
STATE OF IOWA DEPARTMENT OF

Health AND **Human**

SERVICES

Iowa Disaster Behavioral Health

May 2023

Disaster Behavioral Health

Disaster behavioral health is the provision of mental health, substance use, and stress management services to disaster survivors and responders.

The State Mental Health Authority Administrator designates a person to serve in the role of the Disaster Behavioral Health Coordinator in every state and US territory.

The Need for Disaster Behavioral Health

Natural disasters, terrorist attacks, and other emergencies of the last several years, as well as the growing research on the impacts of these events, have highlighted the need for behavioral health capabilities.



Research shows a link between exposure to trauma and the onset of other health care needs immediately following an emergency event, and often for many years later.



Costs associated with the treatment of behavioral or mental health also increase.



Studies correlate trauma with later cardiovascular, musculoskeletal and neurological illness, as well as psychiatric diagnoses such as Post-Traumatic Stress Disorder (PTSD), anxiety, depression and substance use disorders.



Iowa Disaster Behavioral Health Response Team (DBHRT)

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A trained team of volunteers who mobilize resources to provide post-disaster mental health services statewide.

Provide an organized response to individuals, family members, volunteers, responders, and the community affected by critical incidents or disasters.

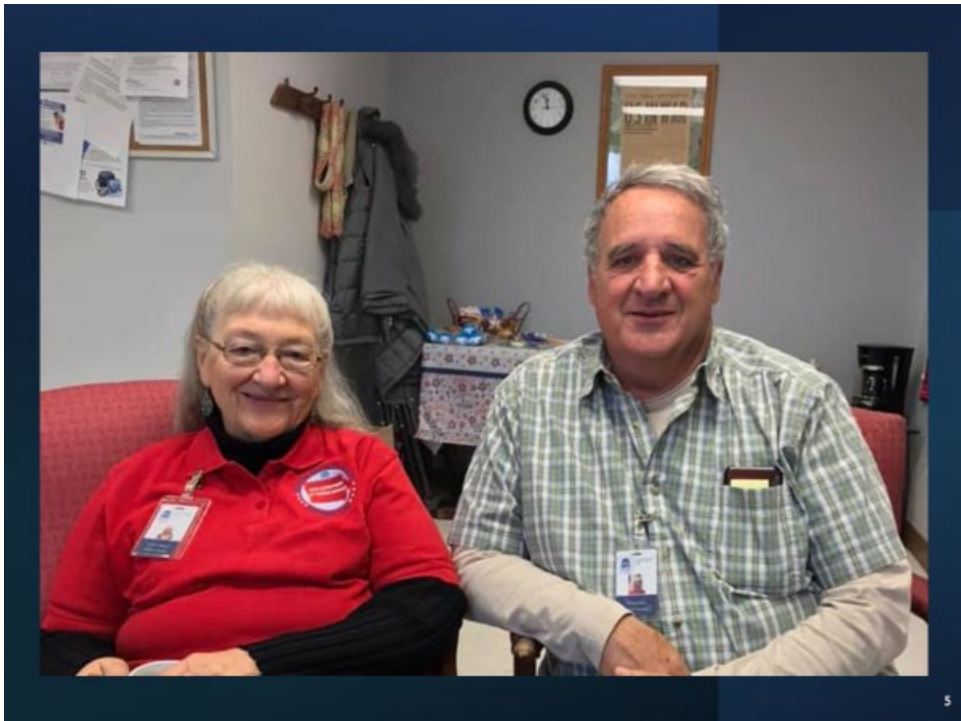
Who can become a member of an Iowa Disaster Behavioral Response Team?

