

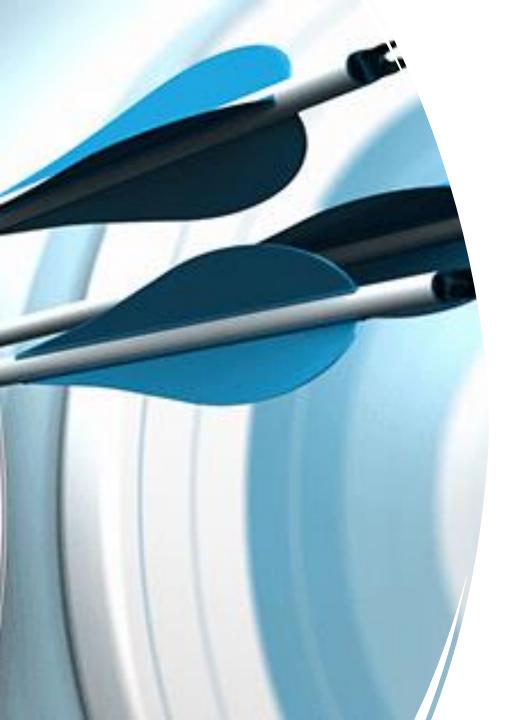
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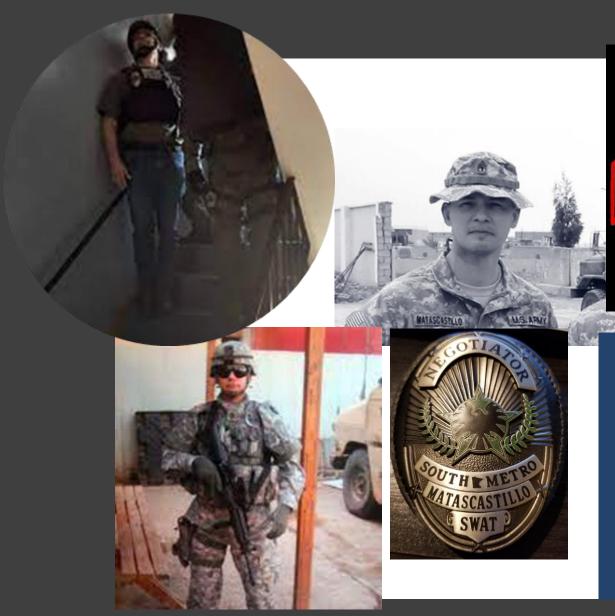
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# Objectives

- Understand what early intervention protocols (EIs) are
- Briefly discuss the evolution of disaster and emergency mental health
- Discuss how an EIP can help with resiliency building
- Lessons from the TC Metro Trauma Recovery Network
- Implications
- Questions





#### Who Am I?

- 18 Year combat veteran
- First Sergeant
- Airborne Ranger, Infantry
- 13 Combat deployments
- Published writer
- Advocate
- Minneapolis PD SWAT/Crisis Negotiation Team
- TC Metro Trauma Recovery Network Coordinator

NEGOTIATOR

MENTAL HEALTH MATASCASTILLO



"Emergency and disaster mental health may have century-old foundations, but its development as a field is far from complete."

(Everly, 1999 & 2022)

#### History of Disaster Mental Health

- Organizational Involvement and Changes in Community Structure in Disaster (Dynes, 1970). A community has to become disorganized before it can restructure into a therapeutic community.
- Human response to mass emergencies: A review of mental health research. Emotional First Aid (Sowder & Lystad,1985). A literature review of research following mass disasters and other events that led to the need to develop interventions.
- Disaster work and mental health: Prevention and control of stress among workers (Hartsough & Myers,1985). Created the first model for training, resourcing, and delivering mental health interventions to emergency workers through collaboration with mental health agencies and first responders.



## History of Disaster Mental Health

• When Disaster Strikes: How Individuals and Communities Cope With Catastrophe (Raphael, 1986). This book describes a study of catastrophes and offers insight into what happens to people in communities that are affected by them. It discusses how human beings respond in conditions of intense stress, and how best to help them, their families, and communities, discusses experiences, and provides case studies.



# History of Disaster Mental Health

 Emergency Services Stress: Guidelines For Preserving the Health and Careers of Emergency Services Personnel (Mitchell & Bray, 1990). This is the birth of Critical Incident Stress Management (CISM) often referred to as the "Mitchell Model". Cited by over 140 peerreviewed research articles since.



