

Gulf Responder Resilience Training Project- Phase II Kickoff Meeting

March 1, 2013

Biloxi Mississippi

Meeting Report

Introduction

As part of an after action meeting conducted following the Deep Water Horizon (DWH) oil spill, NIEHS determined that disaster worker training and education required revisions to address behavioral health consequences faced by workers who assist with response and recovery activities following disasters. In June 2012, the Worker Education and Training Program began a Gulf Responder Resilience Training Project (GRRTP) which intends to address behavioral health training and education for disaster workers. Phase I commenced with a meeting of stakeholders who provided input into the training and education needs of disaster workers following the Deep Water Horizon oil spill. Participants included health departments, community advocates, academia, and government. A report of that meeting was released in July, 2012. Phase II which includes curriculum development, began with a kick-off meeting of stakeholders convened on March 1, 2013. This report summarizes that meeting. Invitees to this meeting included all of the participants and invitees from the Phase I meeting. A list of participants is included as Attachment 1.

Overview of the Project

NIEHS/WETP presented a brief summary of the GRRTP to the participants and made the following points:

- Pre-disaster training is an important part of preparedness and community resilience
- Keeping communities involved from early on is critical
- Training needs to be role specific, appropriate in language, should help ID safety net providers, and hopefully train providers
- Training needs to be modularized such that it can be added to existing courses or as stand-alone training

Review of Worker Survey

Sarpy and Associates provided an overview of worker training survey, which was performed after the DWH response. Preliminary results were provided to the group from the 507 returned surveys. Key findings included:

- Most feedback indicated that training was effective
- Certain subpopulations found the training to be ineffective

- In part, language barriers challenged training effectiveness
- Relevance to the current disaster and workers' community was noted to be important for training materials
- Some populations gave the training high numerical scores but their comments about the training showed they didn't rate the training as being effective
 - This phenomenon was felt to be due to cultural influences
- Some populations did not employ the safety techniques provided in the training.
 - Indicates issues with effectiveness of the training
- Workers preferred training that was hands-on, scenario based, and discussions rather than didactic only.

Next Steps

MDB discussed potential next steps in developing a capabilities-based behavioral health module. A brief description of the various audiences for the training, potential key areas for organization of the development, and the creation of a resource compendium of mental health resources, as recommended in the June, 2012 meeting was provided.

The group then discussed the process by which Phase II would move forward. Participants discussed the following key issues:

- Enhancing mental health training and education remains a priority
- A resource compendium is not a static document and would not be useful to develop at this time. Local groups should be encouraged to complete a compendium of local health and behavioral health resources
- Behavioral health and occupational health resources in the Gulf remain limited, so training needs to be directed towards primary care providers
- Community advocacy groups are a community resource that could be used as the link between the workers and the government (state/federal).

WETP recommended continued stakeholder input into this project, but recognized that attendees haven't the time to participate in a time-intensive working group process. It was recommended and approved that an outside organization perform the basic ground work on curriculum development, such as literature searches, assessing existing programs, creating draft curricula, and developing evaluation metrics. As these are completed, the information would be sent to the stakeholders for review and comment.

A future meeting to discuss the pilot testing process will be considered.