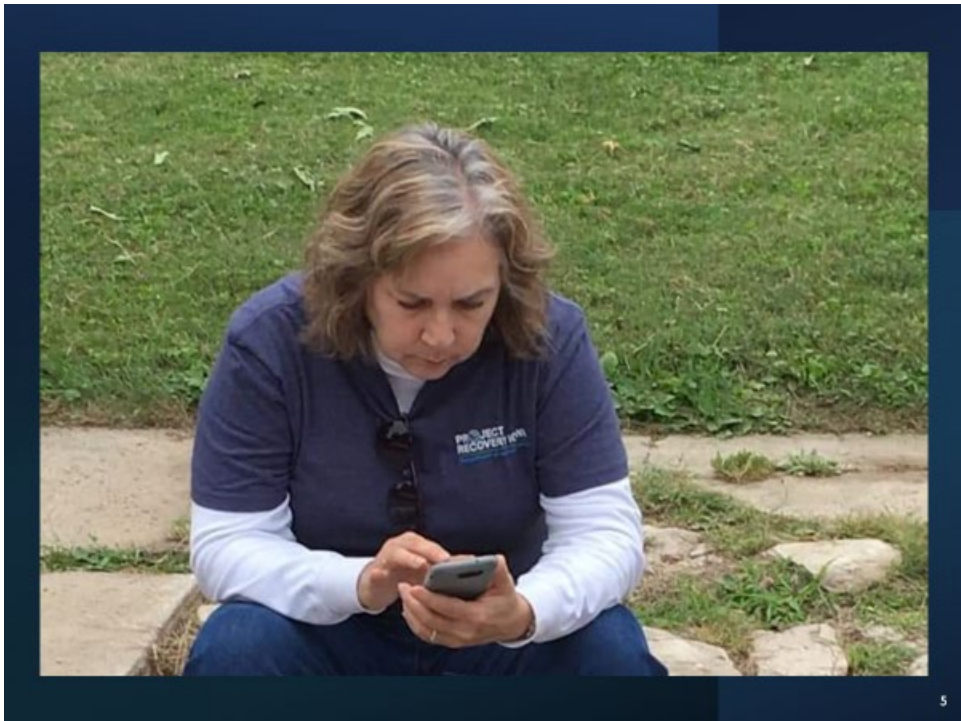
Iowa DBHRT members include volunteers from a wide range of backgrounds with experience in:

- First response
- Human services
- Psychology, mental health, social work
- Substance use
- Education
- Faith based or spirituality
- People reflecting the communities across the state

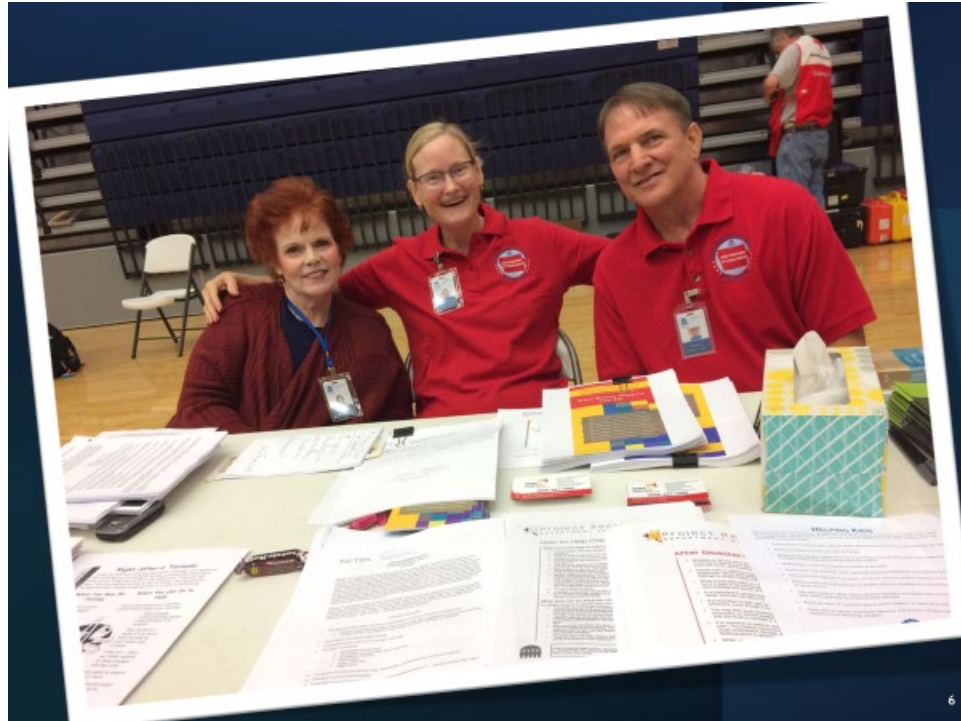
Volunteers are required to have Disaster Behavioral Health training to serve on the Disaster Behavioral Health Response Team.

