

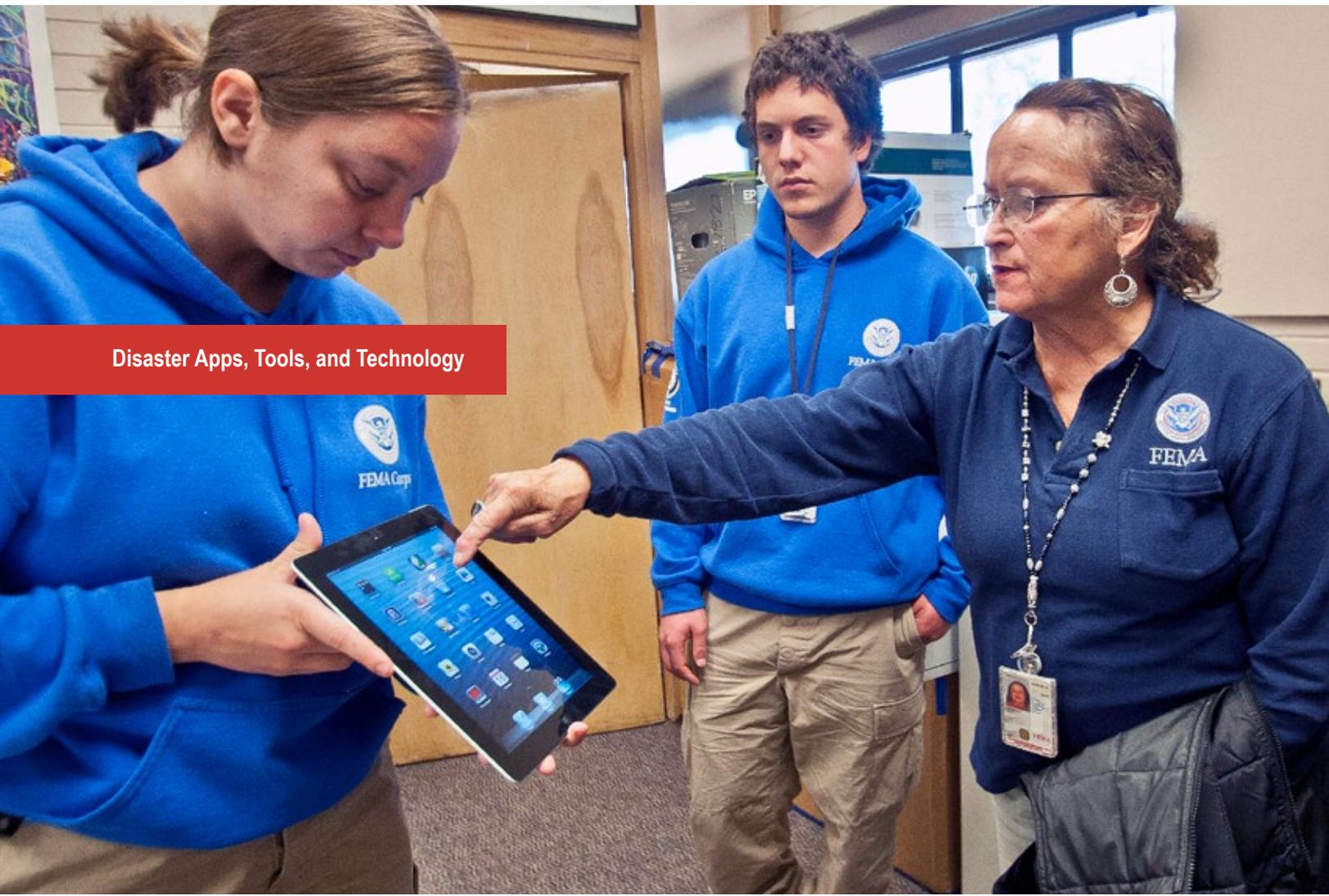
SAMHSA

Substance Abuse and Mental Health
Services Administration

A Quarterly Technical Assistance Journal on Disaster Behavioral Health
Produced by the SAMHSA Disaster Technical Assistance Center

the Dialogue

2019 | VOLUME 15 | ISSUE 1



Disaster Apps, Tools, and Technology

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Karen Bogenberger, a Federal Emergency Management Agency (FEMA) Corps, Disaster Survivor Assistance disability communications specialist, demonstrates a disaster-related app. Photo by Patsy Lynch/FEMA.

The Dialogue is a quarterly technical assistance journal on disaster behavioral health which is produced by the Substance Abuse and Mental Health Services Administration (SAMHSA) Disaster Technical Assistance Center (DTAC). Through the pages of *The Dialogue*, disaster behavioral health professionals share information and resources while examining the disaster behavioral health preparedness and response issues that are important to the field. *The Dialogue* also provides a comprehensive look at the disaster training and technical assistance services SAMHSA DTAC provides to prepare states, territories, tribes, and local entities so they can deliver an effective disaster behavioral health response. To receive *The Dialogue*, please go to SAMHSA's home page (<https://www.samhsa.gov>), click the "Sign Up for SAMHSA Email Updates" button, enter your email address, and mark the checkbox for "SAMHSA's Disaster Technical Assistance newsletter, The Dialogue," which is listed in the Newsletters section.

SAMHSA DTAC provides disaster technical assistance, training, consultation, resources, information exchange, and knowledge brokering to help disaster behavioral health professionals plan for and respond effectively to mental health and substance misuse needs following a disaster.

To learn more, please call 1-800-308-3515, email dtac@samhsa.hhs.gov, or visit the SAMHSA DTAC website at <https://www.samhsa.gov/dtac>.

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In This Issue

Today almost everyone from elementary school children to grandparents has a cell phone or access to one. This abundance of technology provides an opportunity for disaster planners to think about alternative ways, such as disaster alerts via cell phones or disaster apps, to communicate with target audiences.

There are mobile device apps that serve a wide range of disaster-related functions available for various audiences including disaster behavioral health planners, disaster responders, and the public. These apps and tools can assist with preparing before a disaster hits, help responders and their family get ready for a deployment, and assist with communication during a disaster.

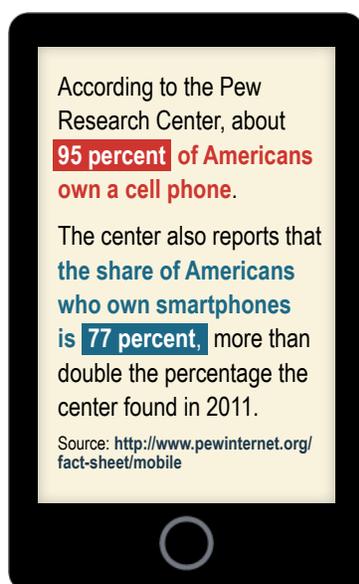
In addition to apps, social media has proven useful during disaster response. Social media has become a common way for people to communicate on a day-to-day basis. A Pew Research Center survey showed that today around 70 percent of Americans use a social media platform to connect with others, access news, share information, and seek out entertainment (<https://www.pewinternet.org/fact-sheet/social-media>). This number has increased from 2005 when only about 5 percent of Americans used social media.

