PUBLIC HEALTH EMERGENCY PREPAREDNESS (PHEP) PROGRAM STORIES FROM THE FIELD



ALASKA'S SOCKEYE WILDFIRE

In the summer of 2015, Alaska was affected by more than 300 statewide wildfires, burning more than five million acres, significantly larger than the 600,000 acres burned in a typical year. In response to this incident, the Alaska Department of Health and Social Services (AK DHSS) utilized PHEP-funded emergency management structures capable of leading or supporting public health responses.

The Sockeye Fire, one of the more damaging wildfires, was active from June 14 to July 22, primarily affecting Willow, an Alaskan community of approximately 2,100 people. Shelters, supported by PHEP funds, were opened to serve evacuated residents, and driving restrictions were established to keep citizens out of the affected areas. The fire bordered a major highway, and a tour bus was diverted to the shelter for one night. By the end of the response, the shelters had served 225 residents.

After a state disaster was declared, AK DHSS utilized the emergency management structure developed under the PHEP cooperative agreement to provide medical cots and equipment to shelters to support occupants. The state health department also activated the volunteer emergency medical professional registry and worked with the State Division of Behavioral Health to deploy local mental health clinic staff to shelters. The deployed medical professionals offered psychological first aid and referrals to those affected by the wildfires.



THE INCIDENT

The 2015 wildfires in Alaska highlighted the need to ensure the accessibility of mental health services during an emergency.



THE RESPONSE

AK DHSS used PHEPfunded emergency management processes to support emergency shelters with equipment and mental health services for residents.



THE OUTCOMES

Because of recent mental health and emergency trainings, evacuees of the 2015 wildfires had consistent access to mental health services and psychological first aid. In past years, AK DHSS had begun including mental health support in its emergency exercise planning. Mental and behavioral health elements practiced during exercises included: responding to participants presenting with mental health needs, determining partner organizations' roles and responsibilities to respond to mental health needs during a disaster, and integrating behavioral health into American Red Cross emergency shelters and recovery assistance centers.

These partnerships and exercises, supported by the PHEP cooperative agreement, contributed to Alaska's response capacity to provide disaster mental health services, equipment, and supplies for those in emergency shelters throughout the 2015 wildfire season.



CDC's Public Health Emergency Preparedness (PHEP) cooperative agreement program is a critical source of funding, guidance, and technical assistance for state, local, tribal, and territorial public health departments to strengthen their public health preparedness capabilities. Since 9/11, the PHEP program has saved lives by building and maintaining a nationwide public health emergency management system that enables communities to rapidly respond to public health threats.

To learn more about the PHEP program, visit www.cdc.gov/phpr/readiness.