



39th Annual Oregon Rural Health Conference

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Healing After Disaster—Guide with Support

Speaker:

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Liaison for the McKenzie Valley Wildfire Response

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HEALING AFTER DISASTER

**A Guide to Supporting Human Services for
Recovery**

LUCY ZAMMARELLI, MA, QMHP, CADCIII

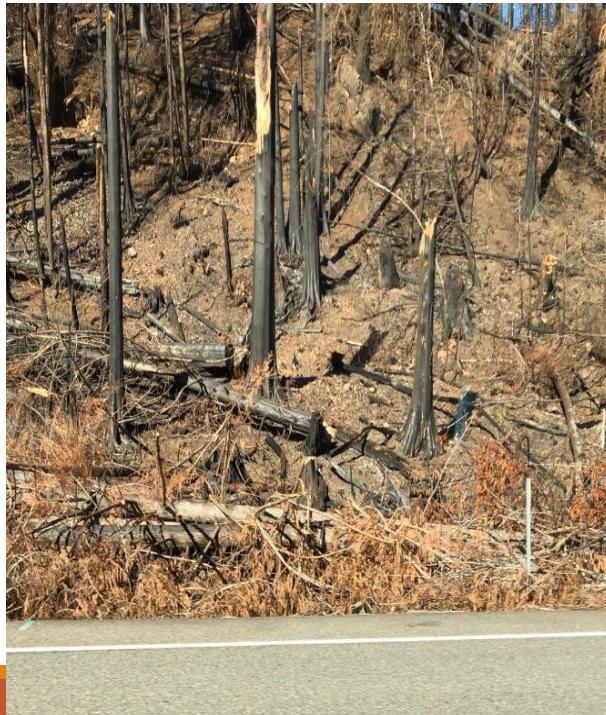
LANE COUNTY BEHAVIORAL HEALTH DISASTER LIAISON

Question:

What is the most important thing to have when responding to a local disaster such as a wildfire, flood, destructive storm, or a mass casualty event such as a shooting or bombing?

Disaster Scene

The 2020 Labor Day Holiday Farm Fire burned 35 miles of the McKenzie Valley along OR Highway 126, burning 464+ homes and many businesses, and destroying the entire town of Blue River including the rural fire department.



Immediate Response-FEMA Model

FEMA-Federal Emergency Management Administration

During a disaster, first responders such as fire and law enforcement use the National Incident Management System (NIMS) for their response. This is a national system of structured response to mitigate the disaster and address immediate needs. Local, regional and national resources may be deployed. They are trained and ready to respond.

<https://www.fema.gov/emergency-managers/nims>

Flooding, fire, storms, shootings, terrorism all require a human services response to help survivors. These responses are a part of the NIMS too, called Emergency Support Function 6.

ESF #6: <https://www.fema.gov/emergency-managers/national-preparedness/frameworks/response#esf>

Human Services: Disaster assistance programs that help survivors address unmet disaster-caused needs; also includes supplemental nutrition assistance, crisis counseling, disaster case management, disaster unemployment, disaster legal services, and other state and Federal human services programs and benefits to survivors.

Immediate Response-Red Cross

<https://www.redcross.org/>

The Red Cross responds to all disasters, large or small. They provide immediate resources at evacuation sites including shelter options, food supplies, medical needs (medications, medical equipment, emergency medical services) and family needs (personal hygiene supplies, diapers for babies and adults, blankets, clothing, pet food, pet care items.)

The Red Cross provides distress assessments while survivors are in shelters, and offers some limited counseling resources, but local folks will know more about resources.

Phone apps available: Search “Red Cross Emergency App” on your phone or tablet for emergency alerts, weather alerts, first aid assistance and pet care assistance.

Pandemics can impact responses—COVID made the 2020 Wildfire response more challenging in a variety of ways—and there are always multiple challenges!

Local Emergency Operations

EOC-Emergency Operations Center —There may be several **EOCs** set up for the different responding elements-Fire, Law Enforcement, County, City, Public Health, etc.

