

AFTER THE FIRE

RECOVER. REBUILD. REIMAGINE.

AFTER THE FIRE USA
MAUI: FEB 3-10, 2024

After Action Report: Mental Health

Prepared in Collaboration with After the Fire USA by:

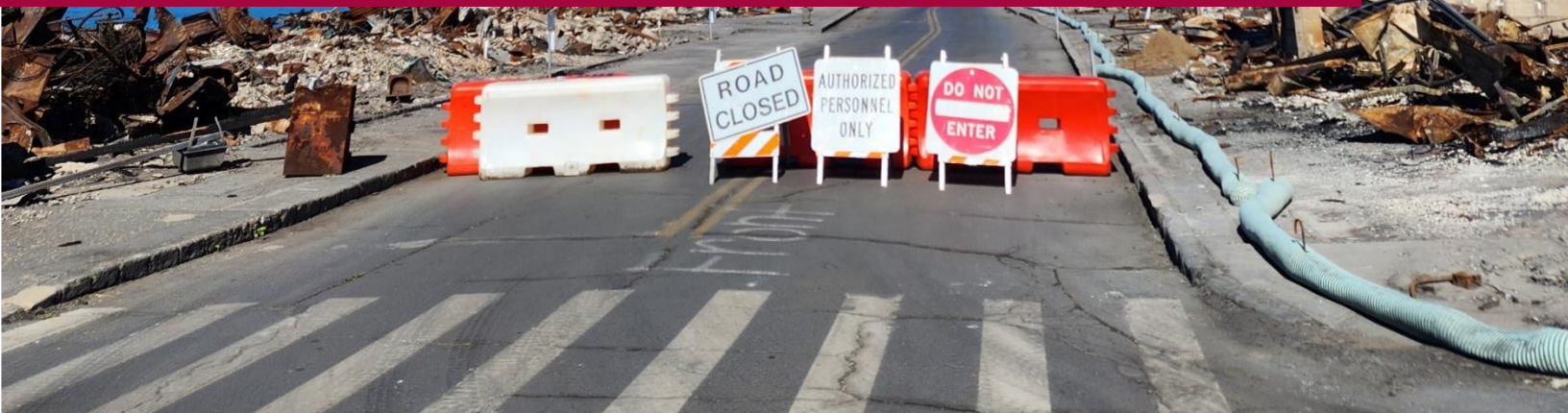
Adrienne Heinz, PhD

VA National Center for PTSD and Stanford School of
Medicine

Jolie Wills

Co-Founder & CEO

Hummingly



After Action Report: Mental Health Six Months Post-Disaster February 3-10, 2024

After the Fire USA is a 501c3 non-profit organization that helps communities navigate megafires. We are supporting the community of Maui in the following ways:

- I. Provide ongoing virtual and in-person support for local leadership on the island of Maui. This support includes public, private and nonprofit organizational leadership;
- II. Coordinate deployments to the island of Maui with disaster survivors & leaders, subject matter experts, and national funders;
- III. Create written recommendations post-deployment for use by both external and internal stakeholders;
- IV. Support the integration of Maui leaders into our Wildfire Leadership Network, the most comprehensive and in-depth network of experienced leaders in megafire.

HISTORY

Since August of 2023, we have provided both virtual and in-person support for the leadership in Lahaina as well as advised national organizations on ways to assist the response and recovery. Due to the scale of the megafire disaster, the legacy of colonialism and inequities, and the challenges for leadership on the island, After the Fire USA has committed to in-person deployments at least every other month as well as virtual support for at least the first 18 months post-disaster.

We have a proven history of supporting locally led and designed recoveries; we are very adept at embedding in post-disaster with local leaders and providing relevant, compassionate, and useful guidance for navigating the process of recovering, rebuilding, and reimagining after a megafire.

