Homeland Security: Online Educational Models for Mass Trauma Intervention

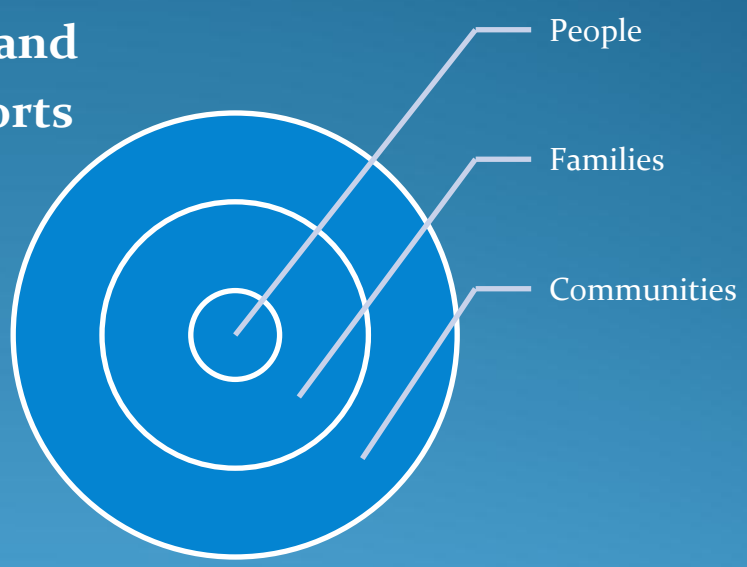
Rudolph R. Bustos, PhD
College of Health Sciences
Trident University
(800) 375-9878 Ext. 2622
Rudolph.Bustos@trident.edu
&
Patricia Levy, PhD
Department of Social Work
Fort Hays State University
785-628-4389
plevy@fhsu.edu

Basis of this Presentation

Hobfoll, S.E. et al. (2007) Five Essential Elements of Immediate and Mid-Term Mass Trauma Intervention

Five empirically supported intervention principles that should be used to guide and inform intervention and prevention efforts

1. **Sense of Safety**
2. **Calm**
3. **Sense of self-and community efficacy**
4. **Connectedness**
5. **Hope**



Hobfoll, S.E. et al. (2007). Five essential elements of immediate and mid-term mass trauma intervention: Empirical evidence. *Psychiatry*. 70(4): 283-315. Retrieved from http://www.ncbi.nlm.nih.gov/pubmed/18181708

Trauma Victims Must be Assured of

- A Sense of Safety
  - Physically removing from harm
  - Information of significant others
  - From rumors and hearsay
  - Media prone to sensationalizing
- Calm
  - No psychological debriefing (Acute Stress Reaction, ASR, vs. PTSD intervention)
  - Pharmacological approaches
  - Cognitive behavioral therapy (e.g., Stress inoculation training—used in long-term side effects)
  - Stop incidences of pathologizing
  - Check hypervigilance (e.g., hyper-alert, jumpy)

Trauma Victims Must be Assured of… Continued

- **Sense of Self- and Community Efficacy**
  - **Traumatic event results in sense of losing competency**
  - **Losing sense of control**
  - **Individual or group CBT**
- **Connectedness**
  - **Lack of it a precursor to PTSD**
  - **Overuse of support systems reduces self-efficacy**
- **Hope.**
  - **Decatastrophizing (e.g., by CBT)**
  - **Community-wide intervention more effective**
  - **Shared problems, shared feelings**

Trident University International
MSEDM, MSHLS, BSHLS

- **MHE 514 Psychosocial Aspects of Emergency and Disaster**
- This course examines psychological and social issues of disasters and emergencies. The course will focus on emergency preparedness, the survivors of a disaster, post-traumatic stress disorder, and psychological symptoms following trauma (including general anxiety disorder and stress). In addition, psychological aspects of terrorism will be examined.
- **EDM 512 Emergency Healthcare Logistics in Disasters**
- This course will examine the foundation and function of healthcare logistics in emergencies brought on by natural and manmade disasters. The student will: (a) become familiar with the various acts that form the procedural bases for action; (b) identify and note the military's medical delivery systems and accompanying personnel in the field, as well as civilian–military coordination efforts; (c) track the process of stockpiling and procuring medical supplies; (d) locate dispensing sites; and (e) determine actions taken to address patient surges. Scenarios will be employed to determine appropriate courses of action during a simulated crisis.