Evacuation Sites —Places where evacuees can go for assistance

Medical/Hospital Operations —Medical operations triage for casualties

COAD —Community Organizations Active in Disasters-local chapters are really helpful

ORVOAD—Oregon Volunteer Organizations Active in Disaster

Other Community Organizations —if there is a vacuum, someone will step in (both for-profit and non-profit organizations may set up operations in a chaotic environment)

Donations and volunteers —Managing these two elements is a huge task

An overwhelming response is normal—people need help, and people want to help—and it is important to manage it efficiently, fairly and equitably.

OREGON OFFICE OF EMERGENCY MANAGEMENT (OEM)

OEM is at the intersection of the local response and the federal response. Federal resources come into the state and are directed and allocated by OEM. During the event, resources will be used to mitigate the scope of the event and will be targeted toward the greatest needs. After the event, resources will continue to mitigate needs. <https://www.oregon.gov/oem/Pages/default.aspx>

Resources for human services responses are available immediately. OEM works closely with local areas to direct funding; counseling resource requests will often go to the designated Community Mental Health Program (CMHP) and it may be challenging to utilize them unless the CMHP understands the process of the disaster response, how to apply for available funding (it is variable by need) and has the ability to activate assistance using counseling staff at the CMHP or in the community.

Volunteer resources from SERV-OR <https://www.oregon.gov/oha/ph/preparedness/serv-or/pages/faq.aspx> (State Emergency Registry of Volunteers) is a database of licensed health care professionals who have registered to volunteer in response to Federal, State, and/or local emergencies. OEM will help access these volunteers when requested by the EOC.

Working in an EOC can be stressful

EOCs are busy places with many staff working on a variety of areas. All actions for the response must go through the EOC to prevent duplication and waste of funding and personnel.

EOCs create Operational Plans with numerous briefing periods.

In the **Immediate Response** period, the 3 priorities (in descending order) are:

- Life safety (both for evacuees and for personnel working the event)
- Incident stabilization
- Property preservation

The Human Services component is usually not the highest priority for first responders whose job is to save lives and mitigate the disaster, but it is very important to evacuees who need help. It can be challenging to address stress, trauma and fatigue in the **Immediate Response**.

In the **Recovery Response** period, Human Services becomes a larger focus with needs assessments and a variety of ways to respond to those needs with local and other resources.

Immediate Challenge: Stress Reduction

Immediately after a disaster, people are struggling to meet basic needs and care for family members and pets, cover employment duties, address home and vehicle loss, etc. Basic trauma support and meeting physical needs is most helpful, such as **Psychological First Aid**.

<https://www.apa.org/practice/programs/dmhi/psychological-first-aid>

https://www.ptsd.va.gov/professional/treat/type/psych_firstaid_manual.asp

There is also a Psychological First Aid Mobile App available from App Stores.

Helpful for treating shock, trauma, stress, uncertainty, grief, loss and meeting immediate needs.

Take care of highest priority needs first: Human safety, locating family and friends, care of pets/animals, dehydration and nourishment, clothing and shelter, medical and hygiene needs.

Assess the experience of the individual: Did they experience or witness casualties or injuries; did they lose property/family members/pets or animals; was their life endangered during their evacuation or was there perceived danger; what was their exposure to the event?

Sometimes, those with the most trauma are the quietest and do not share their experiences, while others may ask for a great deal of help though they had minimal exposure; past history of trauma may be one factor in this, or perceived vulnerability due to social circumstances.

Seek case management assistance to leverage local resources in Evacuation Shelters.

Stress Counseling and Coping Skills

While the psychological stress that personnel and evacuees are experiencing is easily overlooked, it should be included at the same level of importance as medical needs.

Early assistance can prevent long-term post traumatic stress effects.

Ideally, counselors will be available for evacuees at the evacuation sites and shelters to assess needs, connect to resources, and provide personal reassurance. Consider using a program like PsySTART to assess individual experiences and needs.

Evacuees with mental illness may need help getting medications or connecting to services. Evacuees with untreated mental illness can create many challenges for shelter staff and other evacuees, and it is best to have immediate assistance available. It may be necessary to provide crisis services for some evacuees—or it may be necessary to involve law enforcement in the case of violent behavior. It is important that all evacuees feel safe in shelters.