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**Pet
Therapy
Dog**



Disaster Behavioral Health Response:

Disaster Behavioral Health Response Team members are trained to engage in outreach and educational activities in communities to facilitate the resiliency and recovery of survivors and responders by:

Providing

Providing psycho-education and information on physical and environmental hazards.

Engaging

Engaging in supportive listening.

Screening

Screening individuals who are at greater risk for longer-term adverse reactions.

Ensuring

Ensuring referral to appropriate medical, psychological, or tangible services.



Examples of DBHRT Response

- Assistance by request of County Emergency Management, Iowa National Guard, Homeland Security and Emergency Management, Community Mental Health Center, MHDS Region
- Death by accident such as car, tractor, hunting
- Natural weather elements such as major hailstorm, flooding, tornado, derecho, fire
- School violence, suicide

Crisis Counseling Assistance and Training Program (CCP)

- The CCP is a short-term disaster relief grant for states, U.S. territories, and federally recognized tribes. CCP grants are awarded after a presidential disaster declaration. The funding supports community-based outreach, counseling, and other mental health services to survivors of natural and human-caused disasters.
- The [Federal Emergency Management Agency \(FEMA\)](#) funds and implements the CCP as a supplemental assistance program to support mental health assistance and training activities in presidentially declared major disaster areas.



Contracted Providers

Abbe Health Services

Heartland Family Service

Iowa State University and Extension

Pathways Behavioral Services

University of Iowa, Center for Development and Disabilities

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December 2022 and January 2023 Data

104,391 TOTAL contacts for Project Recovery Iowa

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Weekly Tally Report by Type of Contact and Day of Week
Project: IA-4483; Provider: All Provider; County: All County; Dates: 05/22/2020-06/10/2022

In Person Contact	10071(6.2%)	22106(13.6%)	25298(15.5%)	22407(13.7%)	40737(25.0%)	23745(14.6%)	18732(11.5%)	163,096 (14.0%)
Telephone Contact	1852(3.3%)	11003(19.3%)	10321(18.1%)	10670(18.7%)	10368(18.2%)	9515(16.7%)	3241(5.7%)	56,970 (5.0%)
Hotline / helpline / lifeline contact	3037(11.6%)	4313(16.4%)	4619(17.6%)	3757(14.3%)	3982(15.2%)	3699(14.1%)	2820(10.8%)	26,227 (2.0%)
E-mail Contact	12890(4.3%)	132239(44.4%)	40482(13.6%)	35997(12.1%)	39417(13.2%)	28385(9.5%)	8613(2.9%)	298,023 (27.0%)
Networking and coalition	2729(5.0%)	9083(16.5%)	9470(17.2%)	10397(18.9%)	11304(20.5%)	8411(15.3%)	3710(6.7%)	55,104 (5.0%)
Handed Material	9276(5.2%)	58977(32.8%)	31296(17.4%)	26224(14.6%)	25820(14.3%)	18026(10.0%)	10330(5.7%)	179,949 (16.0%)
Mailed Material	1978(1.2%)	87720(51.3%)	22923(13.4%)	23905(14.0%)	17442(10.2%)	15138(8.9%)	1725(1.0%)	170,831 (15.0%)
Left Material	2525(4.0%)	5568(8.9%)	5655(9.0%)	20058(31.9%)	9888(15.7%)	11579(18.4%)	7561(12.0%)	62,834 (5.0%)
Mass media	1030(20.5%)	804(16.0%)	463(9.2%)	490(9.8%)	649(12.9%)	1163(23.2%)	421(8.4%)	5,020 (0.0%)
Social networking messages	6370(8.5%)	14659(19.5%)	12677(16.9%)	11699(15.6%)	12687(16.9%)	11027(14.7%)	5981(8.0%)	751,00 (6.0%)
Column Total	51758(4.0%)	346472(31.0%)	163204(14.0%)	165604(15.0%)	172294(15.0%)	130688(11.0%)	63134(5.0%)	1,093,154 (100%)