Disaster planners should work to integrate these communication tools into their planning activities. A Congressional Research Service report, *Social Media and Disasters: Current Uses, Future Options, and Policy Considerations*, states that in the last 5 years social media has played an increasing role in emergencies and disasters (https://ofti.org/wp-content/uploads/2012/07/42245_gri-04-11-2011.pdf).

This issue highlights several tools and apps that may be useful before, during, and after a disaster. The first article of this issue highlights how a public information,

education, and emergency outreach coordinator has incorporated social media into his job. We then highlight three useful disaster-related apps. The National Child Traumatic Stress Network's Help Kids Cope app assists parents, caregivers, teachers, and responders in supporting children through the stress of sheltering in place, evacuations, and healing after a disaster.

The Substance Abuse and Mental Health Services Administration (SAMHSA) Behavioral Health Disaster Response App can be used by disaster responders to help meet the needs of survivors by providing preparedness and response information and assistance in finding local mental health and substance use services. SAMHSA's Suicide Safe Mobile App helps health care professionals assess a patient's risk of suicide. We wrap up this issue with an article about the Disaster Distress Helpline, which provides 24/7, 365-day-a-year crisis counseling and support to people experiencing emotional distress related to natural or human-caused disasters.



Do you have a favorite app or tool that you use during disasters? Would you recommend a specific technology to others in the disaster behavioral health field? We encourage you to contact us to share your recommendations and experiences. ■

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Christian Burgess, M.S.W. is Director of the Disaster Distress Helpline (DDH), a program of the Substance Abuse and Mental Health Services Administration administered

by the nonprofit Mental Health Association of New York City. DDH calls (1-800-985-5990) and texts (text 'TalkWithUs' to 66746) are answered by a network of independently operated crisis centers located throughout the country who provide 24/7 multilingual, confidential crisis counseling and support to disaster survivors and responders throughout any phase of a natural or human-caused disaster. Mr. Burgess serves on the National Voluntary Organizations Active in Disaster (VOAD)

Emotional and Spiritual Care Committee (ESCC), co-chaired the New York City VOAD ESCC from 2013 to 2014, and launched the Oregon VOAD Emotional and Spiritual Care Committee in June 2017. Prior to Link2Health Solutions, Inc. (part of the Mental Health Association of New York City), Mr. Burgess worked for 10 years in youth violence prevention and trauma intervention, including as Director of School Programs at Safe Horizon, one of the nation's largest service providers for victims of crime and abuse.



Eric Frank has over 20 years' involvement in public safety. Starting as a firefighter/emergency medical technician, he rose in the ranks to fire chief of his department. Mr. Frank

then served as the Disaster and Emergency Services Coordinator of Stillwater County in Montana. During this time he oversaw and rewrote the county's emergency operations plan, helped the county achieve a Pre-Disaster Mitigation Grant, reviewed plans for wildfire suppression in Stillwater County, and launched the first use of social media by emergency management in Montana.

Mr. Frank came to work for the Clark Regional Emergency Services Agency (CRESA) in 2012. Originally tasked with working on the county's emergency plans and facility safety plans, Mr. Frank now serves as Public Education, Outreach, and Information Coordinator for CRESA in Vancouver, Washington. At CRESA, Mr. Frank has continued to seek new strategies to change behavior regarding personal preparedness, including hosting Disaster Movie Nights and holding online preparedness challenges such as 30Days, 30Ways. He presents regularly regarding personal preparedness, and using social media as part of emergency management and school safety. He also oversees the Citizen Corps programs in Clark County,

working closely with public safety volunteers throughout the county. Mr. Frank is a 2017 graduate of the National Emergency Management Advanced Academy, and he also serves as a board member of the Washington State Emergency Public Information Network.



Kristine Louie, Ph.D. is the Assistant Director of the Terrorism and Disaster Program of the UCLA and Duke University NCCTS. In

this position, Dr. Louie is engaged in the dissemination of and training in acute interventions for responding to terrorism, disasters, and school violence. Dr. Louie is also involved in the development of educational materials and resources for professionals, teachers, and families preparing for and responding to catastrophic events. Previously, Dr. Louie worked as a disaster behavioral health specialist for the SAMHSA Disaster Technical Assistance Center. In this capacity, she provided technical assistance to states, territories, and federally recognized tribes providing behavioral health support following natural disasters.

TECHNICAL ASSISTANCE SNAPSHOT

Crisis Counseling Assistance and Training Program (CCP)

REFERRAL DATA HIGHLIGHTS

CCP grantees from the grants listed below referred disaster survivors to a range of additional services between October 3, 2017, and October 3, 2018. These data are from both Immediate Services Program (ISP) and Regular Services Program (RSP) grants.

- AS-4357 ▪ FL-4337 ▪ MO-4317 ▪ SC-4286 ▪ TX-4332
- CA-4344 ▪ GA-4297 ▪ NC-4285 ▪ TN-4293 ▪ TX-4377
- CA-4353 ▪ HI-4366 ▪ PR-4339 ▪ TX-4223 ▪ VI-4340

REFERRAL	ISP	RSP	BOTH
Mental health services	27,354	20,101	47,455
Substance misuse services	1,016	1,404	2,420
Resources for those with disabilities or other access or functional needs	3,003	4,240	7,243
No referral provided	29,885	18,916	48,801
Community services	63,253	74,307	137,560
Other	6,496	5,076	11,572
Crisis counseling program services	85,672	95,047	180,719
TOTAL	216,679	219,091	435,770

Recent Technical Assistance Requests

In this section, read about recent questions the Substance Abuse and Mental Health Services Administration (SAMHSA) Disaster Technical Assistance Center (DTAC) staff have answered and technical assistance requests to which they have responded. Send your questions and comments to dtac@samhsa.hhs.gov.

Request: SAMHSA DTAC received a request from an experienced state disaster behavioral health coordinator to conduct an in-depth review of several books focused on disaster behavioral health. The SAMHSA DTAC team looked at whether the book offered a solid background in disaster behavioral health and covered the major issues professionals should expect to encounter in planning, response, and recovery activities.

Response: SAMHSA DTAC created a report including summaries for each textbook. Highlights from each summary are below:

1. ***Disaster Mental Health Interventions: Core Principles and Practices*** by James Halpern, Ph.D. and Karla Vermeulen, Ph.D.

This textbook uses case studies and real-world examples to demonstrate the content discussed. It covers all aspects of disaster mental health and places emphasis on how disaster mental health differs from counseling in a clinical setting.

2. ***Mental Health and Disasters*** by Yuval Neria, Ph.D., Sandro Galea, M.D., Dr.P.H., and Fran H. Norris, Ph.D.

This textbook provides a detailed look at disaster mental health, including discussion of special groups and vulnerable populations that may require special considerations during planning, response, and recovery. It also references disasters outside of the United States.

3. ***Behavioral Health Response to Disasters*** by Julie Framingham, M.S.W. and Martell Teasley, Ph.D.

This textbook has a strong emphasis on disaster behavioral health in the United States, and specifically the public health-related disaster behavioral health system. It focuses on cultural competency and

addressing vulnerability in preparedness and response work. It also has a strong incorporation of the Crisis Counseling Assistance and Training Program.

