



## THANK YOU TO MAINE'S DISASTER BEHAVIORAL HEALTH VOLUNTEERS

Thank you to all of Maine's Disaster Behavioral Health Volunteers for your efforts in 2015. The importance of your willingness to volunteer, train and exercise provides an valuable resource to our Maine communities. As we reflect on 2015 and plan for 2016 we can feel proud of Maine's behavioral health preparedness accomplishments and continue working together to enhance our ability to provide a thoughtful response when called upon always remembering that:



- No one who experiences a disaster is untouched by it.
- Most people pull together and function during and after a disaster, but their effectiveness is diminished.
- Behavioral health concerns exist in most aspects of preparedness, response and recovery.
- Disaster stress and grief reactions are "normal responses to an abnormal situation."
- Survivors respond to active, genuine interest and concern.
- Disaster behavioral health assistance is often more practical than psychological in nature (offering a phone, distributing coffee, listening, encouraging, reassuring, comforting).
- Disaster relief assistance may be confusing to disaster survivors. They may experience frustration, anger, and feelings of helplessness related to

Federal, State, and non-profit agencies' disaster assistance programs.  
They may reject disaster assistance of all types.

## NEWS, UPDATES and RESOURCES

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### Social Vulnerability

by Kathleen Wescott, M.A., Director, Disaster Behavioral Health

Social vulnerability is defined in terms of the characteristics of a person or group that affect "their capacity to anticipate, cope with, resist, and recover from the impact" of a discrete and identifiable disaster in nature or society. A person's vulnerability to disaster is influenced by many factors. The following six categories are among the most commonly accepted: socioeconomic status, age, gender, race and ethnicity, English language proficiency, and medical issues and disability.



These six categories can help you as emergency responders and managers to identify the at-risk groups within Maine communities that could be disproportionately affected by disasters. You can use this information on at-risk populations during each of the four phases of a disaster: preparedness, response, recovery and mitigation. Here is a CDC guidance document for "[Planning for an Emergency: Strategies for Identifying and Engaging At-Risk Groups](#)".

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### 10 years later - Katrina: The Aftermath and Recovery



More than 1,800 people lost their lives as a result of Hurricane Katrina.  
Source: FEMA

SAMHSA DTAC thanks the contributors who shared their experiences and perspectives in the recent special issue of The Dialogue marking the 10th anniversary of Hurricane Katrina. Go to this link:

<http://www.samhsa.gov/sites/default/files/dtac/dialogue-vol11-is3-4.pdf>

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## 2015 Maine Integrated Youth Health Survey

The Maine Integrated Youth Health Survey is administered in February of every odd year to gauge the health and health habits of Maine public school students in kindergarten through grade 12. Student response rates and school participation rates determine whether or not data is representative and can be released.

Detailed and comparison reports from the 2015 Maine Integrated Youth Health Survey (MIYHS) are now available. State, public health district, and county level reports on public school students in kindergarten, grade 3, and grades 5 through 12 are available on the MIYHS



website [http://data.mainepublichealth.gov/miyhs/2015\\_report\\_fact\\_sheets](http://data.mainepublichealth.gov/miyhs/2015_report_fact_sheets).

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Maine Responds continues welcome more people into the state registry of emergency preparedness volunteers. It is clear that the desire to serve runs deep with our community of public health volunteers. Whether serving on Maine's Disaster Behavioral Health Response Team, in a Medical Reserve Corps unit or simply as an individual public health volunteer ready to help, our members recognize the value and necessity of pre-registering to serve the people of Maine in our greatest hour of need. Maine Responds volunteers are showing interest and enthusiasm in being part of the official state response to *any* public health emergency and are ready to respond when needed. If you have not yet registered as a public health emergency preparedness volunteer with Maine Responds please visit [www.maineresponds.org](http://www.maineresponds.org) today!



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## [Natural Disasters and Severe Weather Resources](#)

## Be Prepared to Stay Safe and Healthy in Winter – (CDC)

<http://www.cdc.gov/features/winterweather/index.html>

## Food and Water Needs: Preparing for a Disaster or Emergency – (CDC)

[emergency.cdc.gov/disasters/foodwater/prepare.asp](http://emergency.cdc.gov/disasters/foodwater/prepare.asp)

## Health and Safety Concerns for All Disasters – (CDC)

[emergency.cdc.gov/disasters/alldisasters.asp](http://emergency.cdc.gov/disasters/alldisasters.asp)

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# UPCOMING EVENTS & TRAININGS

## [Disaster Behavioral Health: A Critical Response](#)

April 7-8, 2016 (Thursday-Friday) at the Hilton Garden Inn, Auburn

June 2-3, 2016 (Thursday-Friday) at the Hilton Garden Inn, Bangor

June 6-7, 2016 (Monday-Tuesday) at the Hilton Garden Inn, Freeport

Register online at:

<http://www.mainedisasterbehavioralhealth.com/dbhcriticalresponsetraining/>

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# About Maine's Health Care Coalitions

The [Northeastern Maine Regional Resource Center \(NE-MRRC\)](#), [Southern Maine Regional Resource Center \(SMRRC\)](#), and the [Central Maine Regional Resource Center \(CMRRC\)](#).

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## Central Maine Regional Resource Center

Kara Tudman Walker, M.S.

Director, Central Maine Regional Resource Center, a Maine CDC Partner

The **Central Maine Healthcare Preparedness Coalition (CMHPC)** is engaged in the process for

developing the CMHPC regional Emergency Operations

Plan (EOP). The plan describes how the Healthcare Coalition response organization is structured and how it will respond during an emergency and will be usable under emergency conditions to guide response actions, demobilization, recovery, and return to readiness. The components of an EOP designed for use during a response are

specific “tools,” including call-down lists, operational checklists, mobilization and demobilization procedure checklists, reporting templates, and other standard operating procedures (SOPs). The EOP is helpful in developing and conducting education, training, and exercises, as well as in evaluating the Healthcare Coalition’s performance in exercises or actual emergencies. If you’re interested in contributing to this effort for the central Maine region, please contact our office for additional information: [Contact Us](#). If you’re interested in participating in CMHPC training/exercises please check out our [Training/Exercise Calendar](#).



## Southern Maine Regional Resource Center

[Paul Weiss MS, BS, CHEC](#)

Director - Southern Maine Regional Resource Center for Health  
Emergency Preparedness

[SMRRC](#) has had a busy fall. This is the time of year that many hospitals and Long Term Care Centers do exercises and drills within their facility. SMRRC has been helping several agencies with these events including monitoring how they go. We did a full scale MCI drill with Lincoln County Healthcare this fall and also worked on a Table Top Exercise with the York Public Health District Council. This Hurricane exercise emphasized a lot of healthcare and public health planning after a hurricane with a significant mold abatement issue. Late this fall SMRRC and the Coalition will be working on their regional Hazard Vulnerability Analysis and also planning our Regional Emergency Plans based on those hazards. This plan will include annexes for Mass Casualty, evacuation planning, and Surge of patient type events. It will be a busy winter to accomplish this very large project!

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