#### **CISM Interventions**



- The target is not the event but the response to the event.
- Formats:
  - Critical Incident Stress Debrief (CISD) 1-10 days after an event; 3-4 weeks after a mass disaster. Group format. 24-72 hours post-event.
  - Defusing within 90 minutes after coming off an event (i.e. shift, etc.) and before sleep.
  - Individual: One-on-one anytime, anywhere.
  - Crisis Management Briefings (CMB) –
    informational briefing not interactional. Used to
    identify where there may be individuals who need
    more help, reduce chaos, reduce rumors, provide
    information, enhance credibility.

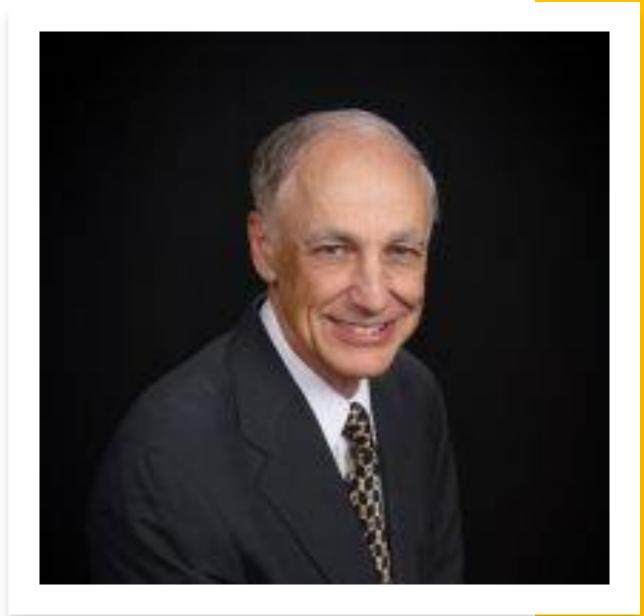
# History of Interventions

- 1991 The American Red Cross releases ARC 3050 M which fielded its initial recommendations for psychological interventions contained in the training and procedures document for their disaster mental health teams.
- 1992 The ARC responds to Hurricane Andrew testing its recommendations.
- 1995 The Green Cross responds to the mental health fallout of the Oklahoma City bombing using the ARC recommendations.
- 1995 J. Mitchell developed Critical Incident Stress
   Management (CISM) for tactical interventions through debriefs originally focusing on law enforcement officers.
- 2000 Began focusing on DoD elements. Mitchell himself is a retired Colonel of the Air Force and focused efforts on pilots.



#### Ursano, et al. (2007)

- Five essential elements of immediate and mid-term mass trauma intervention: empirical evidence. Identifies that interventions need to include and promote: 1) a sense of safety, 2) calming, 3) a sense of self- and community efficacy, 4) connectedness, and 5) hope.
- First responders: mental health consequences of natural and human-made disasters for public health and public safety workers. Evidence-based psychopharmacologic and psychotherapeutic interventions for PTSD and related disorders are outlined. Public health intervention models for the assessment and management of distress responses and mental disorders in first-responder communities are discussed.
- Models of PTSD and Traumatic Stress: The Importance of Research "From Bedside to Bench to Bedside". This research identified new avenues for understanding the trauma response in animal models and human brain tissue of individuals with PTSD.



# History of Interventions

To meet these mental health demands, alternative approaches to psychological care and who delivers such care must be considered. (Everly, 2020).



## Since then,...

- Shifting from responding to resiliency
- United Nations Office for Disaster Risk Reduction (UNDRR) (2000) outlined the need to prepare for disaster.



### Which Works Best?

- Castellano & Plionis (2006) compare three approaches
  - Psychological first aid. On-site, on-scene, peerto-peer, mental health treatment that is subclinical. Mental health professionals are not needed.
  - Critical incident stress management, fluid from individual to group formats. Mental health professionals are included as appropriate.
  - The Federal Emergency Management Association/Substance Abuse Crisis Counseling Program. Includes mental health professionals.
  - Found that choosing one over the other is not appropriate. Being able to perform the one that is necessary for the situation is more important.