SAMHSA DTAC ultimately recommended two of the three books textbooks that would work well in a college course. *Disaster Mental Health Interventions* was recommended to be used for a course in which additional supplemental materials will be used because it provides an overview of the field rather than a deep dive in the subject matter. *Mental Health and Disasters* was recommended to be used for a course where the text will serve as the structure of the course because of its robust and technical chapters. The third book, *Behavioral Health Response to Disasters*, may be more appropriate for current professional staff, rather than students without professional experience.

Request: SAMHSA DTAC received a request in the dtac@samhsa.hhs.gov email box from a police lieutenant who had recently participated in SAMHSA's Shield of Resilience online training course for law enforcement officers. The individual was very impressed with the course and thought the content was so valuable that he wanted to upload it into his own agency's training catalogue so that he would be able to track who completed the course.

Response: SAMHSA DTAC thanked the individual for his interest in the online course and provided him with several options to provide him with a compatible format that can be uploaded to his agency's portal.

To access the course and for more information, go to <https://www.samhsa.gov/dtac/shield-of-resilience-training-course>. ■

Social Media Before, During, and After Disasters

By Eric Frank

These days, many Americans have a smartphone with us at all times that we use as a minicomputer, camera, music player, day planner, dictionary, calculator, and yes, a mobile phone. Our mobile devices have become our lifelines in more ways than one. One important way we use our smartphones is to access social media, which lets us choose the information we want to see and learn about.

As the Public Information, Education, and Outreach Coordinator for the agency I represent, social media allows me to have a two-way conversation with the community I serve. It has become one of the leading tools for me to share information about

preparing for disasters, highlight our planning process, and advertise where and when we might be in person out in the community. It has allowed me to amplify our messages by using humor, video, and pictures, bringing to life information I believe everyone should receive.

Building a Relationship With the Community

When emergencies happen, public safety agencies need to connect with the communities they are sworn to protect. There are many ways to do so. Some jurisdictions have notification systems for major, large-scale disasters or events where the message needs to hit everyone. These systems can text, call, or email residents and businesses throughout an affected area. Other systems are designed to serve

individuals in a smaller area, such as a specific neighborhood.

Social media can be one more part of your agency's alert system, allowing you to connect with the community not only during the emergency, but before and after as well. It allows messages to be shared and amplified quickly.

It is crucial to start building a relationship before an emergency with the community. People today have a lot of information options. We no longer have to wait for network news, or the next print version of a newspaper. Breaking news happens every second, and with more and more digital platforms, it can be overwhelming. The information intake can be like drinking from a fire hose, and now we also have to try to figure out if



7 million+ users

near Nepal checked in using Facebook's Safety Check after the April 2015 earthquake.

Google People Finder was developed in 2010 in response to the Haiti earthquake. The application allows users to post and search for the status of people affected by a disaster. During the 2015 Nepal earthquake, well over **7,500 records** on the People Finder were searched.

Source: Eastern Kentucky University. (n.d.). [When disaster strikes: Technology's role in disaster aid relief] [Infographic]. Retrieved from <https://safetymanagement.eku.edu/resources/infographics/when-disaster-strikes-technologys-role-in-disaster-aid-relief>

the information popping up in front of us is even factual. The better your conversation is with your community when things are good, the better chance you will have at ensuring the proper information is being shared during an incident.

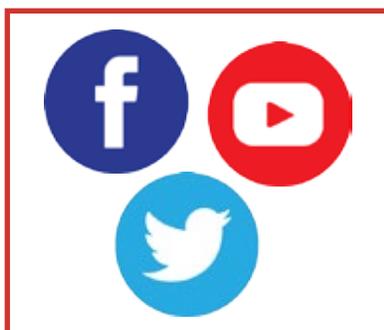
Integrated Communications: Social Media and Beyond

Building a battle rhythm is important to ensure your information is seen when it needs to be. Disasters and emergencies can be stressful. Your community does not need the added stress of trying to find information.

It is important to do a little research and figure out what, if any, platforms your community uses the most. I have found more rural communities rely much more on Facebook, and Facebook Groups, while more urban settings rely on Twitter. In my experience, the mainstream media also prefers Twitter, instead

A study by the American Red Cross shows more people are turning to sites such as Facebook and Twitter to learn about emergencies, get information, and check on friends and family.

Source: Velev, D., & Zlateva, P. V. (2012). *Use of social media in natural disaster management*. Paper presented at the 2012 International Conference on Innovation, Trade and Economics 2012, Hong Kong, China. Retrieved from https://www.researchgate.net/publication/271585520_Use_of_Social_Media_in_Natural_Disaster_Management



Facebook, YouTube, and Twitter are some of the most popular social networking sites when natural disasters strike.

Source: Velev, D., & Zlateva, P. V. (2012). *Use of social media in natural disaster management*. Paper presented at the 2012 International Conference on Innovation, Trade and Economics 2012, Hong Kong, China. Retrieved from https://www.researchgate.net/publication/271585520_Use_of_Social_Media_in_Natural_Disaster_Management

of waiting for a press release. Whatever the platforms used in your communities, learn how you can use them. These days, I see four main platforms: Facebook, Twitter, Instagram, and Snapchat. Your agency or organization may also share information via their website, a blog, or on a popular neighborhood platform called Nextdoor. If you are not on Nextdoor, see if it's being used in your community, and reach out to see if you can have an agency platform created.

It is important to note that social media platforms do not replace other methods of sharing information. They should complement other ways of communicating with the community, such as using emergency alert systems, holding meetings and events, working with the media, and providing updates through your agency's website.

Best Practices in Social Media

Be sure to recognize that you do not own any of the content you post on social media. The platform does, and if by some chance that platform is

gone tomorrow, your content is gone as well. Archiving and backing up information is important, along with providing links in social media to your website.

It's important to engage with your community at least three to four times a week. Keep content fresh and new. It's important you interact because of the data-driven algorithms that run behind the scenes on social networking sites. If you are not posting regularly, your audience will not see the information you share unless you stay active with them. *Bonus Tip:* Including videos in posts, especially on Facebook, makes people more likely to see them due to current algorithms.

Let me illustrate this point a little more. According to the data, if you have a personal (non-work) account on Facebook, most likely you have between 200 and 300 "Facebook friends." Yet in your news feed, how many of those 200 friends do you see posts from? It's usually far fewer than your total group of

friends. Instead you see just those post from friends you interact with. I challenge each of you to pick a couple random friends that you haven't seen something from in a while. Visit their page. Chances are, they have posts you haven't seen because of the algorithms running in the background. The same happens with organizations and causes that you follow. If you do not interact regularly, their posts drop off.

On other platforms like Instagram and Twitter, posts happen in a split second. If those posts do not have hashtags you are following, nine times out of ten you will miss them.

I encourage you to use a tool like TweetDeck or Hootsuite to follow specific hashtags. In my area, I follow hashtags including #Vanwa (used to identify posts related to Vancouver, Washington); #Clarkwa (related to Clark County in Washington); and #Clark911 (related to emergencies in Clark County).

When I post to social media on Instagram, or Twitter for the agency, these hashtags are added so folks, including my local media, have a way of sifting through the haystack for that needle.

I am not a fan of tools that allow you to schedule posts to multiple

platforms all at once from one source. Each platform has a different audience, and each audience uses the platform differently. They can tell when you are not sharing content that is organic to that platform. It is the easiest way to lose followers.