Thank you for your time and attention. Respectfully submitted,
Jennifer Gray Thompson, CEO After the Fire USA

After the Fire USA is an initiative of Rebuild NorthBay Foundation, a registered nonprofit (501c3). We help communities navigate wildfires. We collaborate with public officials (regional, state, and federal), the private sector, the nonprofit community, and support community-led and designed recovery. EID/Tax: 82-3266893

Background

Our approach to this work requires we listen to the needs of megafires communities as unique voices, but at the same time, we are aware of the expected phases of disaster recovery. We chose to focus on Mental Health because of what we heard, but also what we have learned to expect.

The six-month post-disaster period is often very challenging because the reality of what happened is settling into a new normal that can be incredibly upsetting, daunting, and overwhelming. The adrenaline phase is passing, leaders and survivors are often exhausted, and having put their needs on background for many months, lives + nerves begin to fray at the edges. There are many terms for this phase, but we call it "The Settling" and it coincides with debris removal.

Debris removal has benefits and challenges. The health benefits of removing toxic ash are innumerable and many anticipate a huge relief when the soot-stained wreckage of homes and the orange husks of cars are removed. But it may be helpful to know that the clearing of debris can also bring about a sense of loss because the tragedy of what happened is still being navigated on the inside but the pyres of life before the fire are gone.

We chose two talented and experienced professionals to come to Maui to meet with leaders, learn, listen, and advise. Dr. Adrienne Heinz is a clinical research psychologist at the VA National Center for PTSD and Stanford University, and a resident of Sonoma County, California for several years. Sonoma County has experienced massive and numerous (4) megafires since 2017. Dr. Heinz volunteered countless hours in 2017 and 2018 designing and implementing the Wildfire Mental Health Collaborative, which included add development and provided some form of mental health services to a community of 500K people after the October 2017 megafire disaster. Jolie Wills is a survivor of the 2011 Christchurch earthquake, where her home suffered damage and she supported her community and family through recovery. Jolie traveled the world as a Winston Churchill Fellow developing tools and programs she uses now as a mental health facilitator for leaders after disaster. Hummingly has offices in New Zealand and the United States.

These mental health care leaders were chosen for their direct survivor experience, compassionate competencies, and complementary skillset in mentoring local leaders to navigate this very difficult landscape.

We appreciate the opportunity to serve the community of Maui in the aftermath of the megafires. We know it is a point of trust to be allowed into the space of disaster recovery. We respect the particularities of this beautiful place and her people. In this report, you will find a series of recommendations meant to aid and assist in recovery.

Please remember that all recommendations are adaptable, and we are open to further input, questions, comments, and concerns.

Delegate Bios

Adrienne Heinz, Ph.D.

adrienne@dradrienneheinz.com

www.dradrienneheinz.com

919.630.6847 (cell)

Tubbs (2017), Kincade (2019), Walbridge (2020)

Clinical Research Scientist, VA National Center for PTSD and Stanford University School of Medicine

Subject Matter Expertise: Traumatic stress, Digital mental health, climate change grief, disaster recovery, social entrepreneurship

Adrienne Heinz, Ph.D. is a clinical research psychologist at the VA National Center for PTSD, Public Digital Health Innovation Program and Stanford University. Dr. Heinz's family and community in Healdsburg, California, have been repeatedly impacted by wildfire disasters and she cares deeply about raising awareness of the intersections of climate change, disaster, and mental health. Her research on trauma and resilience complements, informs, and inspires her clinical practice resulting in over 50 peer-reviewed publications. In her role, she creates free, accessible, science-based mental health apps to address trauma and related struggles. Dr. Heinz also serves as a consultant advising on cultivation of public-private partnerships to expedite healthcare innovation in trauma-impacted communities.

Jolie Wills

jolie@hummingly.co

www.hummingly.co

Christchurch Earthquakes (2010 & 2011)

Msc. Cognitive Psyc

Subject Matter Expertise: Community Recovery, Supporting the Supporters, Recovery Leadership, Recovery programing (mental health and wellbeing)

