

WYO CISM NET



JUNE/JULY, 2010

A Newsletter For Critical Incident Responders In Wyoming

WYO CISM NET and Rocky Mountain Region Disaster Mental Health Institute, Box 786, Laramie, WY 82073-0786 <http://www.rmrinstitute.org> rockymountain@mail2emergency.com 307-399-4818

ONLINE TRAINING AVAILABLE:

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- **RETURN TO EQUILIBRIUM:**

- Disaster Mental Health**

- http://www.psychceu.com/Doherty/Equilibrium_index.asp - 4 CEU

- **RETURN TO EQUILIBRIUM: Returning Military And Families**

- http://www.psychceu.com/Doherty/Equilibrium_index.asp - 8 CEU

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- http://www.psychceu.com/CISM/cism_index.asp - 12 CEUs

- **FROM CRISIS TO RECOVERY: Strategic Planning for Response, Resilience and Recovery**

- http://www.psychceu.com/Doherty/crisis_index.asp - 12 CEU

8TH Rocky Mountain Disaster Mental Health Conference Proceedings: November, 2009 – Cheyenne, Wyoming

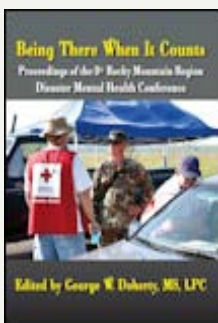
"BEING THERE WHEN IT COUNTS"

[Click here to See Table of Contents for major articles](#)

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<http://www.rmrinstitute.org/books.htm>

THE IMPORTANCE OF ALLIANCES IN ALL-HAZARDS EMERGENCY MANAGEMENT

Literature on prior collective trauma suggests that an important aspect in maintaining ability to respond to emergency situations and to prevent post traumatic stress is the cohesiveness and empathic support of the members of response teams. Forming and maintaining strong relationships among the diverse professionals on emergency response teams are key components necessary for successful response and recovery. Doing so prior to an event ensures that these alliances strengthen the response teams by creating emotional cohesiveness and promoting resilience to anticipated traumatic stress. During the event, solid relationships form the support system required to sustain responders during the operation. Following the event, these emotional bonds weave together a common experience, enabling recovery through support, empathy, and ongoing connection as the responders debrief. Mental health professionals are an important component of response teams, but are often overlooked during the all-hazards approach to emergency management.

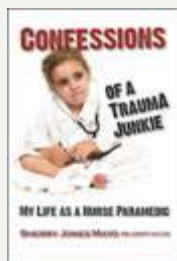
As part of the response effort, mental health professionals become real. The stigma of speaking to those in this field disappears. These professionals are trusted confidants, whose ongoing connections can identify pathological stress reactions or other psychological dysfunction within response teams both during and after the event. During recovery, mental health professionals maintain their connections to prevent the development of psychological illness and to refer appropriately for treatment. Koenig (2008) addresses the importance of creating working alliances between mental health professionals and other key members of the emergency management community. She takes the points of view of the emergency manager and the mental health professional to demonstrate the need for such work. Using practical examples from actual exercises and events, she answers such questions as: What resources and assets do mental health professionals bring to the emergency management table? What are their roles in the National Incident Management System? With whom do they network, partner and ally with to increase collaboration? How can they increase involvement in all-hazards emergency management activities? Further, she takes readers through each point of view individually, and then guides them through the development of mutual goals. Finally, she gives recommendations as to the formation and maintenance of these key alliances.

This is a critical area of team development and requires a commitment from all team members. The full article is available through the following reference:

Koenig, Melinda (2008). *Placing emphasis on alliances in all-hazards emergency management*. In Return to Equilibrium: Proceedings of the 7th Rocky Mountain Region Disaster Mental Health Conference. Rocky Mountain DMH Institute Press (an imprint of: Loving Healing Press Inc), Ann Arbor, MI.

CULTURE AND RURALITY – part 4 in rural series

Take a Ride in the back of the ambulance...