Conclusion

Social media doesn't replace traditional methods of communicating with your community. It is a tool to be used in combination with others. It can help amplify your message, and if used effectively, it provides for a conversation with the community you serve. ■



Following Hurricane Sandy in 2012, “hurricane” was mentioned on Twitter **1.1 million times** within a 21-hour time period.

Source: Fraustino, J. D., Liu, B., & Jin, Y. (2012). *Social media use during disasters: A review of the knowledge base and gaps*. Final report to U.S. Department of Homeland Security, Science and Technology Directorate, Human Factors/Behavioral Sciences Division. College Park, MD: National Consortium for the Study of Terrorism and Responses to Terrorism. Retrieved from https://www.start.umd.edu/sites/default/files/files/publications/START_SocialMediaUseduringDisasters_LitReview.pdf

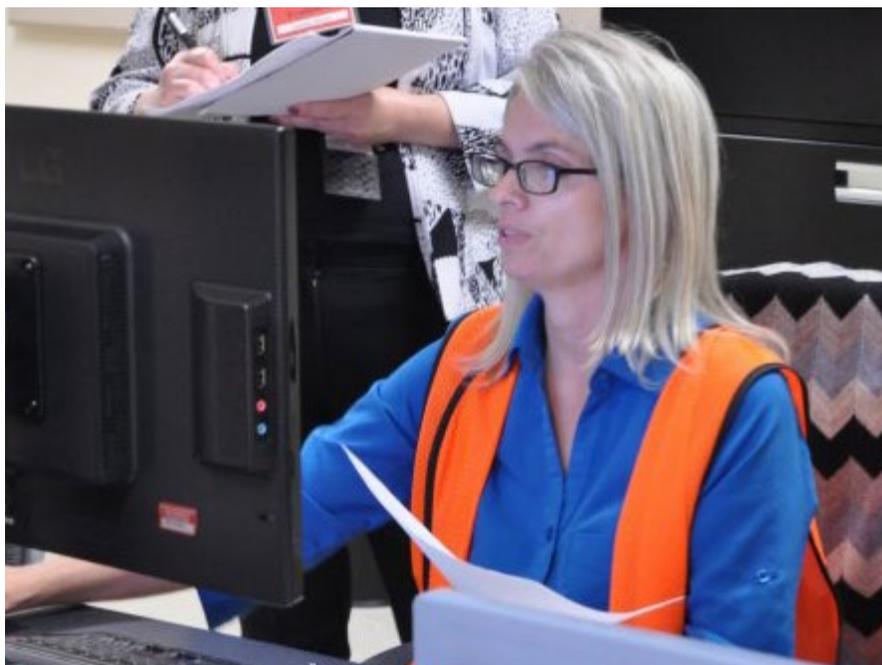
SAMHSA'S Disaster App Helps Responders Access Critical Resources

By SAMHSA DTAC Staff

These days, emergency preparedness almost always requires us to consider our mobile devices. How can survivors reach friends, family, or first responders in case of a disaster? How can responders access critical resources to provide support to survivors if there is no electricity or Wi-Fi?

Many federal agencies and humanitarian organizations have developed apps to help individuals facing disasters communicate with loved ones, store medical information, receive and share weather alerts, and even locate pet hospitals. In the midst of the disaster or just after, though, an app won't help mitigate the immediate or lasting effects of what just took place—unless it can help responders help survivors in real time.

Designed specifically for disaster behavioral health responders, the Substance Abuse and Mental Health Services Administration (SAMHSA) Disaster App lightens the load for responders by providing access to trauma- and disaster-related resources—right on a smartphone, in real time, at the touch of a button. It provides resources for any type of traumatic event at every phase of response: from pre-deployment readiness, to on-the-ground assistance, and post-deployment support.



“When the president declares a major disaster, FEMA’s deployed personnel include digital communications specialists who monitor social media on a daily basis, picking up relevant references to FEMA and the current disaster. The digital team shares posts from survivors with experts who can help answer questions and clarify concerns.”

Source: Federal Emergency Management Agency (FEMA). (2018, April 16). *Social media and emergency preparedness* [Press release]. Retrieved from <https://www.fema.gov/news-release/2018/04/16/social-media-and-emergency-preparedness>

For responders heading into disaster zones to help people in need, access to resources is critical to their ability to provide quality support to survivors. The SAMHSA Disaster App features resources from the original SAMHSA Disaster Kit at <https://store.samhsa.gov/product/SAMHSA-s-Disaster-Kit/SMA11-DISASTER>, a go-to resource for disaster response, in addition to added features:

- Search for and map the locations of nearby treatment facilities using SAMHSA's Behavioral Health Treatment Services Locator. Responders can save treatment locations to their device ahead of time in case there is no Internet connectivity.
- Boost confidence by completing disaster readiness checklists.
- Review training materials on a variety of topics from disaster counseling basics to information-specific terrorism response, as well as stress prevention and management tips.
- Filter content by topic, audience, and language.
- Share treatment facilities and content with colleagues and survivors via text message, email, or transfer the information to a computer for printing.
- Retrieve publications and pre-downloaded treatment locations at any time, with or without an Internet connection.

“ [T]he Substance Abuse and Mental Health Services Administration (SAMHSA) Disaster App **lightens the load for responders** by providing access to trauma- and disaster-related resources—right on a smartphone, in real time, at the touch of a button.”

- Access resources for self-care, stress prevention, and guidance for returning home from deployment to everyday life.

All content can be pre-downloaded in case of limited Internet connectivity at the disaster site.