#### Peer-to-Peer



- Castellano (2012) Reciprocal Peer Suppor (RPS): A
   Decade of Not So Random Acts of Kindness. This
   article describes an effective approach to peer support
   which set a baseline for modern-day peer support
   programs.
- Wu et al., (2020) COVID-19: Peer Support and Crisis Communication Strategies to Promote Institutional Resilience. A peer-to-peer support structure is discussed to support organizational resilience.

# Early Interventions(Els)

- EMDR-based protocols
- Developed to treat individuals and groups after a recent trauma event
- Used to address the fragmented nature of memories or recent events
- Used before the memory is consolidated into an integrated whole



#### Els

- Short term interventions
- Administered as an intensive, group, or individual session
- Widely used successfully
- Provide relief and some resolution
- Used across the planet
- Evidence that they significantly reduce traumatic stress
- <u>Preliminary evidence that they may</u> <u>foster resilience</u>



#### El Protocols: Individual

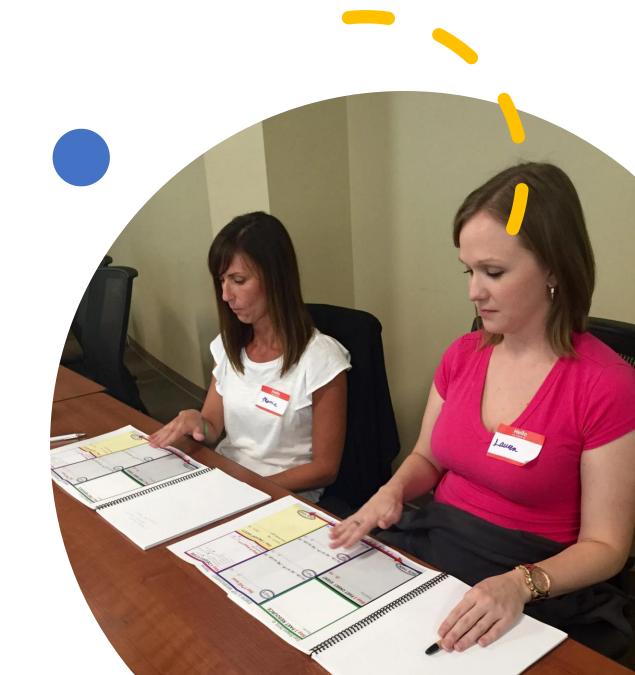
- ASSYST©: Acute Stress Syndrome Stabilization
- ISP©: Immediate Stabilization Procedure
- PRECI©: Protocol for Critical Incidents and Ongoing Traumatic Stress
- RTEP©: Recent Traumatic Events Protocol

(Retrieved from EMDRIA.org)



## El Protocols: Group

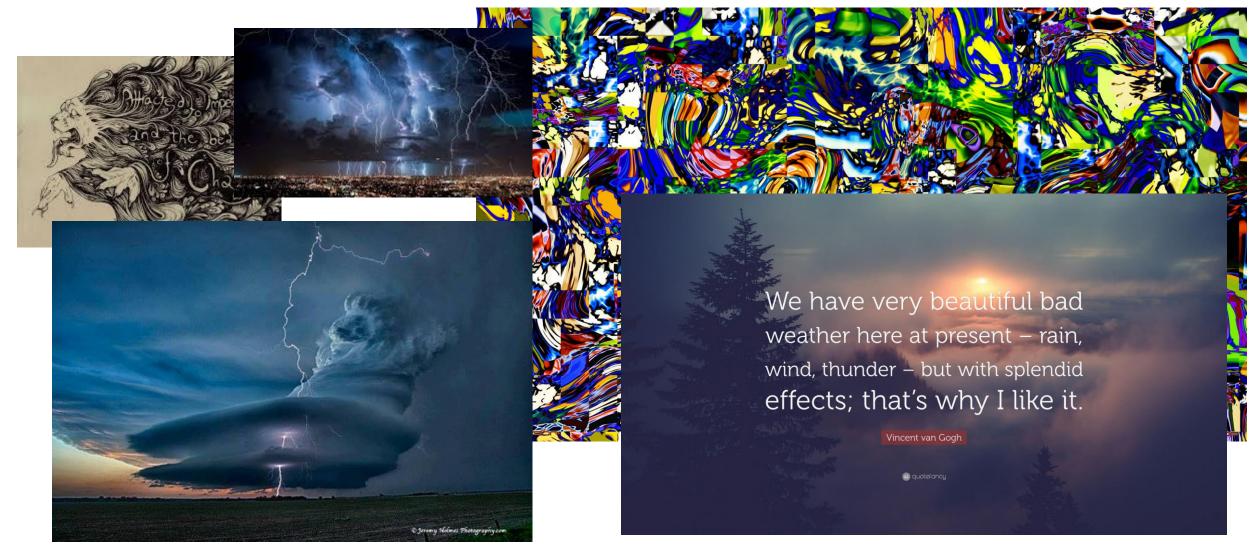
- GTEP©: Group Traumatic Episode Protocol
- IGTP©: Integrative Group Treatment Protocol
- ASSYST-Group©: Acute Stress
   Syndrome Stabilization Group format
- G-REP©: (Group Resource Enhancement Protocol)
- (Retrieved from EMDRIA.org)



