

ASPR TRACIE Technical Assistance Request

Request Receipt Date (by ASPR TRACIE): 23 October 2023

Response Date: 6 December 2023

Type of TA Request: Complex

Request:

The requestor stated that after a disaster or other critical incident, “Nearly all these local officials have experienced trauma, either from personal experience or vicariously as they’ve interacted with their community. Through this, we’ve realized our deployment staff – as well as the rest of the federal interagency, voluntary agencies, and recovery organizations – don’t generally have training or experience in interacting with officials after a mass fatality incident thoughtfully and in a way that will not cause further harm. A tip sheet or resource guide would be invaluable.”

Response:

The ASPR TRACIE Team reviewed our resources and conducted an online search for resources on how federally deployed staff can best communicate with local leaders in the aftermath of a critical incident.

Two resources continue to be “classics” when it comes to tips for communicating with community members and leaders after a disaster. Not only could deployment staff familiarize themselves with relevant components of these materials and take the free offered courses to increase comfort with these stressful situations, but they could also suggest them to community leaders after a critical incident as they include templates and other helpful materials.

The first is the Center for Disease Control and Prevention’s (CDC) [Crisis & Emergency Risk Communication \(CERC\)](#), including the [CERC Manual](#), which includes chapters on messages and audiences (and primary concerns of various audiences), community engagement, and working with the media. [CERC Corner](#) contains real-life examples and qualities of effective spokespersons, risk communication principles, and considerations for plans.

The second resource we would suggest is the Psychological First Aid (PFA) framework, as its goal is to teach disaster responders (including deployment staff) communication techniques to help children, adolescents, adults, and families in the immediate aftermath of disaster and terrorism. More specifically, ASPR partnered with the National Association of County and City Health Officials (NACCHO) to release the online course, [Building Workforce Resilience through the Practice of Psychological First Aid: A Course for Leaders and Teams](#).

We would also like to highlight the ASPR TRACIE [Disaster Behavioral Health Resources Page](#), which includes links to our related resources (e.g., Topic Collections, modules, and articles) and other websites that contain helpful information. The more familiar deployment staff are with these materials, the easier it will be for them to apply what is contained within them as they deem necessary and refer leaders to helpful resources in the short- and long-term.

We also wanted to share the webpage developed by Maine's Department of Health and Human Services for community leaders and health care providers as a response to the mass violence in Lewiston as it provides general coping resources and materials geared towards specific audiences: [Behavioral Health Resources for Those Affected by the Violence in Lewiston](#). On the webpage, they posted links to resources on webinars they have held since the incident for clinicians; general resources; child health resources; behavioral health resources for patients; and resources for providers needing assistance (access the page here: <https://www.maine.gov/dhhs/obh/resources-lewiston-shooting/provider-support>). This page provides an example of how state leaders clearly, quickly, and compassionately communicated with local leaders and community members in the aftermath of an incident.

The First Encounter

Overall, what we found (both through research and working with subject matter experts in communications and disaster behavioral health after countless disasters since the inception of ASPR TRACIE in 2015) is that community leaders (including those in health care, who we primarily serve) face two challenges in the aftermath of a disaster. First, they share the same concerns as their residents (since they likely live in the same communities and have friends, loved ones, and colleagues affected by the incident). They may also feel traumatized and be experiencing the negative effects of stress on a personal level after an incident. Second, as leaders, they know they need to support their staff and the community at-large, sharing information and other forms of support in the aftermath of a disaster. While some information will be specific to the nature of the incident (e.g., mass violence versus a natural disaster), deployed disaster responders can support community leaders by asking them:

- To describe the incident from their perspective
- About their community and residents (e.g., languages spoken, populations with access and functional needs, geographic characteristics that could hinder response/supply delivery, and other demographics)
- How the incident affected them personally (e.g., did they lose someone close to them, did they know victims' family members)
- How it affected them professionally (e.g., are their staff affected at home/work, are they short-staffed, do they need to provide immediate services to their employees)

- How the incident affected community members and where might impacts be more concentrated
- What support have they already requested and received/are waiting for
- What challenges they anticipate/have already faced in the response phase
- About the behavioral health and other support available to their staff through the workplace
- How connected they feel to other community leaders (e.g., do they meet regularly, and do they address emergency preparedness and response together)
- How much work they have previously done in emergency preparedness
- If they have worked with others on planning and responding to disasters/mass casualty incidents
- What they have done so far to take care of themselves
- What they have done so far to take care of staff
- What they have done so far to take care of their communities

The answers to these questions can help disaster responders understand where each leader is in the response continuum and tailor the information and resources they suggest (e.g., the Disaster Distress Helpline, PFA, behavioral health resources for disaster responders, health care workers, educators, and others). In the immediate term, some of these resources can include (listed alphabetically):