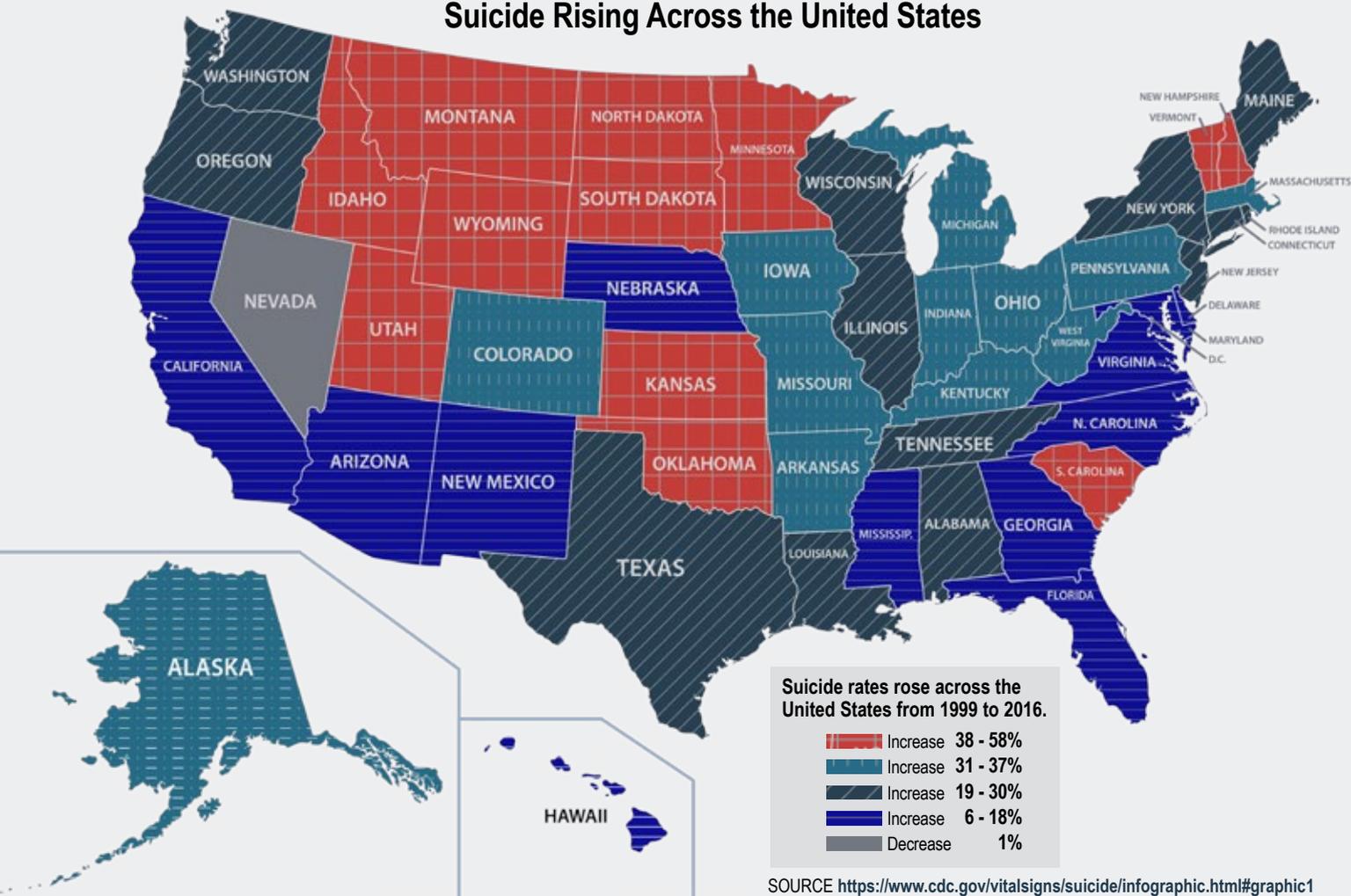
Formative research and interviews with subject matter experts and end-users from across the U.S. Department of Health and Human Services, the Federal Emergency Management Agency, the American Red Cross, universities, and state health departments revealed that responders prefer digital tools that can easily access local resources

and maintain individual privacy. The SAMHSA Disaster App addresses the needs of survivors AND responders by also including self-care supports that can help mitigate compassion fatigue—an issue caused by a combination of burnout and secondary traumatic stress. Learn more about compassion fatigue at <https://store.samhsa.gov/system/files/sma14-4869.pdf>.

The SAMHSA Disaster App is available for free on iPhone®, Android™, and BlackBerry® devices. Learn more and download the App at <https://www.store.samhsa.gov/apps/disaster/>. ■



Suicide Rising Across the United States



SAMHSA Mobile App Helps Health Care Professionals Address Suicide

By SAMHSA DTAC Staff

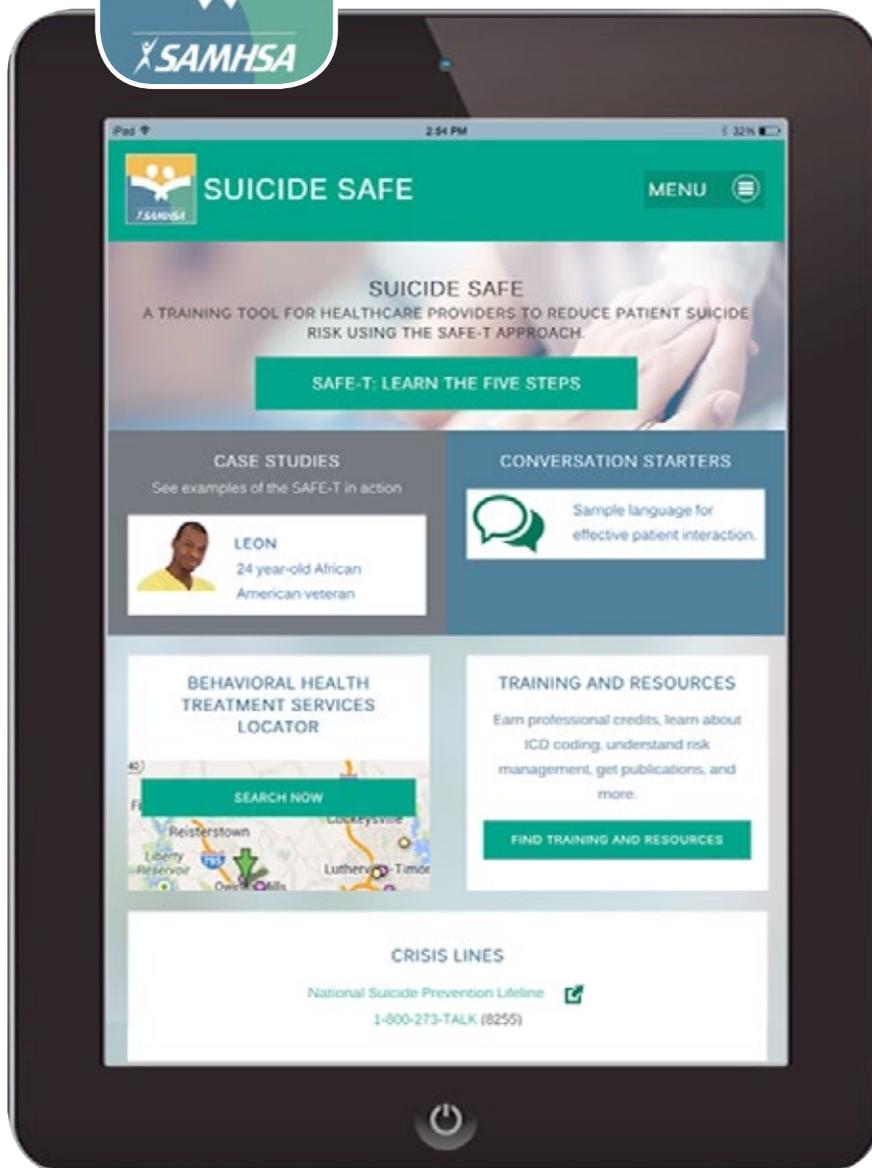
Suicide is a leading cause of death in the United States. A recent study from the Centers for Disease Control and Prevention shows that suicide rates increased in nearly every state from 1999 through 2016 (see the CDC map above).

While mental health and primary care settings provide unique

opportunities for individuals at risk of suicide to access effective treatment, many professionals receive limited or no training on suicide risk assessment and intervention. Increasing demands on professional time create a barrier to having meaningful one-on-one consultations with patients.

