



## **ITRC Urges Passage of Senate Bill 1037 on Resilience Education** **by the SVEP Committee**

For Hearing on April 2, 2019

My name is Bob Doppelt and I coordinate the International Transformational Resilience Coalition (ITRC). The ITRC sincerely thanks Senator Laurie Monnes Anderson for introducing SB 1037, which would establish a Resilience Task Force to examine how to make transformational resilience education and skills-training available to all Oregonians. We strongly support the bill and urge the SVEP committee to swiftly pass the bill out of committee.

We also urge the Senate and Legislature as a whole to enact the bill because the information and skills-training it will provide are urgently needed to establish a true culture of preparedness in Oregon.

### **About the ITRC**

The ITRC is a network of almost 400 mental health, trauma treatment, social service, environmental, disaster management, social justice, education, faith, and cultural competence practitioners working to build widespread levels of psychological and psychosocial--or what we call Transformational Resilience--for the traumas and toxic stresses generated by disasters. Many of our member work in communities or with individuals and groups impacted by disasters of many types. A 22-member National Steering Committee composed of leaders from diverse organizations oversees the ITRC's activities. The ITRC also has a steering committee in the Pacific Northwest and one in California that oversee the ITRC's work in those regions. For more information see: <http://www.theresourceinnovationgroup.org/intl-tr-coalition>

### **Why is SB 1037 Urgently Needed**

Devastating wildfires displaced hundreds of people in Oregon and other locations along the U.S. west coast in 2018. Faced with the reality of injury or death of loved ones, losing their homes and livelihoods, or seeing their finances depleted, many experience significant psychological traumas that can negatively affect them, their family, and community for years.

Wildfires are just one of the disasters Oregon residents face now and in coming years. More intense wind, rain, and snow storms, floods, heat waves, droughts, a major earthquake, tsunami, or other disasters are all likely. A single disaster on its own can produce high levels and types of traumatic stresses for adults and youth alike, leading to both severe individual mental health and psychosocial maladies (which describes how mental health disorders become social problems). These harmful conditions can become even more severe when multiple disasters impact the state within a short time period.

Research indicates that both natural and human-caused disasters often produce mental health problems such as severe hopelessness, helplessness, anxiety, depression, PTSD, suicidality, and more. They can also produce serious psychosocial maladies including higher

drug and alcohol abuse, spousal neglect and abuse that leads to more adverse childhood experiences (ACEs), interpersonal aggression, violence, and more.

Individually and collectively, disaster-generated mental health and psychosocial maladies can harm children, families, businesses and emergency responders and their organizations. They also increase the costs of health care as well as stress to health care systems, can diminish business and economic development, and undermine the health, safety, and wellbeing of entire communities. <sup>1</sup>

### Mental Health and Psychosocial Prevention Is Necessary to Create a True Culture of Preparedness in Oregon

The focus of resilience efforts in Oregon have, to date, focused primarily on external physical infrastructure. This is very important. However, the almost exclusive focus on external physical resilience neglects the *human* dimensions of disasters, and the harmful psychological, emotional, and psychosocial impacts in specific that often can last far longer than the external physical impacts of disasters.

To the extent that mental health and psychosocial impacts have been addressed, the focus has been on disaster mental health programs. These are important. However, they are typically not sufficient to assist all of the people impacted by disasters, especially when an event affects more than one community or when multiple disasters occur simultaneously (e.g. a major wildfire coupled with a heatwave and/or an earthquake). Disaster mental health programs are also normally short-term interventions designed to assist people only during and immediately after a disaster (for 1-6 months). They do not assist people during the 12 months to many years required for many to recover from the psychological and emotional distress resulting from a major disaster. In addition, due to the stigma that is often attached, many people impacted by a disaster will not seek help from mental health programs, and thus remain distressed and engage in behaviors that harm themselves or others.

The ITRC believes that widespread preventative is the only viable solution. In specific, by making psychological and psychosocial --or what we call Transformational Resilience--education and skills-training available to all adults and youth in Oregon, many of the harmful mental health and psychosocial impacts of disasters can be prevented, and those that do occur can be more quickly alleviated.

Thus, making Transformational Resilience information and skills available to all adults and youth will establish the true culture of preparedness needed in Oregon.