Local Emergency Rooms or Crisis Stabilization Centers may be helpful.

Immediate Challenge: Loss

When homes are destroyed, personal items are lost with them. And so are mail boxes and addresses!

Identification papers: Birth and Marriage certificates, Social Security cards, voting ID cards, driving licenses, school diplomas, safety deposit box keys, etc.

Important documents: Vehicle titles, home insurance papers, tax return records, bank records

Employment documents, self-employed business documents, books, scrapbooks

Family photographs, heirlooms, art, jewelry, cash, clothing, household items

Technology such as computers, phones, chargers, electronics

Food supplies often include meat/game; jams and preserves; home canning; dried food supplies

Personal vehicles, work vehicles, recreational vehicles, boats, canoes, rafts, recreational equipment

And many other things! Many of these items are irreplaceable; others take long hours of persistent work to get duplicates from government agencies and other organizations.

Utilize Local Case Management in Shelters

Determine available assistance from local resources for case management help.

Language Assistance: Interpreter resources, community organizations

Older Adult and Disability Assistance: Senior and Disability Services/Area Agencies on Aging; Independent Living Alliances; Disability Resources; In-Home Care Brokerages

Self sufficiency: Local ODHS and OR Employment Office, County Employment Programs

Education providers: Daycare and Preschool Providers, School systems, ESDs, Colleges

Developmental Disability providers

Veteran's Assistance: Veteran's Administration, Veterans Service Office, Vet Center

Medical care: Hospitals and Medical Clinics; Coordinated Care Organizations for OHP members; Medicare plans

Behavioral Health: Community Mental Health Programs; Local Providers

Chronically Homeless service providers; populations may mix with recent evacuees

Other local case management resources will vary for special populations

Disaster Case Managers (DCMs) will be used later in the recovery timeline

Immediate Challenge: Shelter and Housing--Create a MARC

The Initial Recovery Response is characterized by providing information and items to help evacuees move forward. Provide resources in one place so that the process of receiving information is simplified. Set up a MARC (**Multi Agency Resource Center**) as quickly as possible.

A MARC should be an easily accessible “one-stop shop” to:

- Register for FEMA, SBA, state and local assistance
- Receive supplies and resources for initial survival
- Meet helpful social service agencies who can problem-solve needs
- Connect with school staff for children’s educational needs
- Talk to counselors and outreach specialists about personal feelings
- The MARC organizers should collect and securely maintain a data base for an “Evacuee Registry” that can be used to get resources to those who need them; it is really helpful to have this type of registry throughout the response period.

Transportation to the MARC may be needed for evacuees without vehicles.

Immediate Challenge: Shelter and Housing--Develop a MASTT

<https://www.oregon.gov/ohcs/get-involved/Documents/committees/HTF/10-16-2020-MASTT-Presentation-Final.pdf>

OEM along with ODHS will help the local responder organizations develop a Multi-Agency Shelter Transition Team. The MASTT will assist in assessing and developing individual shelter and housing plans for evacuees who have few resources.

MASTT participants explore barriers and find solutions to help them leave the shelter environment. Common barriers include economic, medical, social and emotional issues.

Resolving the complex issues facing survivors requires the active engagement of multiple local, state and federal agencies as well as non-governmental organizations.

Local housing organizations may be able to apply for funding to support evacuees transitioning from shelters to temporary or permanent housing.

Provide food and meal resources throughout the immediate phase as needed.

Intermediate Recovery Phase

Over the weeks following an event, information will flow about damages, losses, and next steps. Different evacuees will have different reactions to this information.

Human Service responses should provide continuing counseling opportunities as soon as possible after an event. Counseling can focus on resilience and next steps, building community and connecting with family and personal resources. Therapy or in-depth treatment is usually not indicated at this point.

Primary language interpretation and literacy skills should be met for evacuees.