Recognizing the need for professionals to have access to quick-reference, life-saving resources and training, the Substance Abuse and Mental Health Services Administration (SAMHSA) developed **Suicide Safe**, a mobile app that helps professionals integrate suicide prevention strategies into their practice and address

suicide risk among their patients. Suicide Safe is a free app based on SAMHSA's Suicide Assessment Five-Step Evaluation and Triage (SAFE-T) card, available at <https://store.samhsa.gov/product/SAFE-T-Pocket-Card-Suicide-Assessment-Five-Step-Evaluation-and-Triage-for-Clinicians/sma09-4432>.



It is a familiar resource for disaster responders because the SAMHSA Disaster Kit, which is accessible at <https://store.samhsa.gov/product/SAMHSA-s-Disaster-Kit/SMA11-DISASTER>, includes SAFE-T practice guidelines and wallet cards.

Why Is Suicide Prevention Important in Disaster Response?

Several studies suggest an association of current major

depression, posttraumatic stress disorder, and previous mental health problems with increases in suicidal behaviors following natural disasters. Those studies also identify some experiential factors that may be associated with suicidal behaviors, including severe destruction of property, injuries sustained by relatives, and danger to one's own life, as well as adverse economic conditions, including high rates of unemployment.

More information is available in a SAMHSA Disaster Technical Assistance Center *Supplemental Research Bulletin* that examines the intersection of disasters and suicide. Issue five of the *Supplemental Research Bulletin* can be found at https://www.samhsa.gov/sites/default/files/dtac/srb_sept2015.pdf.

While preventing human-caused disasters is not always possible and natural disasters are out of our hands, there is research on when mental health and substance use issues and/or suicidal ideation tends to occur in relation to a disaster. According to research contained within the *Supplemental Research Bulletin*, some studies found that suicidal ideation, plans, and attempts are more likely to start to occur several months after a disaster, rather than immediately after it.

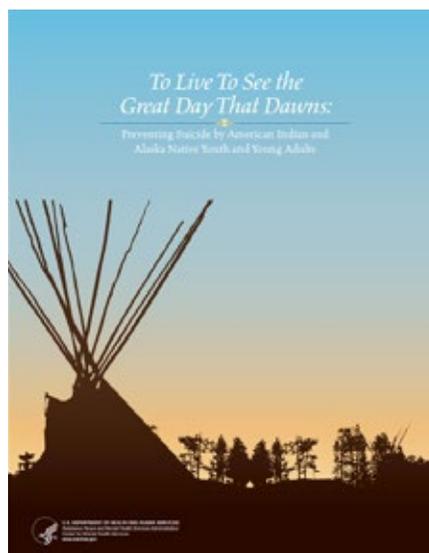
By using suicide prevention strategies and tools such as Suicide Safe in communities affected by disasters early on, the hope is that more suicides can be prevented.

What Is Included in the Suicide Safe Mobile App?

Suicide Safe helps professionals integrate suicide prevention strategies into their practice. The app enables professionals to confidently assist patients who present with suicidal ideation, communicate effectively with patients and their families, determine appropriate next steps, and make referrals to treatment and community resources, which are critical components of saving lives.

Informed by formative research and interviews with subject matter experts and end users—including primary care and mental health practitioners, suicide survivors, and suicide prevention experts from federal, national, and academic institutions—SAMHSA identified the specific educational needs, content, and features for Suicide Safe.

The tools include patient and professional education materials,



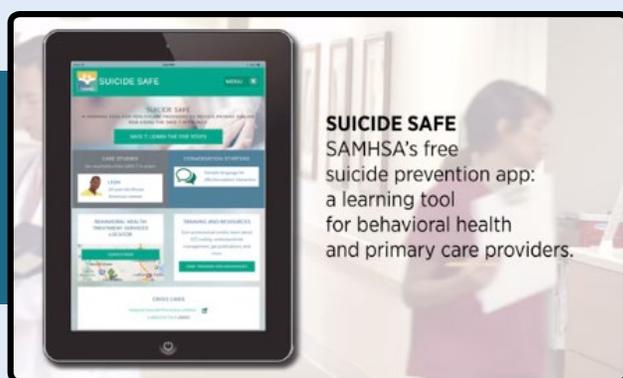
access to SAMHSA's Behavioral Health Treatment Services Locator, interactive sample cases, and conversation starters that can help foster trust and guide meaningful discussions.

While the app can be useful for nearly any individual, SAMHSA considered culturally appropriate resources in designing the app that resonate with at-risk populations, such as tribal communities. One of the downloadable tribal publications

accessible from the app is *To Live To See the Great Day That Dawns: Preventing Suicide by American Indian and Alaska Native Youth and Young Adults*. This guide lays the groundwork for comprehensive prevention planning, with prevention broadly defined to include programs that a community can use to promote the mental health of its youth. The guide also covers actions communities can take in response to a suicide to help heal and thereby prevent related suicidal behaviors.

The causes of suicide are complex and determined by multiple combinations of factors, such as serious mental illness, substance misuse, painful loss, exposure to violence or trauma, and social isolation. As the federal leader in mental health and substance use disorders, SAMHSA is committed to continuing to work with its partners to provide states, territories, tribal entities, communities, and the public with the assistance and prevention resources they need.

Visit the SAMHSA website and watch the Suicide Safe App overview video to learn about the App's key features and tools at <https://store.samhsa.gov/apps/suicide-safe>.



Suicide Safe is one resource that can help. Visit the SAMHSA Store at https://store.samhsa.gov/apps/suicidesafe/?WT.ac=IQS_20150501_SuicideSafeCaseStudy to learn more and to access links to download Suicide Safe. ■

The following page is an informational pullout poster that you can print and post. It provides adult disaster survivors with information on common disaster reactions and how to get help.

Have you experienced a disaster?

Disasters, both human-caused and natural, may cause behavioral, emotional, and physical reactions in the people who are affected. Most people who experience a disaster, whether it's through direct or indirect exposure, are affected in some way.

Here are some common reactions to disasters:

- Having trouble falling asleep, staying asleep, sleeping too much, or trouble relaxing
- Noticing an increase or decrease in your energy and activity levels
- Having difficulty talking about what happened or listening to others
- Feeling anxious or fearful
- Being overwhelmed by sadness
- Feeling angry, especially if the event involved violence
- Having headaches or other physical pains for no clear reason
- Being jumpy or easily startled
- Having trouble thinking clearly and concentrating
- Having difficulty making decisions

Are you or a loved one experiencing any of these or other reactions to a recent disaster?



FOR MORE INFORMATION on common disaster reactions as well as ways to cope with stress, check out the Tips for Survivors of a Disaster or Other Traumatic Event: Managing Stress at <https://store.samhsa.gov/product/Tips-for-Survivors-of-a-Disaster-or-Other-Traumatic-Event-Managing-Stress/SMA13-4776>. Other disaster behavioral health resources are also available on the Substance Abuse and Mental Health Services Disaster Technical Assistance Center website at <https://www.samhsa.gov/dtac> or call us at **1-800-308-3515**.

SAMHSA

Substance Abuse and Mental Health
Services Administration

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THERE ARE PLACES TO GO FOR HELP.

