning and/or evening routines as much as possible.
- See if shifts can be rotated with a colleague so that neither person is doing high-stress work day after day.