- [Building Workforce Resilience through the Practice of Psychological First Aid: A Course for Leaders and Teams](#) (ASPR and NACCHO)
- [Coping in Hard Times: Fact Sheet for Community Organizations and Leaders](#) (The National Child Traumatic Stress Network [NCTSN])
- [Disaster Distress Helpline](#) (Substance Abuse and Mental Health Services Administration's (SAMHSA) (to use and to share)
- [Leadership Essentials During a Disaster](#) (Journal of Radiology Nursing)
- [Mini Modules to Relieve Stress for Health Care Workers](#) (ASPR TRACIE) (though designed for health care workers to use during the COVID-19 pandemic, anyone can use these brief modules to identify and manage stress and strengthen organizational wellness)
- [Response Resources for Leaders](#) (CDC)
- [Tips for Retaining and Caring for Staff after a Disaster](#) (ASPR TRACIE)

Having easy to implement strategies can help leaders feel more empowered and in control in the aftermath of an incident. In both the short- and long-term, it is key for executives to tailor messages to the various stakeholders in their communities and deliver them clearly and

consistently. The following additional resources can be adjusted by leaders and deployment staff to maximize post-disaster communication and management opportunities.

Related Resources

Administration for Strategic Preparedness and Response. (2021). [A Guide to Compassionate and Empathic Dialogue](#). U.S. Department of Health and Human Services.

ASPR worked with the American Foundation, Puerto Rico Region, to develop this guide to help emergency response and recovery personnel engage effectively and empathically with their stakeholders in a multi-hazard environment. It includes an overview of the emotional phases of a disaster, the essential steps of offering compassionate and empathic communication, and supportive evidence-based information and resources. Also available in Spanish: <https://files.asprtracie.hhs.gov/documents/guia-para-un-dialogo-compasivo-y-empatico-report.pdf>.

Agency for Toxic Substances and Disease Registry. (2016). [Helping Families Deal with the Stress of Relocation After a Disaster](#).

This document provides information and tips for health care professionals (but can also be used by disaster responders) about helping families deal with relocation after a disaster. It provides basic information about stress; signs of and ways to help family members deal with relocation stress; signs of stress young people of different age groups (from preschool to high school age); how to help the elderly deal with relocation stress; and where to find further information on these topics.

ASPR TRACIE. (2019). [Responder Safety and Health Topic Collection](#). U.S. Department of Health and Human Services.

The resources in this Topic Collection focus on responder safety strategies (e.g., preventing fatigue, ensuring the availability and correct use of personal protective equipment) and maintaining behavioral health (e.g., working through stress and preventing/addressing compassion fatigue).

ASPR TRACIE. (2023). [Risk Communications/Emergency Public Information and Warning](#). U.S. Department of Health and Human Services.

Resources in this Topic Collection include lessons learned, education and training modules, results from studies conducted on the effectiveness of risk communications and plans, tools, and templates that can be tailored to meet the specific threats and needs of healthcare and medical professionals. (NOTE: access the [Plans, Tools, and Templates: General](#) section for tips, templates, and strategies for communicating with various audiences).

Berkowitz, S., Bryant, R., Brymer, M., et al. (2010). [Skills for Psychological Recovery: Field Operations Guide](#). National Center for PTSD and National Child Traumatic Stress Network.

This manual can help disaster behavioral health responders learn about how to help survivors cope with stress and other negative effects after a disaster. This intervention is designed to follow Psychological First Aid support and provides skill-based interventions to the affected individual; links to related resources are provided.

Centers for Disease Control and Prevention. (2018). [Coping With a Disaster or Traumatic Event](#).

This webpage contains links to resources focused on disaster behavioral health. There are resources geared towards individuals, responders, health professionals, and other community members, and some are categorized by hazard. The “Responders: Tips for Taking Care of Yourself” page includes discussion on burnout and self-care techniques. “Response Resources for Leaders” includes information on compassionate communication with victims.

Centers for Disease Control and Prevention. (2018). [Crisis & Emergency Risk Communication \(CERC\)](#).

The [CERC Manual](#) includes chapters on messages and audiences (and primary concerns of various audiences), community engagement, and working with the media. [CERC Corner](#) contains real-life examples and qualities of effective spokespersons, risk communication principles, and considerations for plans.

Centers for Disease Control and Prevention, Center for Preparedness and Response. (2017). [Mental Health Aspects of an Emergency Response.](#)

This hour-long webinar, cosponsored with National Voluntary Organizations Active in Disaster (NVOAD), discusses mental health and spiritual care in emergencies. Speakers discuss stress, stigma, isolation, populations more likely to be adversely affected by specific emergencies, and effective communication to address mental health concerns, including in faith-based settings.

Children’s Hospital of Philadelphia. (2021). [Resources on Trauma-Informed Pediatric Care, Prevention and Treatment of Traumatic Stress Reactions, and General Pediatric Behavioral Health Topics.](#)

This webpage provides links to resources that can help health care providers work with pediatric patients and their caregivers after a traumatic incident.