Disaster Distress Helpline

TOLL-FREE: **1-800-985-5990** (English and español)

TTY: **1-800-846-8517**

TEXT: "TalkWithUs" (or "Hablanos" for español) to **66746**

Mental Health Treatment Facility Locator

TOLL-FREE: **1-800-789-2647** (English and español)

TDD: **1-866-889-2647**

National Suicide Prevention Lifeline

TOLL-FREE: **1-800-273-TALK (1-800-273-8255)**

TTY: **1-800-799-4TTY (1-800-799-4889)**

Substance Abuse Treatment Facility Locator

TOLL-FREE: **1-800-662-HELP (1-800-662-4357)**

(24/7 English and español)

TDD: **1-800-487-4889**

Are Your Families Prepared for a Disaster?

By **Melissa Brymer and Kristine Louie**

Natural disasters can be a stressful experience for families. Whether it's engaging children in activities to prepare, talking to them about what's happening, or coping with the aftermath of a natural disaster, preparedness is critical. Help Kids Cope is a free, parent/caregiver-friendly app that highlights how families can prepare, respond, and recover from 10 different natural disasters or extreme weather emergencies (earthquakes, extreme heat, floods, hurricanes, landslides, tornadoes, tsunamis, wildfires, windstorms, and winter storms). This app is for Apple and Android mobile devices.

Help Kids Cope was created by the National Child Traumatic Stress Network and Ozark Center, Inc. in response to insights shared by parents from the May 22, 2011, deadly tornadoes that devastated Joplin, Missouri. Parents reported that while many great resources were given to them, having to move to different locations made it easy to misplace them. They also mentioned that some resources were difficult to access due to poor Internet connectivity or a lack of power for an extended period of time. Parents asked that we create an app so that the resources were readily available on their phone. Based on these insights, we created Help Kids Cope with funding from the Missouri Foundation for Health



Have Them Act Now. Download Help Kids Cope.

Parents may wonder:

“How do I talk to my kids before, during, and after disasters?”

“How can I help my child stay calm when we evacuate in a wildfire?”

“What reactions from my child are common and when should I seek help?”

Help Kids Cope helps parents talk to their kids about the disaster they may face and how to best support them throughout.



and the Substance Abuse and Mental Health Services Administration (SAMHSA).

The app includes a variety of features:

- Provides parents with guidance on how to explain various disasters for children of different developmental ages. For example, parents may want to draw a tornado for younger children while describing that a tornado is “a big, swirling windstorm that comes out of a cloud during a thunderstorm. The twisting funnel cloud can touch down to the ground and is moving fast.” For an adolescent, a parent may want to start by

asking what they had learned at school and may want to expand the discussion on what to do while driving. There are also audio clips of parents sharing additional suggestions.

- Specifies how to adapt preparedness efforts for different types of disasters. For example, if living or traveling near a coast that is vulnerable to a tsunami, families can learn about the natural warning signs that signal immediate evacuation is needed. They can also learn how to reduce smoke intake during a wildfire while traveling in a car. The app reminds families to make sure babysitters

are oriented to evacuation paths and how to keep pets and livestock safe. It has checklists to help with preparedness planning.

- Assists with different action steps families should take before, during, and after a disaster. This includes preparing the home for events where there is a pre-warning, managing the family anxiety while sheltering in place or evacuating, and addressing safety issues immediately after the disaster. The app includes information on how to find the nearest public shelter open in your area, how to register missing family members, or whom to

contact if a child is missing. The app provides guidance on how to support children during the event as well as steps parents can take to care for themselves. For example, it includes strategies parents can use to cope if separated from their children and communication services are out during a disaster with no warning, such as an earthquake. It also includes recommendations for addressing children's difficult questions such as whether a family member is alive when it isn't known yet, what the family will do next if they have to leave the home, or why the adults are looking so distressed.

- Highlights different reactions children can experience during the recovery phase and strategies to support them. The app provides contact information to the SAMHSA Disaster Distress Helpline as well as guidelines for when to seek help from a mental health professional.
- The app links to additional resources including children's activity books, tip sheets, children's books, and checklists.

Support the dissemination of the app in your communities by:

- Encouraging school districts or Parent-Teacher Associations to include a description of the app in a newsletter or during September, which is National Preparedness Month
- Encouraging local utility companies, weather stations, and governmental emergency management websites to link the app
- Disseminating a flyer about the app during community fairs or preparedness workshops and demonstrate how to use the app
- Encouraging realtors or homeowners' associations to include a flyer at closing for families new to the area so they can learn how to prepare for new threats

Take the time now and download Help Kids Cope at <https://www.nctsn.org/resources/help-kids-cope>.

A Look Inside the Disaster Distress Helpline

By Christian Burgess

Disaster Distress Helpline: Background

Vibrant Emotional Health (formerly the Mental Health Association of New York City) has been partners with the Substance Abuse and Mental Health Services Administration (SAMHSA) since launching the National Suicide Prevention Lifeline in 2005. That year, the first significant increase in call volume to the Lifeline was in August—right after Hurricane Katrina. During the weeks and months of recovery following Katrina, the Lifeline also provided support and backup to crisis centers located in and serving communities devastated by the disaster. It was that experience, in addition to the September 11 terrorist attacks that had occurred just 4 years prior, which demonstrated the need for a 24/7, national crisis service dedicated to ensuring that everyone in the United States and territories would have access to immediate crisis counseling and support as soon as a major disaster occurred.

In 2010, following the Deepwater Horizon oil spill in the Gulf of Mexico, SAMHSA once again partnered with Vibrant for the Oil Spill Distress Helpline (OSDH) project, a temporary service that created a sub-network from Lifeline centers located in and serving the Gulf region. It was from this project

that the Disaster Distress Helpline (DDH) sprung in February 2012, as SAMHSA used the infrastructure created for the OSDH (which was phased down in December 2011) to create the country's first crisis hotline dedicated year-round to supporting survivors and responders experiencing distress or other mental health concerns related to any natural or human-caused disaster.

How the DDH Operates and What Services Are Provided

The DDH is a sub-network of the National Suicide Prevention Lifeline, meaning that in order to answer calls or texts for the DDH, a crisis center must first be a part of the larger Lifeline network. This requirement is in place to ensure that DDH-networked call and text centers are accredited and adhere to accepted standards and required trainings in crisis assessment, intervention, and referral whereby callers and texters can receive support based on these and other best practices. In addition, crisis centers in the DDH sub-network also train staff and volunteers in the National Child Traumatic Stress Network's Psychological First Aid (PFA) and receive further "Just In Time" training from Vibrant both year-round and in the aftermath of disasters that applies the principles of PFA to a disaster crisis call and text setting.

In general, crisis counselors with the DDH work to explore healthy coping with callers and texters; help to identify social supports; and connect with community-based resources for follow-up care and support. The goal of DDH call and text interventions is to support survivors, responders, and others who may be struggling with distress or other mental health concerns after a disaster to move forward on the path of recovery.

The core services of the DDH consist of a 24/7 hotline (1-800-985-5990; press "2" for Spanish), which is also available toll-free to the U.S. territories, and a texting option (text TalkWithUs to 66746; text "Hablanos" for Spanish). Support is provided in over 100 languages through third party interpretation services accessed via the hotline. Deaf and hard of hearing individuals can utilize the text option, connect with the hotline via their preferred relay provider, or connect with the DDH via TTY at 1-800-846-8517. Because the DDH is a national service, calls and texts are routed to the next available crisis center and answered in the order they are received.