Jolie is a cognitive scientist specializing in disaster recovery. As a survivor of the Christchurch earthquakes, Jolie has lived disaster recovery firsthand with her family and community. Jolie led a large-scale recovery program in support of the many communities devastated by the Christchurch earthquakes – work that has shaped recovery programming globally, always in a way that is locally relevant. Jolie has spent the last decade learning from disasters and packaging the learning up into practical tools and guidance to make it that bit easier for communities hit by disaster and for those working to support their recovery. Jolie has been awarded a Winston Churchill Fellowship and an Edmund Hillary Fellowship for her global contribution to supporting communities affected by disaster. She is co-author of [Leading in Disaster Recovery: A Companion through the Chaos](#)

Jennifer Gray Thompson, MPA

jennifer@afterthefireusa.org

707.953.6034 (cell)

*North Bay Fires (2017) Kincaid + Walbridge Fires (2019), Glass Fire (2020)**Founder & CEO, After the Fire USA; Executive Director, Rebuild NorthBay Foundation; Bipartisan Policy Center Disaster Response Reform Task Force*Subject Matter Expertise: Community Recovery, Long-Term, Federal Advocacy, Wildfire Leadership Network, Frontline Community Support, Local + Federal Government; Public Policy

"We advocate, educate, collaborate to address the Era of Megafire."

Named as one of Forbes "50 over 50" IMPACT Leaders in 2022, Jennifer Gray Thompson has helmed Rebuild North Bay Foundation since January of 2018, right after the North Bay megafire of October of 2017. Gray Thompson took a fledging organization and made it into a powerhouse national nonprofit that is the recognized national leader in recovery from megafires. She serves on the Bipartisan Policy Center Disaster Response Reform Task Force making recommendations to Congress in 2024/25 on reforms.

Jennifer is a lifelong resident of Sonoma Valley in Northern California. After teaching high school for 10 years, Jennifer earned a master's degree in Public Administration from University of Southern California's Price School of Public Policy. Post-graduate school, Jennifer worked for the Sonoma County Board of Supervisors. After the devastating fires in the North Bay of San Francisco in October 2017, she accepted a position as Executive Director of the newly formed 501c3 nonprofit Rebuild NorthBay Foundation (RNBF), an organization dedicated to helping the region rebuild better, greener, safer, and faster.

Since "paying it forward" in the Camp Fire and Woolsey Fires of 2018, Jennifer has led delegations to 18 counties, again paying lessons forward to virtually every wildfire affected community in the American West. In response to the growing crisis, RNBF created After the Fire USA to help solve the issue of megafire, a climate-based disaster affecting millions of people globally. This initiative was born of practice in communities for several years and the increasing threat of the Era of Megafire.

As CEO of this organization, Jennifer has designed an effective and innovative Wildfire Leadership Network, implemented a Survivor Deployment Model for newly fire-affected communities, provided immersive and actionable After Action Reports to national organizations and communities, advocated with wildfire survivor leaders for sane and smart federal policies, and hosts a national summit on Wildfire Leadership annually in Sonoma, drawing upon leaders from frontline communities as well as the public, nonprofit, and private sectors.

Jennifer is committed to equitable and resilient recoveries for every community, regardless of their ability to pay. ATF USA (501c3) does not charge communities for their services. After the Fire USA is committed to supporting locally led and designed recoveries.

ATF USA has fostered a thriving resiliency program in partnership with CalFire and USDA/RCPP under the Parent Organization, Rebuild North Bay Foundation, that is the lead agency for nearly \$10M in state and federal grants for wildlands fuel mitigation programs. These innovative programs are now being transferred to wildland management organizations, having proved the model and innovated to address a serious gap in service delivery.

Jennifer is nationally recognized as a leader in the space of wildfire and has presented at several national conferences at the US Chamber of Commerce Foundation, HAC, Fannie Mae, Brownsfield, Smart Cities, FEMA, and more.

Jennifer is the creator and host of the "How to Disaster" podcast, which highlights proven and effective leaders with great ideas in the space of disaster.

