The Aftermath of Disaster
Addressing Trauma with Mental Health First Aid

- Understanding Disaster Trauma
- Becoming a Sanctuary
- Mental Health First Aid
- Take-Aways

Matthew Bennett
Matthew Bennettt

matt@BIGL3C.org
connectingparadigms.org
- Matt's Mumblings Blog
- Trauma-Informed Lens Podcast
Connect!
- twitter.com/Matts_mumblings
- facebook.com/connectingparadigms/
- linkedin.com/in/matt-bennett-584abb3/
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NATIONAL HEALTH CARE for the HOMELESS COUNCIL
Understanding Disaster Trauma
Duration, Importance, & Uncertainty

Common Reactions to Disaster Trauma

Disasters & HCH Patients
Common Reactions to Disaster Trauma

Intense or unpredictable anxiety, nervousness, and grief

Changes to thoughts and behavior patterns
- Physical reactions to stress such as rapid heartbeat or sweating
- Difficulty concentrating or make critical decisions
- Disruption of sleep and eating patterns

Sensitivity to environmental factors
- Environmental sensations may trigger memories of the disaster creating heightened anxiety or re-traumatization
- Fears that the stressful event will be repeated

Strained interpersonal relationships and changes in social activity

Stress-related physical symptoms
- Headaches, nausea, and chest pain could require medical attention
- Preexisting medical conditions could be affected

American Psychological Association, 2018
Disasters & HCH Patients

Often present more resilient!

Re-traumatization

Shared disasters vs. disasters specific to homelessness

Those experiencing homelessness will likely have similar reactions on top of other challenges

Levine, 2008
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Becoming a Sanctuary

Organizational Preparation

Staff Well-being
Organizational Preparation

Safety/Emergency Response Teams

Supplies and equipment (emergency and operational)

Communication plans for staff and community

Recovery plans if evacuation is needed
Staff

Well-being

The well-being of staff before an event will predict effectiveness when disaster hits

Supporting staff response to disaster when delivering disaster relief

Supporting short-term excellence and long-term recovery and well-being

Venting, processing, and review when appropriate
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National Health Care for the Homeless Council
Mental Health First Aid

- Rapidly Post-Traumatic Recovery
- Immediate Response
- Encouraging Coping in the Aftermath
- HCH Patients
Rapidy Post-Traumatic Recovery

Community Support

Relational Support

Internal Capacity (cup size!)
Immediate Response

Safety first!

Verbally relay a sense of safety once established

Encourage them to be paying attention to bodily sensations

Let them know it is okay to shake and move their body if they feel the need

Encourage the utilize of any coping/mindfulness skills they may have (deep breathing, visualization, yoga)

Levine, 2008
Encouraging Coping in the Aftermath

Give time to adjust:
- Acknowledge that this is a difficult time
- Allow time to mourn
- Be patient with yourself

Ask for support:
- Friends and family
- Support groups
- Professional mental health (EMDR)

Communicate your experience

Engage in healthy behaviors and avoid drugs and alcohol as coping skills

Establish or reestablish routines

Avoid making major life decisions

American Psychological Association, 2018
HCH Patients

Disruptive events might be opening to revisit discussion around resources and services.

Frustrations that while recovery means the end of homelessness for some, they still have no home.

HCH specific support groups.
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Take-Aways

Have a plan!

Dual focus on staff and patients

Short-term support and long-term resources and referrals

Important opening for new conversations about homelessness
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