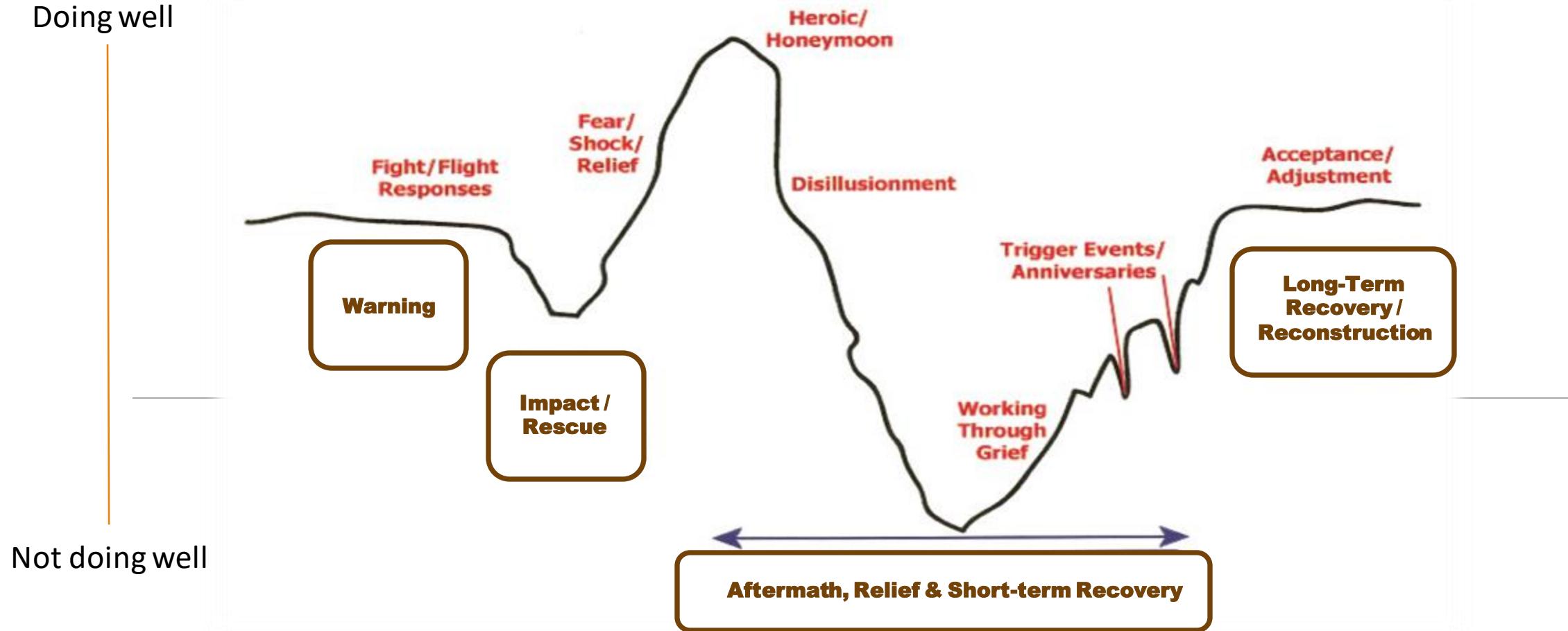
Staff should avoid asking survivors to retell their story as this can be re-traumatizing and may have the negative effect of imprinting their experience, a possible contributor to post traumatic stress. Speculation on “what might have happened” should also be avoided.

A focus on providing support, teaching coping skills, staying mindful in the present moment, exploring resources, and ascertaining if there are remaining unmet needs (cash assistance, gas cards for filling up a vehicle, cell phone/tablet/laptop/charger replacements, broadband capacity, child or elder care, etc.) are all helpful.

Disaster Case Management (DCM) will be available after the event, but takes time to set up. This is a particular model funded by FEMA to assist those affected by disaster utilizing data bases to prevent duplication of assistance. Duplicate funds may be clawed back by FEMA, a very stressful situation.

TIMELINE: THE EMOTIONAL IMPACT OF CRISIS

Doing well



Not doing well

Counseling following disaster

As weeks and months pass, grief, post trauma responses, depression and hopelessness can be overwhelming. This is especially true once resources are no longer available, and the reality of trying to rebuild a life with inadequate resources becomes apparent.

