

CENTER FOR THE STUDY OF TRAUMATIC STRESS IDENTIFIES FACTORS OF INTEREST FOR BEHAVIORAL HEALTH PROVIDERS IN THE INSTITUTE OF MEDICINE (IOM) REPORT

“Healthy, Resilient, and Sustainable Communities After Disasters: Strategies, Opportunities, and Planning for Recovery”

A driving goal of the Center for the Study of Traumatic Stress (CSTS) is to promote understanding of traumatic stress from the cellular level to the community level. That is accomplished through direct work by CSTS, collaboration with other organizations, and the dissemination of quality information from other reputable sources. In service of the latter, we recommend that leaders in the behavioral health community consider the content of this

The report models a multidisciplinary, multidimensional approach to understanding and promoting resilience in communities following disasters.

2015 IOM report.

As with all IOM reports, this was developed through a lengthy and considered process involving a wide diversity of experts on the topic. The draft report was then reviewed by other content experts, including CSTS, representing a range of perspectives. The draft was revised and the final report published in 2015.

This report will be of interest to behavioral health professionals for a variety of reasons:

- It models a multidisciplinary, multidimensional approach to understanding and promoting resilience in communities following disasters.
- It firmly reinforces behavioral health as an essential component of all health.
- It describes a strategic planning process for communities to consider. This includes establishing a shared vision of a healthy community, assessment of health and hazard vulnerabilities, planning across all sectors, and implementation guidance.
- It documents that there are health components to all policies involved in disaster recovery and speaks to integrating health into other recovery activities and priorities.
- It examines factors sometimes neglected when

considering healthy communities such as housing and social services.

- It provides specific and actionable recommendations that apply to leaders and stakeholders at all levels of government and within diverse stakeholder organizations and groups.

While the report speaks to behavioral health elements within sections related to public health, healthcare, social services, and housing, notably, there is a lengthy section exclusively devoted to behavioral health. That in itself is noteworthy. It reflects the growing and widespread understanding that behavioral health is an essential element of all health and that it should be included in disaster preparedness, response, and recovery.

Behavioral health professionals will find a large amount of material in this section that not only identifies behavioral health factors, but also provides a framework for addressing

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these factors, offers examples of programs and approaches, and offers specific recommendations. Interested behavioral health professionals will have no difficulty finding content relevant to their particular interest(s).

The report recommends that behavioral health strategies should cut across all disaster phases and should:

- Integrate behavioral health into other recovery sectors.
- Assure a variety of services.
- Maximize participation of impacted populations in the preparedness and recovery efforts.
- Promote a sense of safety, connectedness, calming, hope, and efficacy at all levels.

The report provides a concise and readable summary of key elements in understanding disaster behavioral health. This material will be of interest to those already well-versed in this aspect of behavioral health as well as those newer to this special area. This report includes:

- Provision of a comprehensive list of ways in which disasters affect physical, psychological, and sociocultural well-being of community members.
- Impact on subgroups within communities (e.g., children, individuals with preexisting mental illness, responders and recovery workers, etc.).
- Government and NGO roles and programs related to disaster behavioral health.
- Understanding disaster behavioral health factors in the context of the pre-disaster behavioral health priorities.
- Identification of ways behavioral health professionals can become involved in preparedness, response, and recovery.
- A comprehensive summary of the continuum (from universal interventions to specific intensive treatment of disorders) of behavioral health interventions following disasters.
- Issues involved in strengthening resilience in the behavioral health sector.
- Identification of research needs and gaps.
- Recommendation that a National Disaster Behavioral Health Strategy be developed and discussion of both the rationale and content.

This report is rich in both the process of its development and in the scope and depth of its content. It is highly recommended for behavioral health professionals who are involved in, or who might wish to become

involved with disaster preparedness, response, and recovery.

Additional Resources:

- Center for the Study of Traumatic Stress. Addressing the Needs of the Seriously Mentally Ill Following Disasters. https://www.cstsonline.org/assets/media/documents/CSTS_FS_Addressing_Needs_of_Mentally_Ill_in_Disasters.pdf
- Center for the Study of Traumatic Stress. Psychological First Aid. https://www.cstsonline.org/assets/media/documents/CSTS_FS_Psychological%20First%20Aid_Support_Well_Being_of_%20Disaster_Victims.pdf
- Fullerton, C.S., Mash, H.B.H., Benevides, K.N., Morganstein, J.C., & Ursano, R.J. (In Press). Distress of Routine Activities and Perceived Safety Associated with PTSD, Depression and Alcohol Use: 2002 Washington, DC Sniper Attacks. *Disaster Medicine & Public Health Preparedness*.
- Fullerton, C.S., Ursano R.J., Liu X, McKibben J.B.A., Wang L., Reissman D.B. (in press). Depressive symptom severity and community collective efficacy following the 2004 Florida Hurricanes. *PLoS ONE*.
- Heberman Mash, H.B., Fullerton, C.S., Kowalski-Trakofler, K., Reissman, D.B., Scharf, T., Ursano, R.J. (2013). Florida department of health workers' response to 2004 hurricanes: a qualitative analysis. *Disaster Med Public Health Prep*, 7(2):153-159.
- Ursano, R.J., McKibben, J.B.A., Reissman, D.B., Liu, X., Wang, L., Sampson, R.J., Fullerton, C.S. (2014). Posttraumatic stress disorder and community collective efficacy following the 2004 Florida Hurricanes. *PLoS ONE*, 9(2):p.e88467.

The report provides a concise and readable summary of key elements in understanding disaster behavioral health.

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