Confession's Website

http://sherryjonesmayo.com/Confessions_of_a_Trauma_Junkie/Confessions.html

Share the innermost feelings of emergency services workers as they encounter trauma, tragedy, redemption, and even a little humor. Sherry Jones Mayo has been an Emergency Medical Technician, Emergency Room Nurse, and an on-scene critical incident debriefer for Hurricane Katrina. Most people who have observed or experienced physical, mental or emotional crisis have single perspectives. This book allows readers to stand on both sides of the gurney; it details a progression from innocence to enlightened caregiver to burnout, glimpsing into each stage personally and professionally. Sherry was a Keynote Speaker at the 6th Rocky Mountain Region Disaster Mental Health Institute Conference in Cheyenne November 6-8, 2007.

http://sherryjonesmayo.com/Confessions_of_a_Trauma_Junkie/Endorsements.html

GIVE AN HOUR

<http://www.giveanhour.org/skins/gah/home.aspx>

is asking mental health professionals nationwide to literally give an hour of their time Give an Hour each week to provide free mental health services to military personnel and their families. Target population is the U.S. troops and families who are being affected by the current military conflicts in Afghanistan and Iraq.

Links to Red Cross for Haiti Assistance:

<http://www.wyomingredcross.org/>

<http://www.redcross.org/>

<http://www.redcross.org/en/givehere/>

Rural psychology has very few major studies concerning practice in rural environments and small communities. Practitioners face some very different problems from their more urban counterparts. Rural practice presents important yet challenging issues for psychology, especially given the North American and international distribution of the population, levels of need for psychological services in rural settings, limited availability of rural services, and migration of rural residents to urban centers. Direct service issues include the need to accommodate a wide variety of mental health difficulties, issues related to client privacy and boundaries, and practical challenges. Indirect service issues include the greater need for diverse professional activities, including collaborative work with professionals having different orientations and beliefs, program development and evaluation, and conducting research with few mentors or peer collaborators. Professional training and development issues include lack of specialized relevant courses and placements, and such personal issues as limited opportunities for recreation and culture, and lack of privacy. Psychology will need to address more fully these complex issues if rural residents are to receive equitable treatment and services (Barbopoulos & Clark, 2003).

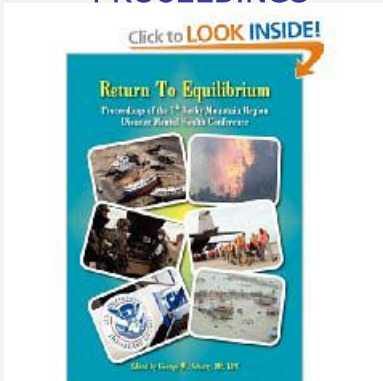
Some Cultural Considerations Beyond the fact that rural culture differs from urban culture, there are also some considerations about ethnic cultural differences that need to be taken into account by practitioners providing services in different rural areas. This is especially important when providing short-term interventions following major disasters, critical incidents and other crises in a culture not one's own. For example, in Puerto Rico, a United States Commonwealth, some background information is very important. The Estado Libre Asociado de Puerto Rico (autonomous commonwealth), established in 1952, redefined the political relationship between the United States and its colony. The ambiguous political status--autonomy without sovereignty, self-government without self-determination--created new social, political, and cultural contradictions. The island's first elected governor, Luis Munoz Marin, was committed to promoting an essentialized Puerto Rican culture centered around the idealization of traditional rural life, while simultaneously creating a new democratic citizenship, both of which would bolster the new government's legitimacy before its people. Puerto Rican scholar Cati Marsh Kennerley (2003) explores the collective work done by the Division de Educacion de la Comunidad (DivEdCo), the government educational agency charged with promulgating Munoz Marin's ideas about Puerto Rican culture and citizenship. Marsh Kennerley draws from a wide variety of sources to reconstruct an untold history, analyze its contradictions, obtain lessons from DivEdCo's negotiations, and point out its relevance for understanding contemporary Puerto Rican culture. This is important for anyone who will consider providing services in times of need.

In another example, (Gavin,2003) shares her experiences of training and working as a psychoanalytical psychotherapist in the United Kingdom and then in a smaller city in the West of Ireland. The range of people seeking counseling and therapy as well as the social arrangements and their effects of the boundaries of the therapy are discussed. Gavin concludes that it is vital to try to understand the cultural context within which one is working but one has to also be clear about what one considers to be the fundamental of one's particular orientation.

Weyer, Hustey & Rathbun (2003) provide a case study pertaining to the care of a dying 93-yr-old Amish woman with congestive heart failure living in a rural Amish community. They explore the world of the Amish community in some detail. Their overall beliefs, values, and behavior are discussed as well as how their lifestyle affects their health care decisions, access to health care, and reimbursement of services. Weyer et al state that nurse practitioners can offer culturally sensitive and appropriate health care to the Amish population by recognizing important cultural values that have survived for more than 300 years. Such sensitivities are important in understanding and reaching out to other cultural groups effectively.