OEM provides funding for outreach and counseling in the affected area both immediately (1-3 months) and longer range (3-9 months) after a disaster through FEMA's Crisis Counseling Program (CPP) and this is extremely helpful. Lane County utilized White Bird for this in the McKenzie area.

But...It may be challenging for evacuees to find time and to have fortitude for counseling.

Challenges: How to bring counseling resources to rural areas? Barriers include: Funding...finding therapists/counselors to provide rural services...privacy issues when everyone "knows everyone"...available locations in damaged areas...transportation issues...and the reluctance of people to get counseling help due to a variety of personal reasons.

The Mind Over Mood model can be helpful: <https://www.mindovermood.com/> This curriculum can be delivered in a group or classroom format and does not involve diagnosing or therapy.

A menu of counseling services

If possible, offer a variety of possible options:

- Low barrier Coping Skills and Stress Reduction Classes
- Counseling Groups with skilled facilitators (peer support models)
- Individual therapy with Independent Licensed Therapists
- Camps and school programs for children (play and fun help so much!)
- School counseling for youth
- Secondary Trauma Support for responders, teachers, service workers, recovery personnel
- Suicide prevention resources may be helpful
- Substance use counseling is underutilized but may be really helpful

Online Resources can help

The Community Resilience Toolkit was initially created to provide online resources for behavioral health during the COVID Pandemic's first year.

It was quickly adapted to the needs of wildfire evacuees.

Creating a similar site in a region is a great way to provide information to those who need it with just one website to visit.

www.lanecounty.org/toolkit

Local Responses Will Vary

Volunteer counselors—a **Trauma Intervention Project** in the area will be very helpful (if it exists) <https://tipnational.org> and local BH providers, student interns, and licensed therapists may volunteer

United Way, Rotary, Lions, other philanthropic community partners may provide funding and resources

Religious Resources: Lutheran Disaster Services, Mennonite Disaster Relief, Catholic Charities, churches

Be timely--provide holiday meals if they are needed; warming/cooling shelters depending on weather

Camp Noah (Lutheran Disaster Services) <https://www.lssmn.org/campnoah/>

Compass Camp for youth in Cheshire, OR <https://www.lutherwoodoregon.org/camp/>

Support for counseling in rural schools; Rural healthcare is a wonderful resource, if available

Providing direct counseling support such as Green Cross, <https://greencross.org> and utilize licensed folks through SERV-OR, <https://www.oregon.gov/oha/ph/Preparedness/SERV-OR/Pages/index.aspx>

Blue River/McKenzie Bridge residents established a **Locals Helping Locals** club to provide peer assistance <https://www.facebook.com/groups/1095389947503894/>

Note: Rural communities may have long standing divides between localities that must be respected!

FEMA's Diverging Paths To Recovery

Individual Assistance and Public Assistance: Two paths! Many survivors mourn the loss of their communities as well as their own personal losses, but the distinction between these two areas is necessary when applying for help.

Public spaces, public buildings and businesses all fall under FEMA's **Public Assistance**

Personal housing, belongings, and property fall under FEMA's **Individual Assistance**

FEMA and the Small Business Administration (SBA) provide **direct cash assistance** and **low interest loans** and other support for both Public and Individual Assistance, but in distinctly different ways, and these two areas cannot be mixed. The amount of cash assistance for individuals is quite low!

Population Considerations: Older Adults

Disasters affect populations in a variety of ways, and older people seem to struggle with the most challenges regardless of socio-economic status. Why?

Sense of betrayal: “I worked hard all my life to create this home for my retirement, and now it’s all gone...”

Resentment: “I can’t start over at this point in my life, like I could when I was younger..”.

Reluctance to take government money: “I’m not taking charity, other people need that more than me...”

Higher anxiety, cognitive struggles associated with aging: “I couldn’t figure out how to do that online stuff...” “I don’t want to talk to those people...”

Their ability to leverage loans and funding without jobs is compromised.

Many other reasons may be apparent too.

Population Considerations: Language

When English is not someone's primary language, many additional challenges occur

Many people with diverse language/cultural identities *will not* seek help from government entities and instead go to family resources or culturally familiar organizations. Utilizing those organizations as conduits for information and assistance is one way to meet these very legitimate needs without inspiring fear or embarrassment.

