

*The Disaster Psychosocial Program is making mental*

# LOOKING FOR THE HELPERS

Fort McMurray fire,  
May 2016

When Heleen Sandvik took the stage last March for the closing remarks at the inaugural Disaster Psychosocial Conference in Vancouver, it marked the achievement of a goal 15 years in the making. The goal, she explained to delegates, was to work toward “a system where we don’t separate our mental health or emotional well-being from our physical well-being.”\*

Specifically, when well-being has been threatened by disaster.

\* Newman, Sophia M. “Disaster Psychosocial Conference.” Retrieved on July 29, 2016, from <http://pod/phsa/phsanews>

## and emotional well-being part of emergency response

**S**andvik is provincial lead of the Disaster Psychosocial (DPS) Program, part of Health Emergency Management B.C. under the Provincial Health Services Authority (PHSA). The DPS Program is responsible for the development and provision of services to assist the public and responders in disasters and emergency situations. The conference was the culmination of a year and a half of work, and, as PHSA president and CEO Carl Roy noted in his address, it was the first conference on psychosocial dimensions of disaster ever held in North America. More significantly, it was a major step in reinforcing the notion that psychological and social needs in disaster extend well beyond what physical and practical care can provide.

### EARLY BEGINNINGS

To understand the accomplishment the conference represents, we need to step back to May 2001. At the time, Sandvik was running a provincial mental-health program for deaf and hard-of-hearing people at Vancouver Coastal Health. At the same time, she was volunteering with Emergency Social Services response in Vancouver.

"The first time I went out, I wondered where the mental-health people were," she says.

While response to physical aspects of the emergency was the priority, Sandvik believed it only made sense to have people on the ground who were trained to provide assistance with the emotional and mental-health impact. She wasn't alone in that belief. A group was formed, made up of representatives from different mental-

health professions with the aim of finding solutions.

"We were really struggling with how we were going to do this. We didn't have a clue how we were going to operationalize our vision when we started in May," says Sandvik.

A meeting was called for 3 p.m. on September 11, 2001. Yes, that September 11.

"Of course, in the morning, I'm watching TV and I'm thinking, 'We can't work. I'm going to cancel our meeting,'" says Sandvik, explaining she had arranged the group under the auspices of Vancouver Coastal Mental Health

believing it needed to belong to government. They agreed to it.

Before Sandvik could cancel the meeting, however, she got a call from the director of mental health and addictions, who told her, "Heleen, I think they're going to need people at the airport."

So the 3 p.m. meeting took place and the representatives

from the various associations put a call out to their members asking for volunteers to go to Vancouver airport to support the people who were stranded there.

"By 6 o'clock, we had 30 people. Just like that," says Sandvik. "We all thought, 'Wow, this is going to work. People want to do this.'"

From that beginning, the program grew. Sandvik says there were some major turning points.

"I dug through the Emergency Program Act looking for something that spoke to or made mention of our mental health or emotional self or psychological self in the regulations," she says, explaining that the regulations outline responsibilities for each government ministry.

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**When I was a boy and I would see scary things in the news, my mother would say to me, "Look for the helpers. You will always find people who are helping."**

— MR. (FRED) ROGERS

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“Under Ministry of Health, it has one bullet. That’s all. It says, ‘counselling and debriefing.’ Old language, too. It doesn’t say who gets the counselling and debriefing or who provides the counselling and debriefing,” says Sandvik. “But it was a big turning point because, suddenly, Ministry of Health owned it.”

### THERE’S AN APP FOR THAT

The second big leap forward was in terms of how DPS was organized and managed.

“When we first started, we didn’t have the infrastructure,” Sandvik says. “The admin person I had, who’s now a coordinator with us, found a volunteer-management tool and it changed everything, because then it was one source, one tool, to manage all the volunteers across the province.”

Because coordinating volunteers is critical to the functioning of the program, finding a tool that made this easier was a breakthrough.

DPS services are provided upon request and with the agreement of impacted communities. There are two employees, Sandvik and the coordinator, Ryan Good, and approximately 220 psychosocial volunteers across the province who are dispatched when disaster strikes.

With an official place within the Ministry of Health and an efficient, organized system to manage operations, DPS was making progress. The next step was to increase awareness of the critical importance of the work and take steps toward changing the system — the goal of the conference.

### BACK TO THE CONFERENCE

From March 21 to 23, conference attendees heard from an impressive lineup of presenters, including Darlene

Yellow Old Woman-Munro, who offered a First Nations perspective on care to people evacuated from the 2013 Alberta floods, and W. Craig Norris, who, in a separate panel, commented on care for seriously mentally ill persons after the same floods. Additional panelists offered reflections on serving a variety of disaster-affected populations, including Syrians migrating into Europe in 2015; victims of the 2014 Sewol ferry disaster in Korea; people affected by the Sandy Hook Elementary School shooting in 2012; and survivors of



the earthquake in Haiti in 2010 and Hurricane Katrina in New Orleans in 2005. Other speakers described their work with caring professionals, including emergency health-care staff, firefighters, and police.