The data showed the following:

- 27,262 = Individual Counseling sessions
- 33,201 Individual Encounters
- 164,457 = Brief Educational and Supportive Contacts
- 50,876 = Group counseling session attendees
- 4,049 = Group counseling sessions



Ages 40 to 64 (44.5%)

Ages 18 to 39 (27.8%)

Ages 65 years plus (18.1%).

The following Risk Factors showed the top categories:

- Past substance use / mental health problem (22.6%)
- Past Trauma (15%)
- Prolonged Separation from Family (11.6%)
- Pre-Existing Physical Disability (10.4%)

The most reported symptoms were:

- Isolation and withdrawal (46%)
- Anxious and fearful (38.3%)
- Fatigue/ Exhaustion (30.1%)
- Difficulty Making Decisions (30.3 %)

Community-based services was the highest resource referral for mental health services.

Media Presence:

- **Facebook** with 7534 active followers
- **Instagram** 3367 following
- **Twitter**
- **YouTube** 382 posted videos

www.projectrecoveryiowa.org

- **Iowa WARM Line** 844-775-WARM
- **Iowa Concern** 800-447-1985
- **Spanish** 531-800-3687

Resources



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<https://www.samhsa.gov/resource/dbhis/get-connected-linking-older-adults-medication-alcohol-mental-health-resources>

Get Connected! Linking Older Adults With Medication, Alcohol, and Mental Health Resources

This toolkit helps service providers for the aging learn more about alcohol and medication misuse and mental illness among older adults. It provides tools such as a program coordinator's guide, suggested curricula, and handouts, including screening tools to help identify problematic alcohol use and depression in older adults.

<https://www.samhsa.gov/resource/dbhis/smi-adviser-clinical-support-system-serious-mental-illness>

SMI adviser: A Clinical Support System for Serious Mental Illness

- Funded by SAMHSA and administered by the American Psychiatric Association, this initiative aims to advance the use of a person-centered approach to care to ensure that people with serious mental illness (SMI) find the treatment and support they need. For clinicians, SMI Adviser offers access to education, data, and consultations to make evidence-based treatment decisions.
- For people with SMI and their loved ones, people who care for someone with SMI, and people who have questions, the initiative offers resources and answers from a national network of experts.

American Psychiatric Association (APA)

<https://www.samhsa.gov/resource/dbhis/tip-57-trauma-informed-care-behavioral-health-services>

Traumatic Stress and Substance Abuse Problems

- This pamphlet provides information on what may define a substance use problem and its relation to trauma. It also discusses the effects of substance misuse on traumatic stress, and how to approach treatment for people with both traumatic stress and substance use issues or conditions

International Society for Traumatic Stress Studies (ISTSS)

<https://www.samhsa.gov/resource/dbhis/filling-gaps-planning-disaster-health-needs-patients-taking-opioids-people-using>

Filling the Gaps: Planning for the Disaster Health Needs of Patients Taking Opioids and People Using Illicit Drugs

- This blog post discusses the importance of addressing issues related to opioid misuse and addiction as part of overall disaster preparedness, response, and recovery plans. It includes ways to plan for disruptions in treatment, as well as increases in illicit drug use.

Administration for Strategic Preparedness and Response (ASPR)

<https://www.samhsa.gov/resource/dbhis/traumatic-stress-substance-use-problems-spanish>

Traumatic Stress and Substance Use Problems (English and Spanish)

- This pamphlet provides information on what may define a substance use problem and its relation to trauma. It also discusses the effects of substance misuse on traumatic stress, and how to approach treatment for people who are suffering from both.
- It is the Spanish-language version of a pamphlet also [available in English \(PDF | 267 KB\)](#).