Is it possible to have interpreters available to help with paperwork and understanding the process of applying for recovery assistance? Telephone interpretation can be helpful.

Are all the documents translated into the needed primary language?

Are there available recovery resources sufficient for culturally diverse populations?

Is there assistance for undocumented individuals?

Individual Assistance: Long Term Recovery Groups

FEMA supports the development of Long Term Recovery Groups in the local community to support the one-to-five-year (or longer) need for home and livelihood rebuilding through the process of Individual Assistance.

LTRG Goals: Displaced homeowners or renters will have a *safe, sanitary and secure dwelling* to live in, and will have replaced their necessary infrastructure components such as water, sewer, and furnishings, as well as items needed for their livelihood.

Help for creating and implementing an LTRG is provided by The Disaster Leadership Team, an organization that offers mentorship for new **LTRGs**. <https://thedlt.org/>

FEMA's LTRG Handbook: <https://www.nvoad.org/wp-content/uploads/longtermrecoveryguide-final2012.pdf>

This tool from Oregon State University provides a lot of helpful data that is useful for grant writing, which is the way that LTRGs get most of their funds:

<https://oe.oregonexplorer.info/rural/CommunitiesReporter/>

FEMA's Long Term Recovery Group Components



FEMA Graphic

The LTRG Structure

The **LTRG Board** consists of residents, evacuees, volunteers, subject experts, community leaders, etc.

An **Executive Committee** guides the LTRG mission and strategy

The **Unmet Needs Committee** hears cases from the Disaster Case Managers (DCMs) and distributes funds

The **Spiritual and Emotional Care Committee** guides the human services work and counseling care

The **Communication Committee** does information dissemination and website production

The **Construction Committee** brings in knowledge of the challenges and barriers to rebuilding

A **Volunteer Committee** can help manage volunteer resources

A **Donations/Development Committee** writes grants and requests for funds from charities and donors

LTRGs may have **DCMs** on staff as well

Others committees can be added as needed—and some of these may not be needed and can be skipped

McKenzie Valley Long Term Recovery Group

The McKenzie Valley Long Term Recovery Group of Lane County (MVLTRG) incorporated in May 2021 with the assistance of the Nonprofit Association of Oregon (NAO <https://nonprofitoregon.org/>). Now a strong and trusted organization in the McKenzie Valley able to distribute funds directly to residents through the collaboration of FEMA-trained DCMs and using an Unmet Needs Committee (UNC) to make fair and equitable funding decisions.

The MVLTRG collaborates with other recovery organizations such as the Blue River Locals Helping Locals chapter; Lane County's Recovery Manager and Planning/Permitting Department; United Way, Rotary and other funders; and foundations such as the Ford Family Foundation and Oregon Community Foundation.

The MVLTRG is planning for a multi-million budget this year and is ready to assist with new disasters in Lane County as well.

Spiritual and Emotional Care

FEMA combines these two elements, which may not be ideal; they can be separated to avoid an appearance of a religious focus. **Human Services** is the focus of this group.

The MVLTRG's SECC (Spiritual and Emotional Care Committee) started with separate committees for the first year, then combined them once trust in the organization increased. The SECC is focused on the psychological wellbeing of those living in the McKenzie Valley.

The SECC sponsored 2 Camp Noah's for children in the upper and lower Valley; provided school counselor assistance in the McKenzie School; arranged Coping Classes for Adults, Group Therapy, and Individual Therapy. It has also been involved in many other projects including holiday cheer events, volunteer "shopper assistance," and planning gatherings. Recently it has assisted in secondary trauma assistance for personnel working in the Valley.

The SECC has continued a focus on counseling following the second anniversary of the fire, to meet the needs of those who have been unable to utilize metro-area counseling.

Question:

What is the most important thing to have when responding to a local disaster such as a wildfire, flood, destructive storm, or a mass casualty event such as a shooting or bombing?

Answer:

Have all the disaster planning, response training, and community preparedness completed before the event; have diverse resources ready for immediate use during and after the event; and be ready to respond when needed!