Phillips, Li & Zhang (2002) present a picture of the current pattern of suicides in China. Suicide rates by sex, 5-yr age-group, and region (urban or rural) reported by the Chinese Ministry of Health were adjusted according to an estimated rate. It was estimated that a mean annual suicide rate of 23 per 100,000 accounted for 3.6% of all deaths in China and was the fifth most important cause of death for rural women, the eighth most important cause for urban women and men, and the fourteenth most important cause for urban men. The toll was particularly high in individuals aged 15-34 yrs, accounting for 18.9% of such deaths. Rural suicide rates were three times higher in both sexes, for all age-groups, and over time. Suicide is a major health problem for China; this public-health issue demands intervention development for high risk persons. A number of different explanations are likely plausible for such high rates. Reardon (2002) suggests that the uniquely high rates documented by Phillips et al may be partly explained by the strictly enforced birth quotas in China while Bertolote and Fleischmann (2002) point out the association between suicide and mental disorders.

Institute BOOKS AND PUBLISHED CONFERENCE PROCEEDINGS



RETURN TO EQUILIBRIUM: Disaster Mental Health and Returning Military and Families

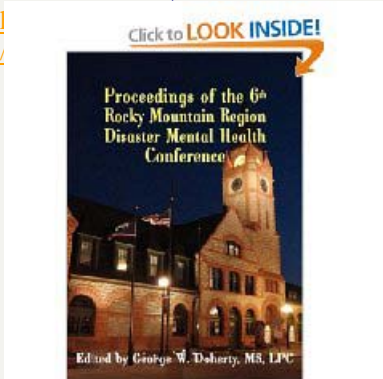
- Proceedings of the 7th Rocky Mountain Disaster Mental Health Conference – Laramie, WY

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<http://www.rmrinstitute.org/books.htm>

**Taking Charge In Troubled
Times** Proceedings of the 5th Rocky Mountain Region Disaster Mental Health Conference Casper, WY November 8-11, 2006



From Crisis to Recovery: Resilience and Strategic Planning For the Future -

Proceedings of the 6th Rocky Mountain Region Disaster Mental Health Conference - Cheyenne, WY November 8-10, 2007

<http://www.amazon.com/Proceedings-Mountain-Region-Disaster-Conference/dp/1932690565/>

Some Rural Problems:

Domestic Violence Wendt, Taylor & Kennedy (2002) provide a critique of the Australian research into rural domestic violence. Research to date has focused on the factors that keep rural women trapped in violent relationships. While this research has been useful in developing policy to address rural domestic violence, it has not yet provided information about women's understandings of their rural contexts. Research into domestic violence is moving towards acknowledging and recognizing the complexities and differences between people's experiences. Wendt et al suggest that it is time to explore the differences between various rural regions and to move away from the assumption that there is one rural culture. They suggest that a move towards feminist poststructural perspectives has strengths in that it enables a focus on the meanings of rural cultures from the perspectives of women who experience, and men who perpetrate, domestic violence. If these meanings become apparent, it may enable local solutions to be implemented and contribute knowledge and new ideas.

Although it has been suggested frequently that certain aspects of rural culture present barriers to women escaping domestic violence, research has not yet focused on how rural culture affects women's experiences. Wendt & Cheers (2002) report a study that explored how 14 rural women experiencing domestic violence perceived local cultural beliefs and values, the extent to which they had internalized these, and how they believed rural culture affected them in their situations. Components of their local rural cultures that they identified as impacting on their experiences of domestic violence included: belief in the sanctity and permanence of marriage, the importance and privacy of the nuclear family, Christian doctrine, and preservation of intergenerational property transfer. Each woman's story shows that, while rural culture gave them strength to endure the violence, it also created internal conflicts between wanting to escape and the cultural beliefs and values that they had internalized. Also, they were afraid of community reactions should they leave. Consequently, they did not disclose their violent situation and had persevered in them far longer than they thought they would have in a different cultural context.