- **EDM 504 Public Health and the Aftermath of a Disaster**
- Prevention and treatment of mental and physical injuries are some of many priorities to be addressed after a natural disaster or terrorist attack. This course will examine steps taken by the military, medical, and local communities. This will include (a) managing the logistics operations for major disasters by the military, (b) triaging victims by medical personnel, and (c) mental health interventions by community professionals. Areas of focus will include: (1) examining the role of hospitals in the community response to disasters, (2) improving cross-jurisdictional collaboration with law enforcement, and (3) securing logistical support from military, governmental, and organizational sources, and (4) examining ethical and social values in implementing medical and other measures. Scenario simulations will be employed to discover appropriate interventions after a disaster.

Patricia Levy, PhD
Fort Hays State University

Purpose and Goals

- Graduate level course - a vehicle for training learners in responder role → an intra-coordination of emergency response systems
- An overview of emergency response models
- Preparatory training: Needs assessment practices (bio, psychosocial, spiritual), short and long term mental health counseling regarding recovery from mass trauma events (disaster & terrorism) – contextual applications to age specific, culturally diverse populations, differentiation between urban & rural settings

- Interdisciplinary perspective: Use of self in response to

understanding & intervening in mass trauma events – personal

& professional proactive resiliency - coping trajectories with and of survivor populations

- The aftermath (e.g. defusing, ASR, & long term responder ptsd)

9/11 first responders - Triumph over tragedy

(CBS NEWS)

The Pedagogical Framework

- A holistic framework using online experiential learning tools.
- Textbook : Ritchie, E.C., Watson, P.J., & Friedman, M.J. (2006). Interventions following mass violence and disasters: Strategies for mental health practice.
- Discussion Board topics: A Communication Code of Ethics (contract related to relationship building & interaction)
  - Personal experience with trauma: Crisis to emergency
  - Historical & current service delivery models
  - Memories of 911
  - Disaster mental health training & needs assessment tool
  - China earthquake – stress theory to trauma theory (Israel)
  - Discussion Board example (next slide)

Discussion Board Example

- In last week's reading, Arieh Shalev stated:

  " Some way to help distressed survivors always exists. When little can be done to reduce the main stressor (as in the case of sudden traumatic loss), it is wise to reduce survivors' loneliness. When reality is truly terrible (repeated terror, torture, siege, or captivity), hope becomes a major resource" (p. 209).

- In light of the above statement, how would you define "hope?" What do students think it is? If you were a disaster relief worker, how might you convey this helping aspect in the steps discussed in Ch. 7 regarding your intervention with survivors? Include cited chapter content to explain your rationale.

Assignments

- Reflective Reaction Papers

- Helper/Caretaker/Responder Interview - responsible for planning &/or responding to one or more mass trauma event/s. Research literature related to the disaster/s used to develop several questions to learn about the disaster helper's work. Consent form.

- Survivor interview, literature review, reason for choice, question development, conclusions, Consent.

- Final Exam essay: Development of a local community relief plan to a specified mass trauma event to include mental health intervention.

Conclusions

- **Feedback on course: "Separation & Goodbye"**
  - "The best part about this class was that you allowed us to get outside of the textbook and into the real world. I enjoyed the interview paper and felt it really helped me get a feel for disaster planning in my hometown."
  - "Thank you everyone for your great information and discussions. I enjoyed this class and learning about trauma and disaster. I did not have a lot of experience in this area before this class. I hope I never have to apply anything I've learned in this class! "

The need for more research, practice, and training preparation not only for formal responders but for the general civilian population who may in an instant become a responder to survivors.