## Resilience: A Spark of Courage

"When your legs scream stop and your lungs are bursting. That's when it starts. That's the hurt locker. Winners love it in there"

#### Chaos and Weather



## How El protocols help with resilience

- ACEs (Felitti, 1998) documented what Shapiro already knew about how trauma impacts the psyche and body
- The accumulation of trauma leads to mental health and medical health issues
- Predicting PTSD is difficult and uncertain
- Sub-clinical presentation often precedes the development of PTSD
- Kindling patterns of negative information are activated causing accumulation of stress causing sensitization
- Can lead to progressively greater responses over time
- (Retrieved from EMDRIA.org)



# How El protocols help with resilience

- F. Shapiro, 2001
  - If accumulated traumatic exposures sensitize later disorders
  - If dysfunctionally stored memories underlie many disorders (AIP)
- E. Shapiro, 2018
  - There is promising and compelling reason to intervene early
  - People exposed to significant adverse events should be offered "AIP checkups"
  - To prevent the accumulation and increase resilience to future exposure



## TC Metro Trauma Recovery Network

- Trauma Recovery Network of the Year, 2021 by the EMDR Humanitarian Assistance Program
- The identified community of focus is comprised of those individuals established to be "first responders" during whatever current operational environment or state of emergency including their support staffs we are in, within the TRN area of response. This will be provided via telehealth and in person as appropriate.
- Provide up to 10 sessions. The protocols used are the basic 8 phase protocol (EMDR), EMD, REP, EMDR-PRECI, RTEP, GTEP, etc.



**EMDR Humanitarian Assistance Programs** 

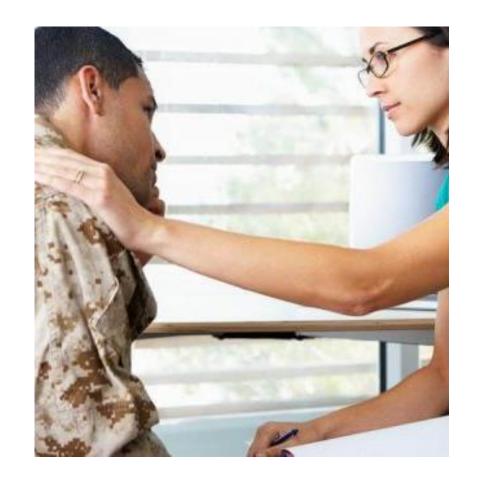
#### TC Metro TRN

- Established in March 2020
- May 2020
- Lessons learned since then
  - If they come in right away, they tend to be less intense
  - "One and done" if they come in right away
  - If they wait, they tend to move into worker's compensation
  - Secondary gains of having PTSD
  - Harder to stabilize
  - Tend to become longer-term clients
  - Intensives work well
  - No one wanted group protocols because of the lack of understanding
  - Because of COVID were able to respond across the State of Minnesota
- Trauma Recovery Network of the Year, 2021 by the EMDR Humanitarian Assistance Program



## Implications for the Future

- This field is only 32 years old
- We have shifted from
  - learning,
  - to reacting,
  - to becoming proactive.
- Every intervention has its place and each should be available.
- The onset of brain research in 2007 is leading to El's that focus on the brain and not just behavior
- We represent the strongest genetic makeup of all our ancestors and we are resilient. Our interventions need to focus on our resilience as well.





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## Questions

#### We covered:

- History of Els
- What early intervention protocols (Els) are
- The different Els
- Resilience
- How an EIP can help with resiliency building
- Lessons from the TC Metro Trauma Recovery Network
- Implications for the future

#### Questions

# Thank you!

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