Older People It has been well documented that people of all ages and cultures reminisce, that is, tell and retell the stories of their lives-whether in the privacy of their own thoughts or in the more public and shared realms of family, friends, community, and media (Campbell, 2002; Webster & McCall, 1999; McAdams, 1993; Bruner, 1990). A consensus on the functions of reminiscing has been more elusive, with thinkers weighing in from a broad range of psychological perspectives (Butler, 1963; Cohler, 1993; Gergen, 1996; Schafer, 1992; Wallace, 1992). Reminiscence generally is considered a narrative activity, in which people conceive and tell stories as a way of making sense of the events that happen to and around them. Narrative is an ongoing process of meaning-making that is both socially-defined and culturally-grounded; that is, people tend to tell different stories at different times and to different audiences. Webster (1993, 1995, 1997, 1999) proposed eight reasons, or factors, for reminiscing and used them in his Reminiscence Functions Scale (RFS, 1993)-Boredom Reduction, Death Preparation, Identity, Problem-Solving, Conversation, Intimacy Maintenance, Bitterness Revival, and Teach/Inform. Campbell (2002) used the RFS to explore the effects on reminiscence functions from clinical depression, specifically in a population of older adults in rural northwestern Illinois. Given that depressed older adults typically experience fatigue/insomnia, anxiety, hopelessness, worthlessness, diminished interest in people and activities, and thoughts of death, Campbell predicted that they would score higher than non-depressed elders on Death Preparation and Bitterness Revival, lower on Conversation and Intimacy Maintenance. Research involving 30 individuals, half of whom had been professionally diagnosed with a significant depressive disorder, demonstrated that the depressed subjects scored significantly higher than their non-depressed peers on Bitterness Revival, with trends toward significance on Boredom Reduction and Identity. No other factor differences were statistically significant. Campbell confirmed that the general tendency within depression to think negatively extends to one's reminiscence. Depressed individuals in this study-more so than their non-depressed peers-identified patterns of reminiscence that frequently focused on painful memories or lost opportunities and served to fill idle, restless time. No difference appeared in the frequency of overall reminiscence.



Rain and a spring heat wave that is quickly melting mountain snowpack have sent rivers rising in west-central Wyoming to record or near-record levels.



The swollen Laramie River closed roads in Laramie and surrounding areas in Albany County. Flooding also continued along the North Platte, Medicine Bow and Little Medicine Bow rivers in Carbon County.



With temperatures increasing across the state and more people spending time outdoors the Bureau of Land Management (BLM) reminds the public to be cautious while using fire outdoors. Despite recent rain, the weather in the upcoming months will play an important roll on whether that trend continues.

Rural Practice Jensen & Royeen (2002) describe the processes and outcomes of an action research project targeted at describing 'best practice' as experienced by interdisciplinary rural health projects funded by the Quentin N. Burdick Program for Rural Interdisciplinary Training, a Federally funded training grant competition in the USA. Each of 15 rural interdisciplinary health training projects across the areas of mental health, chronic disease, diabetes, minority health, and geriatrics was used to build a qualitative case study representing best practice experiences in projects focused on improving rural access to care. Across these programs, best practice is seen in the integrated dimensions of connections, community, and culture. In the USA, academic institutions build meaningful authentic connections with rural communities as they work together in meeting community needs, while demonstrating sensitivity and respect for cultural perspectives. Implications are offered in the context of higher education, health care delivery, and Federal initiatives within the USA.

NEW FEATURE: Beginning with the current Issue, we will be including a new feature: It will be a section written primarily for chaplains among first responders. We encourage anyone who would like to submit brief articles for the Newsletter to submit them as well. Send inquiries and/or articles to: rmrdmhi@gmail.com

CHAPLAIN'S CORNER

“Howdy!”

Thank you for tuning in to WYO CISM NET's newest addition for your reading pleasure...*The Chaplain's Corner*. Well, we hope it's at least palatable.

I want to thank George Doherty for the recent invitation to join with him and share on the presentation platform at Rock Springs. I count it truly a privilege to participate in CISM activities and being in class with George was a true delight for me.

Sgt. Randy Hanson is quite the host. He was able to acquire low-calorie donuts (they had holes in 'em) and keep things running even though he was a little under the weather physically. Thank you, good Sergeant, we appreciate you! And thanks for the introduction to your fine Team. It was nice to be able to sit in on a meeting with the Sweetwater ASSIST CISM Team and see first-hand the goings on in Rock Springs. I am also thankful to Fire Chief James Wamsley and the station at Fire District #1 for allowing me to camp out on their property with my portable cabin!

I was especially blessed to see the really good turnout for the Pastoral Crisis Intervention *introductory* class that we launched...the first of its kind. The kind response, attentiveness of the class participants, and enthusiastic interaction was truly stimulating. I trust we helped to provide a fresh and new perspective on the spiritual dynamics of crisis intervention and hope that it will be of benefit to all who were able to attend. And with the quality of people represented in attendance, I sincerely anticipate hearing of further advances in crisis/stress management in that neck of the woods.