DELEGATION MEETINGS:

Elected Officials

- Senator Troy Hashimoto
- Councilmember Yukilei Sugimura

Mayor's Advisory Committee

- Kim Ball
- Archie Kalepa (met via zoom on Feb 18th)
- Kalikolehua Storer

County

- Josiah Nishita (Deputy Managing Director, Maui County)
- Keanu Lau Hee (Planner, Maui County)
- Christopher Kish (Maui County, Dept. of Housing and Human Concerns (DHHC))
- Kauanoë Batangan (Co-lead for Maui County Health and Social Services (HSS) Recovery Support Function (RSF))

Organizations

- Dr. Bridgette Bongaard (Integrative MD, healer, and community leader associated with Maui Rotary)
- Paige De Ponte (Founder, The Spirit Horse Ranch)
- Genesis Gil (Roots Reborn)
- Veronica Mendoza Jachowski (Roots Reborn)
- Nicole Huguenin (Maui Rapid Response)
- Jessica Brazil (Founder, Mindful Living Group)
- Noe Ahia (Maui Medics)
- Wes Sapp (Tetra Tech)

Community Leaders

- Jackie Keefe
- Rebekah Uccellini-Kuby (Council for Native Hawaiian Advancement and Makai Foundation)
- Alfy Basurto (Rebuild Maui)

Events

- Six-month Remembrance Event

RECOMMENDATIONS

- 1) **Prioritize mental health and wellbeing; Normalize reactions and help-seeking:** Recognize there will be significant mental health impacts for those affected by the fire and the challenges of the rebuild process. Acknowledge and validate growing feelings of climate grief and ecological distress about living in a warming world. Promote a culture that destigmatizes help-seeking across the continuum of care and normalizes reactions to traumatic events as human. People are affected by traumatic experiences in different ways and thus require different kinds of support.
- 2) **Approach mental health recovery as a long, long game.** Healing from the emotional wounds of disaster is equally as important as rebuilding infrastructure. Policy makers and leaders need to ensure a legacy of healing and resilience over trauma and suffering by creating a system of multilayered support. Expect extra support to be needed for at least the next five years. Traumatic stress can exacerbate pre-existing mental and physical health conditions. Community members will require different levels and types of support across different phases of the recovery process. Addressing mental health needs to be a public health priority as [health economic research](#) shows that untreated post-traumatic stress is associated with a host of expensive, and negative consequences including but not limited to increased healthcare utilization, disability, domestic violence, child neglect, problematic alcohol and substance use, legal involvement, absenteeism from work and school, and presenteeism which is reduced functioning and performance while at work and school. A subset of the population will require specialized services for PTSD, anxiety, depression, substance abuse but the majority will not. However, those affected will greatly benefit from services that normalize their reactions, support healing and promote social and cultural connection, agency, and resilience.
- 3) **Promote resilience, reimagining, and posttraumatic growth and wisdom - avoid pathologizing:** Although the recovery process is painful, research from disasters shows that most people are resilient and will recover in time. However, a subset (5-25%) will require specialist support. Support to the majority typically includes psychoeducation, listening, practical support, normalizing responses and managing expectations, and community-based interventions. A long-term approach to recovery is vital to allow innate psychological resilience and coping mechanisms to come to the fore. It's important to therefore frame and message the impacts for the majority as 'normal reactions to an abnormal situation' and, while acknowledging the suffering, to also emphasize resilience, agency, cultural strengths, community participation and positive coping strategies. In parallel, ensure extra specialist support is available to the most severely affected and marginalized minority groups (e.g., families with small children, caregivers, elderly).
- 4) **Coordinate mental health services:** Review the coordination approach to providing mental health support to the affected population. Make it as easy as possible to access resources and services. Ensure the lead agency serves as the hub that coordinates and links different spokes

of mental health recovery initiatives. Include all stakeholders (government, NGO, private sector) who are providing support to impacted communities. Coordinate to avoid duplication, identify gaps, collectively respond to changing need, and bolster support services. Consider who is missing from the table currently? Who has trust and connection with community members to help increase engagement with services and resources? Empower local mental health leaders with the resources to provide what the community needs.