Disaster Technical Assistance Center (DTAC). (2023). [Disaster Behavioral Health Resources.](#) U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration.

This webpage includes links to various DTAC resources, including newsletters and tip sheets. Responders can use printable and sharable posters, flyers, and a wallet card to help educate survivors about expected reactions.

Disaster Technical Assistance Center. (2023). [First Responders and Disaster Responders Resource Portal.](#) U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration.

These resources can help disaster responders prepare for a disaster response and recover once they have returned from deployment.

Disaster Technical Assistance Center. (2017). [Tips for Health Care Practitioners and Responders: Helping Survivors Cope with Grief After a Disaster or Traumatic Event.](#) U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration.

This document provides health care practitioners and disaster responders with guidelines for communicating with disaster survivors experiencing grief. It provides background information about the grieving process, and what happens when the grief

process is interrupted and complicated, or traumatic grief occurs, as well as helpful resources for additional assistance.

Disaster Technical Assistance Center. (2019). [Communicating in a Crisis: Risk Communication Guidelines for Public Officials](#). U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration.

This guide can help public leaders and others work with the media, use social media, and control rumors and misinformation after a disaster.

Disaster Technical Assistance Center. (2022). [Tips for Disaster Responders: Cultural Awareness When Working in Indian Country Post Disaster](#). U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration.

This tip sheet for behavioral health responders outlines the types of traumatic events that can occur in Indian Country and examples of effective response techniques such as use of traditional teachings and talking circles.

Disaster Technical Assistance Center. (2022). [Tips for Disaster Responders: Understanding Historical Trauma and Resilience When Responding to an Event in Indian Country](#). U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration.

This tip sheet for responders provides a description of the effects of historical trauma on American Indian/Alaska Natives, and tips for how responders can respond effectively to a disaster or other traumatic event in Indian Country.

Grossman, V. (2020). [Leadership Essentials During a Disaster](#). *Journal of Radiology Nursing*. 39(3): 156–157.

This brief article outlines practical steps leaders can take to guide their teams through a disaster.

Office of the Assistant Secretary for Preparedness and Response. (2021). [A Guide to Compassionate and Empathic Dialogue](#). U.S. Department of Health and Human Services.

ASPR worked with the American Foundation, Puerto Rico Region, to develop this guide to help emergency response and recovery personnel engage effectively and empathically with their stakeholders in a multi-hazard environment. It includes an overview of the emotional phases of a disaster, the essential steps of offering compassionate and empathic communication, and supportive evidence-based information and resources. Also available in Spanish: <https://files.asprtracie.hhs.gov/documents/guia-para-un-dialogo-compasivo-y-empatico-report.pdf>

State of Maine Department of Health and Human Services. (2023). [Behavioral Health Resources for Those Affected by the Violence in Lewiston](#).

The state's department of health and human services created this webpage in the aftermath of the violence in Lewiston, Maine. Links to resources for general help coping with a traumatic event; for children, families, and caregivers; for those affected by substance use; for veterans; for the deaf and hard of hearing; for organizations and communities; and for health care providers are provided on the page.

The Center for the Study of Traumatic Stress. (2023). [The Center for the Study of Traumatic Stress](#). Uniformed Services University.

The Center for the Study of Traumatic Stress has developed a set of [factsheets](#) that can be searched by keyword, role, and topic. Their website also includes links to [education and training](#) resources (e.g., conferences, videos, and presentations); recent and ongoing [research efforts](#); and other [resources](#) (e.g., journal articles, newsletters, reports, and book chapters).

The National Child Traumatic Stress Network. (2014). [Pediatric Medical Traumatic Stress Toolkit for Health Care Providers](#).

This resource consists of a compendium of tools to help providers address the emotional, as well as the physical side of trauma. Included are guidebooks on implementing trauma-informed care, with case studies and examples, as well as complementary patient handouts for children and parents with evidence-based tips and activities.

The National Child Traumatic Stress Network. (2020). [Skills for Psychological Recovery \(SPR\) Online.](#)

Skills for Psychological Recovery (SPR) is a 5-hour interactive course designed for providers to help survivors gain skills to manage distress and cope with post-disaster stress and adversity. This course is for individuals who want to learn about using SPR, learning the goals and rationale of each core skill, delivering SPR, and supporting survivors in the aftermath of a disaster or traumatic event (<https://learn.nctsn.org/enrol/index.php?id=535> *).

The National Child Traumatic Stress Network. (2013). [PFA Mobile™.](#)

This mobile app can help responders who provide PFA. It features a review of the core functions of PFA, helps users match interventions to survivors' reactions, provides mentoring tips, helps users assess their readiness to conduct PFA, and helps track survivors' needs.

U.S. Department of Veterans Affairs, National Center for PTSD. (2018). [Working with Trauma Survivors: What Workers Need to Know.](#)

This website provides information on the importance of learning about traumatic stress and how approaching survivors with genuine respect, concern, and knowledge about their process can help move them towards recovery.