### Methods for Building Transformational Resilience

Research indicates that building Transformational Resilience involves helping individuals and groups strengthen existing and/or learn new age, culturally, and demographically appropriate: a) information about how trauma and toxic stress can adversely affect their mind, body, and behaviors (become "trauma-informed"); b) simple "Presencing"--or self-regulation--skills that enable them to calm their mind, body, and emotions when distressed; and c) simple "Purposing" --or adversity-based growth--skills that enable them to use difficulties as powerful catalysts to learn, grow, and find new sources of meaning, direction, and hope in life.

The combination of this information and skills help people learn how to think and act in healthy ways even in unhealthy conditions such as those generated during a disaster. The

information and skills can also motivate people to use adversities as stimulus to increase their own sense of wellbeing by assisting others. Thus, widespread transformational resilience education and skills-training is certain to motivate many people to do their part to help others in the midst of and long after a disaster has occurred as a way of helping themselves.<sup>2</sup>

Research shows that Transformational Resilience skills can be spread throughout the community by organizing "resilience teams" composed of a diverse group of respected leaders that together support existing adult and youth resilience programs, and help launch new ones in K-12 and after school programs, higher education, workforce development, social service, civic, faith, and other organizations and settings.

### The Multiple Benefits of Widespread Transformational Resilience Education and Skills-Training

In addition to preventing mental health and psychosocial maladies from natural disasters such as wildfires, earthquakes, and tsunamis, making Transformational Resilience education and skills-training available to all Oregonians will help prevent harmful human reactions to human-caused disasters (e.g., school shootings, community violence) while helping people cope with adversities ranging from everyday stresses to early childhood and adult toxic stress/trauma.

Making Transformational Resilience information and skills available to all adults and youth will also prevent many diseases and illnesses and thus lower health care costs for individuals and providers. Studies show, for example, that up to 75% of illnesses today are directly due to, or aggravated by, stress.

Further, making Transformational Resilience education and skills-training available to everyone can reduce costs for businesses resulting from reduced employee productivity and heightened turnover. The World Health Organization, for example, estimated that stress has cost American companies more than \$300 billion each year. Transformational Resilience information and skills can greatly reduce these numbers.

### SB 1037 Would Examine How to Strengthen Existing Resilience Programs and Launch New Ones

Recent ITRC research found that a number of well-established resilience building programs exist in Oregon (e.g. Southern Oregon Success, Resilience Network of the Gorge), and more are in development. The statewide task force established by SB 1037 would reach out to the leaders of these programs to discuss what would help strengthen and expand their work. Lessons learned from these discussions, as well as research on how resilience education and skills-training programs have been expanded in other cities and states, will form the basis for recommendations to the state legislature on policies that can help make the information and skills available to all adults and youth in Oregon by 2025.

### In Sum: The ITRC Strongly Supports SB 1037 Because Transformational Resilience Education and Skills-Training Is Vital to Establish a True Culture of Preparedness in Oregon

The ITRC believes that, much like everyone in society learns to read and write, Transformational Resilience education and skills-training should be made available to all Oregonians no later than 2025. This will not only prevent serious disaster-generated mental health and psychosocial problems, it will also motivate millions of people to engage in activities

that help others as a way to increase their own sense of wellbeing.<sup>3</sup> The ITRC strongly supports SB 1037 and urges the SVEP committee to swiftly pass the bill.

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<sup>1</sup> For research on the psychological and psychosocial impacts of disaster see, for example: Fullerton, C. S., et. al. (2013) Posttraumatic stress disorder, depression, and alcohol and tobacco use in public health workers after the 2004 Florida hurricanes. *Disaster Medicine and Public Health Preparedness*, 7 (1), 89–95; Vins, H. et. al. (2015). The mental health outcomes of drought: A systematic review and causal process diagram. *International Journal of Environmental Research and Public Health*, 12 (10), 13251. Obradovich, N., et. al. Empirical evidence of mental health risks posed by climate change. *PNAS*, (2018) 115 (43) 10953-10958; Hayes, K. et. al. Climate change and mental health: risks, impacts and priority actions. *International Journal of Mental Health Systems* (2018) 12:28 <https://doi.org/10.1186/s13033-018-0210-6>;

<sup>2</sup> See, for example: Doppelt, B. (2016) *Transformational Resilience*. Greenleaf Publishing (Routledge/Taylor & Francis), New York.

<sup>3</sup> For more information on the need, methods, and benefits of building transformational Resilience see the research in the ITRC Library.