The purpose of this segment of the newsletter will be to bring to your attention crisis management and intervention from a chaplain's perspective. It is my intention to reflect on my own experiences and those of other chaplains in the field of service. On this first edition, I would like to share something from Dr. Robert D. Crick, Director of the Church of God Chaplain's Commission, of which I am a member.

Some years ago, I received a poorly written note from a young minister who stated, “I would like to become a chaplin.” Of course, you will note that it is not “chaplin,” but, “chaplain.” I wrote the young man back a simple message, “Learn to spell it, and we will make you one.” Of course, we all know the difference between a “Charlie Chaplin,” and a real “Chaplain.”

A chaplaincy ministry is built upon three established principles: 1) A genuine call; 2) Experience and training; and 3) Passion for ministry beyond the gates. There are many who enter chaplaincy ministries for the wrong reasons. Some are enticed by the pay and/or titles; others have failed in some other ministry endeavor and see chaplaincy as a safe place to hide. As these find out, without a genuine call, the fast-paced life of a chaplain, with multiple deployments for our military chaplains and all the other challenges that come with this unique ministry, one will wash out and burn out in a hurry.

“Call” is such an important issue to grapple with. Recently, we had a couple of Church of God military chaplains who were passed over for their promotion. Of course, this was a blow that hit at the very center of their life and ministry. In these cases and other similar cases (difficult supervisors, bad assignments, or just the “overload” that comes with chaplaincy work), the question of one’s call to this ministry is re-evaluated. When these issues arise, chaplains must be absolutely sure of their “call.” Beyond calling, chaplains must have the necessary training and experience. The chaplaincy journey includes undergraduate and master’s training, as well as, long and difficult hours in Clinical Pastoral Education. It is through these and other training encounters that chaplains can flush out those “hidden agendas” which will hinder their ability to deal effectively with individuals and families who are victims of a dysfunctional society. Novices should stay away from this work; bureaucrats should flee it like the plague; for, this specialized ministry in dealing with the complexities of “ministry beyond the gates” calls for deep and critical experience and training.

And, what about passion? It takes passion for a military chaplain to serve a basic training unit; where outside the chaplain’s door stand 10 or 12 raw recruits dealing with their fears, their depression, and all the other dysfunctions which they bring into the military from a broken society. The reality is, after finishing with one group of raw recruits, almost immediately, here comes another unit; so, the routine task of dealing with these basic problems goes on and on. It takes passion for the hospital chaplain to sit patiently at the bedside of a dying patient only to walk out of that room totally depleted and have the nurse say, “Don’t leave, Chaplain. There is another patient down the hall in a similar situation that needs you desperately.” If you do not have a passion for this unique ministry, you will see these demands as impositions rather than opportunities.

Call, experience/training, and passion are the ingredients that help us differentiate between a novelty act (Chaplin) and life-giving ministry (chaplain) lived out with an overwhelming sense of satisfaction and purpose.

Thank you for your time. Hope to “see” you again next month. Blessings to all.

Chaplain Bob W. Rudichar



Floods can and have caused significant damage in Wyoming and are one of the more significant natural hazards in the state. They can cause millions of dollars in damage in just a few hours or days. Every county and many communities in the state have experienced some kind of flooding after spring rains, heavy thunderstorms, or winter snow thaws. Additionally, floods can also occur because of ice jams or dam failures, both of which have occurred in Wyoming. The documented flood history for Wyoming extends back to July 1895 in Casper Wyoming. The flood produced a 20-foot-high wall of water sweeping down Garden Creek, wiping out a camp of settlers at present-day Westwood School. Three people drowned.



TEAM UPDATES

SWEETWATER ASSIST CISM Team

CISM MEETING MINUTES - TUES. MAY 17TH 2010, 5:30-7:30pm @ RSPD Training Room

Attending: DFS- Christy Doak
 Sweetwater EM.- Judy Roderick
 RSPD- Randy Hanson, Wauneta Lutes
 RSFD- Ben Fausett
 Family Dynamic's Counseling- Jill Johnson
 Southwest Counseling- Mike Bauer

This month we had a brief meeting.