Proposals were made to change the laws governing emergency services, particularly privacy laws that prevent reuniting people involved in disasters, with Dr. Laurie Pearce proposing a “reunification brokerage system” that incorporated “[getting] people to sign waivers or releases” and allowing

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**Caber is the Delta Police Department’s trauma dog and a DPS volunteer.** He was on duty in Fort McMurray, greeting residents returning to the fire-ravaged city. He was especially popular with the firefighters, 30 per cent of whom had lost their homes while they were protecting the homes of others.

survivors and responders to meet.\*

Carolyn Fast, executive director of the BCACC, attended the conference and was impressed with how well grounded the presenters were in theory, practice, and experience, and says they shared a common dedication, knowledge, and commitment to this work. In particular, Fast points to the presentation by Dr. Laurie Pearce, who discussed the plane crash in Richmond

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\* Newman, Sophia M. “Disaster Psychosocial Conference.” Retrieved on July 29, 2016, from <http://pod/phsa/phsanews>

in October 2011 and the effect it had on victims as well as bystanders who helped pull passengers from the burning wreckage on the highway.

“These people were in their cars when the plane came down. They’re not trained. They’re not prepared in any way to deal with a situation like this. They’re running in to help because you have that natural instinct to do that,” says Fast. “How are they helped after the event is over?”

Fast, who is involved with the Syrian refugees in Victoria, also attended the workshop on forced migration.

“The harrowing stories about their experience, particularly for women and children, the unsafety of what they have to do to make their way across Europe,” says Fast. “It gave me more understanding of the experience people in the world go through.”

“Until you are in or helping with a disaster, whether natural or accidental, I think you don’t really fully understand the disruption — and it’s a disruption in every way. Your belongings. Your space. Your emotions. Your family. Your community. And there are a lot of tentacles that go out from the core of any of these things,” says Fast. “Cleaning up a mess or rebuilding someone’s home doesn’t fix the emotional part.”

## A LEGACY OF HELPING

Sandvik is no stranger to disaster. In addition to her work with DPS and Emergency Social Services — a mobile support team in Vancouver that goes to big residential fires, forest fires, and floods — she was with the Red Cross in New York after 9/11 and in Haiti after the earthquake.

“When you’re there on the ground, it’s the most human experience ever. It’s like you don’t have that superficiality we all carry with us every day,” she says. “It’s the heart. A lot of the other pieces of response are physical, financial, economic.”

Sandvik says she is proud of what she and the DPS council and volunteers have accomplished.

“It’s pretty wonderful and it’s really rewarding,” she says. “When I hear from people who have volunteered and I hear their woes and their frustrations and then also how much they’ve learned... Amazing, poignant, heart-stopping, heartwarming stories of people and their lives and the support we’re able to provide to give them some sense of grounding. That’s what we do: we get people back on their feet by reminding them they have coping skills. Helping them start to take that first step of action toward repairing their lives.”

Sandvik is quick to deflect the credit for DPS and says it was a group effort: “It just seemed like the right thing to do. It was our dream, not just mine.”

But even so, it is a nice way to end a rewarding career as she begins her well-deserved retirement. ■



Left to right: Andy Day, Yolanda Hall, Barbara Schneebeil, Jenny Sawatsky, all DPS volunteers who helped in Fort Mac.

## Becoming a DPS volunteer

Julie Flowerdew, RCC, is a DPS volunteer and a board member representing BCACC since 2009. One of her responsibilities is to screen volunteer applications.

“The volunteers for DPS are a special breed. Not everybody can do it. It takes a special person to be able to go into these situations where you really have no idea what you’re going to find and be able to be present in what’s happening.”

Flowerdew says the people who become volunteers often have experience with emergencies, whether it’s sudden death, auto accidents, or fire.

“They’ve been involved with critical care in some way or, as therapists, they have a real belief in the importance of providing support to people early on in the disaster,” says Flowerdew.

Experience isn’t a requirement, however, and two online training videos are available to interested applicants.

“Often people have not been in chaotic situations so we try to provide some

experiences for people where they can role-play,” says Flowerdew. “It’s very chaotic. It’s very noisy. It’s really important to get that kind of experience and be able to stay grounded and centred within yourself, so you can deal with that chaos.”

It’s very different from sitting in an office with clients.

“We are not doing any kind of therapy when we’re there in a DPS role. That is not our mandate,” says Flowerdew. “We’re there to listen and, where it is appropriate, to link people up with whatever services are available.”

It is about being present with another person.

“For some people, what draws them to this work is seeing people in distress and knowing that the presence of one other person walking beside them can make all the difference in the world,” says Flowerdew.

Other requirements for DPS volunteers include membership in a professional organization, good communication skills in English, and willingness to be part of a team.

More information is available at [www.phsa.ca/our-services/programs-services/health-emergency-management-bc/disaster-psychosocial-program](http://www.phsa.ca/our-services/programs-services/health-emergency-management-bc/disaster-psychosocial-program).