International Society for Traumatic Stress Studies (ISTSS)

<https://www.samhsa.gov/resource/dbhis/meeting-guide>

Meeting Guide:

- This iOS and Android app can be used to find nearby meetings of Alcoholics Anonymous, a peer support organization offering meetings across the country and around the world to help people who have a current or past problem with drinking.
- Meetings may help people with alcoholism or people in recovery from alcoholism to cope with distress in many situations, including after a disaster.

Alcoholics Anonymous

<https://www.samhsa.gov/resource/dbhis/community-resilience-manual>

The Community Resilience Manual

- Developed in British Columbia to help rural communities in decline, this manual provides guidance for communities interested in increasing their resilience. It defines community resilience and helps readers assess and understand resilience in their community, prioritize goals so that communities can allocate resources as effectively as possible, and develop plans to increase the resilience of their community.

Canadian Centre for Community Renewal (CCCR)

<https://www.samhsa.gov/resource/dbhis/nacchos-pandemic-influenza-tabletop-exercise-template>

NACCHO's Pandemic Influenza Tabletop Exercise Template

- Developed to help local health departments design and conduct discussion-based pandemic influenza response tabletop exercises, this tool includes a user's guide, customizable PowerPoint template, objectives, and evaluation materials. To access these materials, scroll down the web page to the Pandemic Influenza Preparedness section.

National Association of County and City Health Officials (NACCHO)

<https://www.samhsa.gov/resource/dbhis/mental-health-considerations-during-pandemic-influenza-outbreak>

Mental Health Considerations During a Pandemic Influenza Outbreak

- The authors present an overview of six free, just-in-time training modules developed to address mental health issues that may arise in response to an influenza pandemic.[Citation: Ayers, K., and Yellowlees, P. The Internet Journal of Rescue and Disaster Medicine. 2013; 9(1).]

Internet Journal of Rescue and Disaster Medicine

<https://www.samhsa.gov/resource/dbhis/mass-violence-early-mental-health-intervention-proposed-application-best-practice>

Mass Violence and Early Mental Health Intervention: A proposed application of best practice guidelines to chemical, biological, and radiological attacks

- This article applies principles of early mental health intervention to a hypothetical scenario involving the explosion of a bomb loaded with the biological agent anthrax at a location near the Pentagon. It describes lists the key components of early intervention, as well as the long-term interventions needed to address the mental health issues that may arise after an attack.

[Citation: Ritchie EC, Friedman M, Watson P, Ursano R, Wessely S, Flynn B. Mass violence and early mental health intervention: a proposed application of best practice guidelines to chemical, biological, and radiological attacks

<https://www.samhsa.gov/resource/dbhis/managing-your-stress-tough-economic-times>

Managing Your Stress in Tough Economic Times

- The American Psychological Association offers pointers for stress management during economic downturns.

American Psychological Association (APA)

<https://www.samhsa.gov/resource/dbhis/mental-health-response-community-disasters-fact-sheet-disaster-mental-health>

Mental Health Response to Community Disasters: A Fact Sheet for Disaster Mental Health Planners, First Responders, and Providers

- This fact sheet can be used by anyone preparing for or responding to the mental health consequences of disasters.
- It discusses general principles for disaster mental health response, including the importance of identifying survivors with psychiatric disorders and providing them treatment. It also introduces frameworks for disaster mental health response, and case identification for posttraumatic stress disorder, the most common psychiatric disorder after disasters.

<https://store.samhsa.gov/product/Tips-for-Healthcare-Professionals-Coping-with-Stress-and-Compassion-Fatigue/PEP20-01-01-016>

Tips for Healthcare Professionals: Coping with Stress and Compassion Fatigue

- Tips for Healthcare Professionals: Coping with Stress and Compassion Fatigue
- This tip sheet explores stress and compassion fatigue, as well as signs of distress after a disaster. It identifies ways to cope and enhance resilience, along with resources for more information and support.



Psychological First Aid Application



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Thank
you!