Recent Disasters and Common Presenting Concerns

In 2017, the DDH experienced record utilization following

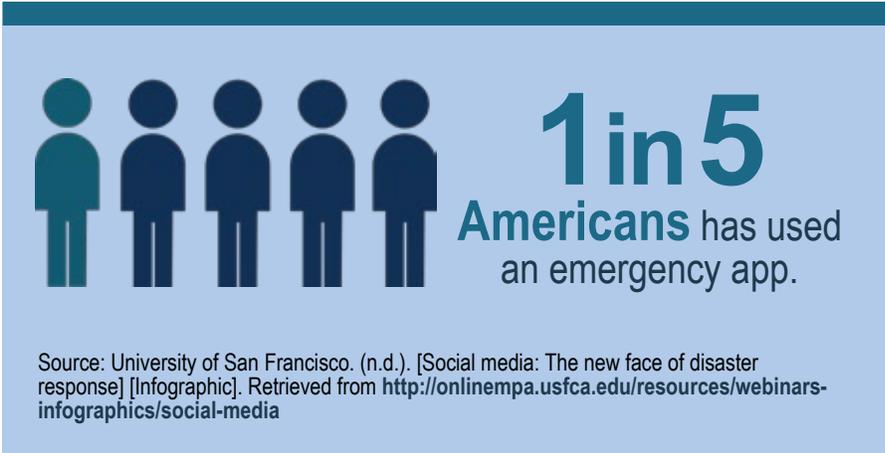
Hurricanes Harvey, Irma, and Maria; the Las Vegas shootings; and the wildfires in northern California. Call volume from August through October increased over 1,100 percent compared to the same time period 3 months prior. Call volume following Hurricanes Florence and Michael in September and October of this year has thus far increased over 200 percent compared to the prior time period in July and August.

Some concerns of DDH callers and texters before, during, or in the hours or days immediately after these and other disasters—from incidents of community unrest to public health emergencies, transportation accidents, and major floods—include the following:

- Individuals and families (including caregivers of children, the frail elderly, or adults with special needs) feeling overwhelmed or anxious over evacuation or shelter-in-place orders and other constant streams of information.
- Fear and uncertainty from those who can't get in touch with loved ones in the affected areas due to power outages or tied-up communications.
- Immediate grief and other distress reactions related to any losses incurred during the disaster. For example, bereavement from the loss of a loved one or pet, or damage or destruction to a home or business.

Calls and texts in these early stages of the disaster cycle tend to be shorter and more focused on counselors disseminating accurate information and referrals from trusted sources to try and help the person feel calmer and more in control of a still-developing, unpredictable situation.

During the long-term recovery of a disaster, calls and text exchanges tend to be longer in duration, and it becomes more common for the presenting concerns to be related to deeper mental health concerns triggered or exacerbated by experiences from the event (for example, loss, economic strain, displacement, painful memories related to exposure to devastation or threats to one's or a loved one's safety and security) such as persistent anxiety, substance misuse, or thoughts and feelings consistent with symptoms of depression. Crisis intervention happens more frequently for callers and texters in this phase and referrals are more focused on connecting individuals



1 in 5
Americans has used
an emergency app.

The infographic features five stylized human figures in shades of blue. The first figure on the left is a darker shade, representing 1 out of 5. To the right of the figures, the text '1 in 5 Americans has used an emergency app.' is displayed in a large, bold, blue font.

Source: University of San Francisco. (n.d.). [Social media: The new face of disaster response] [Infographic]. Retrieved from <http://onlinempa.usfca.edu/resources/webinars-infographics/social-media>

and families with longer-term mental health resources in their community, such as to their nearest Lifeline-networked crisis center, Federal Emergency Management Agency-funded Crisis Counseling Assistance and Training Program grants that may have been operationalized, or to other providers located via the SAMHSA Treatment Referral Locator.

Whether in the preparedness, response, or recovery phase, the one consistent, ubiquitous need callers and texters are seeking from the Disaster Distress Helpline is to be listened to and heard. As one caller after Hurricane Sandy expressed, “Thank you for listening, because no one else has wanted to.”

For More Information

Email ddh@vibrant.org for more information about the DDH or to receive free copies of DDH wallet cards and brochures in English or Spanish for distribution in provider offices and field-based operations such as Disaster Recovery Centers. ■

RECOMMENDED RESOURCES

Accessible Communication Technology for Disaster Survivors

This tip sheet from the Federal Emergency Management Agency (FEMA) shares a handful of different devices that individuals with disabilities and other access and functional needs can use after a disaster to communicate and gather information. Each of the devices listed is provided by FEMA Disaster Recovery Centers.

Find the tip sheet at <https://bit.ly/2MyLThk>.

American Red Cross Mobile Apps

The American Red Cross has a collection of mobile apps designed to share information and help with disaster preparedness. These disaster apps distribute tornado and hurricane warnings and flooding, notify you when an earthquake occurs, and help monitor other weather and emergency alerts. Additionally, there are applications for first aid care for yourself and your pets. All apps are available for both Android and Apple products.

Find all of the apps at <https://rdcrss.org/2BIFVdw>.

Pacific Disaster Center: Disaster Alert App

This app from the Pacific Disaster Center provides warnings before many kinds of natural and human-caused disasters. Users can customize the alerts they receive for storms, tornadoes, high winds, earthquakes, wildfires, and more. Disaster Alert can be downloaded on Android and Apple devices or used online.

Learn more and download the app at <https://bit.ly/2N4XPaR>.

National Center for PTSD: PTSD Coach Online

Posttraumatic Stress Disorder (PTSD) Coach Online is a tool developed by the National Center for PTSD to help anyone struggling with anxiety, anger, sadness, or other emotions after a disaster or trauma. Individuals are able to select a symptom they would like to work on, and PTSD Coach Online provides a variety of tools and resources to help cope.

Find the tool at <https://bit.ly/2vbAcaN>.

Mobile App: PFA Mobile

In collaboration with the National Center for PTSD, the National Child Traumatic Stress Network provides the Psychological First Aid (PFA) Mobile app, a tool for first responders who provide PFA to individuals before, during, or after a disaster. This tool can be used by first responders who already know PFA to review guidelines and gather tips on how to best use PFA when responding to a disaster.

Learn more and access the app at <https://bit.ly/2pT3rvP>. ■



Prepare • Respond • Recover Inform • Assist

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SHARE INFORMATION

Readers are invited to contribute to *The Dialogue*. To author an article for an upcoming issue, please contact SAMHSA DTAC at dtac@samhsa.hhs.gov.

ACCESS ADDITIONAL SAMHSA DTAC RESOURCES

The *SAMHSA DTAC Bulletin* is a monthly e-communication used to share updates in the field, post upcoming activities, and highlight new resources. To subscribe, please enter your email address in the "SAMHSA DTAC Bulletin" section of the home page of our website at <https://www.samhsa.gov/dtac>.

The SAMHSA Disaster Behavioral Health Information Series contains resource collections and toolkits pertinent to disaster behavioral health. Installments focus on specific populations, specific types of disasters, and other topics related to all-hazards disaster behavioral health preparedness and response. Visit the SAMHSA DTAC website at <https://www.samhsa.gov/dtac/dbhis-collections> to access these materials.

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