Helpful Recovery Resources

National Disaster Distress Helpline: **(800) 985-5990**

Wildfire Recovery Assistance: **(833) 669-0554**

National Mental Health Crisis Line for stress, suicide, trauma: Dial **988**

Oregon Wildfire Insurance Line: **(877) 623-7610**

Aging and Disability Resource Connection: **(855) 637-2372**

Oregon Senior Friendship Line: **(503) 200-1633**

Websites:

- <https://www.211info.org/>
- www.Lancecounty.org/toolkit

REFERENCES AND RESOURCES

FEMA Resources

FEMA Disaster Response Structure <https://www.fema.gov/emergency-managers/nims>

FEMA Individual Assistance Program and Policy Guide (IAPPG) -
https://www.fema.gov/sites/default/files/2020-09/fema_individual-assistance-program-policy-guide_11-29-2018.pdf

Red Cross <https://www.redcross.org/>

Oregon Resources

Office of Emergency Management <https://www.oregon.gov/oem/Pages/default.aspx>

Volunteer resources from SERV-OR <https://www.oregon.gov/oha/ph/preparedness/serv-or/pages/faq.aspx>

OR Dept. of Human Services: <https://www.oregon.gov/dhs/Pages/index.aspx> and
<https://www.oregon.gov/dhs/EmergencyManagement/Pages/index.aspx>

REFERENCES AND RESOURCES

Volunteer Organizations Active in Disaster

National VOAD Disaster Case Management Guidelines -
<https://www.nvoad.org/wp-content/uploads/dcmguidelines-final.pdf>

National VOAD Long Term Recovery Guide - <https://www.nvoad.org/wp-content/uploads/longtermrecoveryguide-final2012.pdf>

Psychological First Aid.

<https://www.apa.org/practice/programs/dmhi/psychological-first-aid>

[https://www.ptsd.va.gov/professional/treat/type/psych firstaid manual.asp](https://www.ptsd.va.gov/professional/treat/type/psych_firstaid_manual.asp)

Psychological First Aid Mobile App from App Stores

REFERENCES AND RESOURCES

Disaster Trauma Assessment

For working personnel and evacuees: PsySTART <https://psystart.net/>

Self-Care Assistance for Personnel

ProQOL-Professional Quality of Life <https://proqol.org/compassion-fatigue>

Mobile APPS from App Stores:

Provider Resilience App

ProQOL App

REFERENCES AND RESOURCES

LTRG Resources

The Disaster Leadership Team provides mentorship and help for creating and implementing a Long Term Recovery Group (LTRG). <https://thedislt.org/>

FEMA Handbook: <https://training.fema.gov/programs/emischool/el361toolkit/assets/long-termcommunityrecoveryplanningprocess.pdf>

Oregon State University provides a lot of helpful data useful for grant writing to get disaster funds: <https://oe.oregonexplorer.info/rural/CommunitiesReporter/>

Nonprofit Association of Oregon (NAO) <https://nonprofitoregon.org/>

Resources for families and youth:

National Child Traumatic Stress Network: <https://www.nctsn.org/>

Camp Noah (Lutheran Disaster Services) <https://www.lssmn.org/campnoah/>

Compass Camp for youth in Cheshire, OR <https://www.lutherwoodoregon.org/camp/>

REFERENCES AND RESOURCES

Counseling Assistance

Trauma Intervention Project <https://tipnational.org>

Green Cross, <https://greencross.org>

SERV-OR, <https://www.oregon.gov/oha/ph/Preparedness/SERV-OR/Pages/index.aspx>

The Mind Over Mood model: <https://www.mindovermood.com/>

Disaster Case Management

<https://www.samhsa.gov/resource/dbhis/disaster-case-management>

MASTT-Multi-Agency Shelter Transition Team

<https://www.oregon.gov/ohcs/get-involved/Documents/committees/HTF/10-16-2020-MASTT-Presentation-Final.pdf>

Thank You for Attending!

I'd love to hear more about your community's plans for human services and your work on disaster response, and to answer any questions you might have.

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