It started with Christy going over her recent debrief, called for by the S.W. Co. Dive Team, of a death to a local doctor in a tragic swimming accident. She told us that on 5-12-10 @ 1730 hours, there were about 14 people who responded to the Fire Dist. 1 station for a debriefing. The team of: *Christy Doak* as the administrator/coordinator, *Renee Schroeder* was the mental health provider and *Ron Atkins* was the peer/ observer, met approx 1 hour before the debriefing and prepared. She said the group was a very diverse group of people from the team and shore support personnel. She said it was a very "close net group" and thought the debrief went really well. She said that the people went through the steps almost on their own, and that it lasted about 1 ½ hours. Good job to all, and "THANKS" for being there for the people of this terrible incident !!

We discussed the upcoming training in June at the Fire Dist. Headquarters the week of June 14th to the 17th. George will be in town to teach the 3- day Peer and Group class. Bob Rudichar IS coming down from Gillette to teach the 1 day "Pastoral Crisis" class. Bob is also the coordinator of the Gillette team. Both should be here for the Monthly Meeting on June 15th !! Any questions about the trainings, or to get registered, contact George @ 307-399-4818

WYO CISM NET

PLEASE NOTE: *Because of the June trainings...*

THE JUNE MEETING WAS HELD AT FIRE DISTRICT 1 HEADQUARTERS ON COLLEGE HILL, NEXT TO DOMINOS.

With both Bob and George being here there was a good turnout. . It was a GREAT opportunity to compare teams, learn, network, and get any questions answered that folks had!!!

Don't forget to mark Julys meeting on your calendars also.. ** **TEAM BUILDER PICNIC on Tues. July 19th 2010, again at the Ball fields north of town @ 5:30**

Once Again....

JUNE'S MEETING WAS HELD @ FIRE DIST. HEADQUARTERS

**** Tues. June 15th 2010 -- 5:30pm ****

PIZZA was served.... ☺ ☺

New e-mail account SWCISM@gmail.com password "Rocksprings307"

Many Thanks to the Sweetwater ASSIST CISM Team for their hosting of the Annual Training and their hard work in putting things together and encouraging folks to attend. Also to Sgt Randy Hanson as the Team Coordinator for all his work over the past year and for setting everything up despite his current state in recovering from a recent operation. The donuts were especially great! The turnout for the training and participation was especially gratifying. We had 16 people for the 3-day CISM Course on Combined Individual/Peer and Group CISM and 10 people for the one-day Introduction to Pastoral Crisis Intervention course taught by Bob Rudichar. POST Credit was available for both courses for those who wanted it. Certificates for all indicated the number of Contact Hours acquired, including for Mental Health Professionals. 7 of the participants at the 3-day Combined course were Mental Health Professionals.

THANKS also the Chief James Wamsley for allowing us the use of the Fire District 1 Training Headquarters. They have an excellent facility and we are very appreciative of having the opportunity to use it. .

Thanks to Bob Rudichar for coming down from Gillette with his mobile SPACE CAPSULE. According to feedback from Bob, he followed up his course by enjoying some freshly caught trout on both the Green and the Snake rivers. Representation this year came from Sublette County as well as Kemmerer, Evanston and Green River. Together with the 10 Pastors attending, we are continuing the training and growth in the western part of the state.

TIR and Equine Training:

Nancy Day, TIRA and Linda Johnson, MA, LPC - Certified Equine Therapist presented a four day training in Laramie June 10 – 12 at the Broken Bridle Ranch. The training was a combination of Traumatic Incident Reduction (TIR – Fundamentals and Techniques of Life Stress Reduction) and Personal Empowerment for Life through Equine Assistance. Nancy Day is recently returned from providing TIR training to First Nation people in British Columbia, Canada. This training was sponsored by Pendley & Associates, Inc., 1277 North 15th Street, Laramie, WY 82072. There were 10 people in attendance, including one person from Miami, Florida. Outside activities were rainy, but the horses seemed to enjoy it. Overall, this was a great experience for all attending and, hopefully, it will encourage others to attend similar events here in Wyoming in the future.

DISASTER COMPLEXITY

Before Training: It is essential for disaster mental health workers to begin to process their own emotions about the disaster before attempting to help survivors. While workers may talk about their own reactions during the training, *training is not designed to be a debriefing*. If workers come to the training with unmet needs related to their own feelings, the training will not be able to proceed effectively. A debriefing or other group format for discussion of workers' reactions to the disaster should be conducted for workers before training. A trained facilitator who has not been directly involved in service delivery, yet thoroughly understands the demands of disaster work, should provide the debriefing.