This recommendation aligns with international best practice ([IASC guidelines](#) page 11 Principle 5)

5) **Provide support options across the care continuum:**

Post-disaster, when basic needs are often unmet and a safe haven of home has been disrupted, it can be difficult to engage in cognitively-oriented therapeutic interventions. This is sometimes referred to as “fire brain,” and according to the [Neurosequential Model of Trauma](#) working in healing modalities that include art, sensory movement, nature, music, and attachment meets individuals where they are neurobiologically after disaster-related trauma. Accordingly, peer-support groups, community-based art projects, forest bathing, therapeutic play, equine therapy, music therapy, and dance and exercise programs may be more appropriate. A multi-layered approach helps with coordinating services to provide alternative and complementary supports that meet the needs of different groups in a culturally-relevant way.

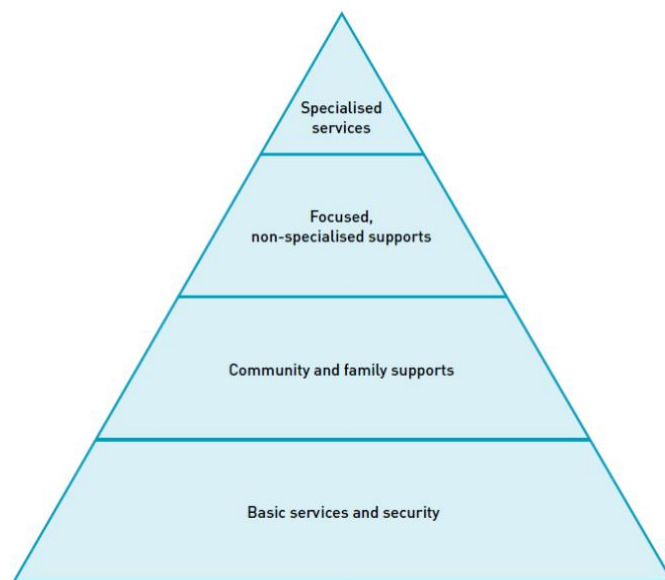


Figure 1 Intervention pyramid. IASC Guidelines P. 12

This recommendation aligns with international best practice ([IASC guidelines](#) page 11 Principle 6)

- 6) **Build local capacity; Pro-bono is not sustainable:** Skilled local mental health providers will provide the most relevant and appropriate services, being best positioned to respond to context, culture and community needs. Existing relationships and trust that is already established with these local providers will maximize the uptake of support services. However, local providers will be experiencing strain as a result of increased demand and increased costs in addition to managing personal impacts of the disaster. Work with local providers to identify ways to build capacity and reduce strain. After disaster, mental health providers often offer services pro-bono. Working for free in perpetuity to serve a vulnerable patient population is not sustainable for long term recovery. Consider funding bridge grants to reduce financial pressure for both the service entity and individual providers, fund administrative support to ensure providers can best leverage their skillset to support impacted community members, fund initiatives to help support,

train, and sustain local providers for the long game (3-5 years), and work with local providers to determine and provide for other support needs. Local service providers know exactly what they need to serve the community – ask and support them. If local providers go insolvent, they will be forced to go out of network (i.e., stop accepting insurance) or close completely. *This recommendation aligns with international best practice ([IASC guidelines page 10 Principle 4 and Supporting the Supporters practice guidelines](#))*

- 7) **Support the supporters:** Proactively implement programs to sustain and support the resilience of anyone with a role interfacing with and supporting impacted community members. [Research](#) in disaster recovery settings shows this group is at risk of significant negative impacts on their health, mental health and quality of life. The flow-on impacts for impacted communities is significant. This is as critical for key leaders as for front-line workers.
- 8) **Dissemination and implementation are critical.** Just because services and resources are available, does not mean communities will know about and utilize them. Dissemination and implementation efforts are vital to the success of public health initiatives. Marketing campaigns, integration into healthcare and school systems, partnerships with barbershops and faith-based organizations, use of mass texting, and community mental health ambassador programs are among a few examples of best practices for helping affected community engage with services.
- 9) **Reduce barriers to access:** Ensure ease of access to services for impacted community members. For example: Locate services where affected communities already naturally gather (e.g., schools, places of worship). Where possible, provide outreach services in the community rather than in-clinic. Simplify referral processes. Determine and signpost to the appropriate service via one or two easy entry points – for example, primary health providers, an 800 number, an app (determine the locally appropriate solution). Integrate and co-locate services to make utilization more convenient and seamless. Increase access to telehealth and offer digital resources and services wherever possible.
- 10) **Create a digital mental health safety net.** [Mobile mental health apps](#) are a scalable resource that can help reduce barriers to accessing mental health support, particularly among vulnerable populations. They can be used privately from the convenience of a phone, any time, any place. Public apps serve as a digital mental health safety net for those who want more accessible, lighter touches of support and for others who need more tools to supplement the care they are already receiving. Precedent for using a mobile mental health app to support mega-fire survivors in California has been established, and a peer-reviewed, published evaluation indicates a mental health app is a feasible, acceptable, and effective way to reach people where there are.
- 11) **Launch a public messaging campaign:** Public mental health campaigns can support wellbeing through the arduous recovery journey. This begins with deep listening to develop an understanding of the varied impacts, unfolding realities and coping strategies that are unique to the impacted communities. This understanding can serve as the basis for a messaging campaign to support wellbeing and resilience, and/or is useful for i) tracking wellbeing of the impacted communities as a measure of recovery and ii) informing decision-making when recovery processes help or hinder wellbeing and recovery.

[An example is the All Right? campaign after the earthquakes in Otautahi, Christchurch in Aotearoa, New Zealand: [All Right? campaign](#) and a [guide](#) explaining the process of designing a locally-relevant campaign.]

12) **Codesign: build with, not for.** Create a shared visioning process with the community.

Stakeholder feedback is essential for successful outcomes in the long-run but also for giving agency and hope to people while they are dealing with other rebuilding processes that may seem frustrating or slow. Co-designing a mental health eco-system with stakeholders at each stage of development is also critical for centering diverse voices and capturing the needs and preferences of consumers.

<https://www.strategy.co.nz/nz/work/share-an-idea>

13) **Approach rebuilding as a people project.** Ensure those involved in the rebuilding of the built environment are equipped and supported to respond to the needs of communities throughout the process, including maximizing agency and choice in the design and minimizing disruption of the process. Human-centered design using a trauma-informed approach is recommended. Examples include [Ibasho](#), [Stronger Christchurch Infrastructure Rebuild Team](#), [Community Centers post-tsunami](#).

Resources

Disaster recovery leadership guide

Supporting the supporters: Guidance for supporting those with a role supporting communities through recovery after disaster

All Right? public messaging campaign (All Right? campaign and a process guide)

Recovery leadership masterclass

Supporting the supporters workshop

Recovery foundations workshop

Talk Story: How one community approached collective healing after a disastrous wildfire

Published wildfire research – Stanford and University of Melbourne’s Beyond Bushfire research

Recovery support resources

List of programs for supporting mental health and wellbeing after disaster

Supporting evidence for Australia's national disaster mental health framework

School Resources

Resources for kids after disaster

School based disaster psychosocial interventions

US Department of Education: Immediate aid to restart school operations

General education provisions act assurances

Individual LEA or nonpublic school allowance expenditures

2019 Restart grant initial LEA needs assessment ACS

RESTART Frequently Asked Questions

How to Disaster Podcast:

Adrienne: 009 Encore: How to Design and Implement a Mental Health Collaborative with Adrienne Heinz, Ph.D. - How to Disaster | Podcast on Spotify

Jolie: 005: How to Self-Care— Recovery Leaders and Helpers with Jolie Wills - How to Disaster | Podcast on Spotify

Podcast Episodes on YouTube:

Encore: How to Design and Implement a Mental Health Collaborative with Adrienne Heinz, Ph.D. (youtube.com)

Summit: Video

Day 1-6: Mental Resilience for Leaders in Disaster | Jolie Wills (youtube.com)

KEYNOTE Rising from the ashes healing the wounds of disaster and managing climate grief Ad (youtube.com) Dr. Adrienne Heinz

After the Fire Resources:

After the Fire USA Home - After the Fire USA

2023 Wildfire Leadership Summit - YouTube

After The Fire USA - YouTube

How to Disaster | Podcast on Spotify

Maui After Action Report PDF

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