Volume 6, Number 3, August 1995

From Floods to Fires: Coping With Natural Disasters

by Bernie Krewski, Criticus Consultants, Inc.

It is easy to become complacent about natural disasters. They do not seem to happen very often—the occasional flood, the odd fire, a tornado or two, and maybe a severe winter storm. They usually occur somewhere else, some distance from us, often in remote areas.

While Canada has some clearly defined vulnerable areas, there has been no major loss of life due to disasters. For forty years we have not experienced a hurricane the magnitude of Hurricane Andrew that struck Florida in 1992, although storms do occur. It is to los e ni fe.

Floods in Canada do occur frequently, the recent experience of southern Alberta provides an example. And produces a perturbation, to the extent that any other natural disaster.

The relative absence of mass disasters in Canada is partly due to the relative size of the population in the country, and its extensive size. Society has the technology to prepare for and predict natural disasters, not everyone can be evacuated, storms can be predicted, and nature can be controlled.

The relative absence of mass disasters in Canada is partly due to the relatively small population of the country and its extensive size.
On-line

Health Promotion On-line (HPO) is up and running. This is Health Canada’s new electronic information system, giving you access to a comprehensive publication library, research and databases, health promotion tools, policies, strategies, guidelines, directories, bibliographies, upcoming events and more. For more information contact (613) 954-3355, or fax (613) 950-7997. The HPO number is (613) 941-2806.

Announcing PhysEd 1: A listserver for PE teachers

PhysEd 1 is here! If you are on the internet and wish to find a discussion group for issues in K-12 Physical Education, we may have the answer for you! The mandate of PhysEd 1 is to promote positive discussion on any issue in physical education from classroom instruction to instrumented and extra-curricular activities.

To subscribe send a message to: physed1-request@ciao.trail.bc.ca

In the subject field type: subject: subscribe

You will then receive a confirmation message from the list.

To send a message to the list, use the address: physed1@ciao.trail.bc.ca

Editorial Information

Linking Alberta’s Well-Being Professionals

The Four Ages of Machines

It’s a little-known fact that William Shakespeare not only foresaw the creation of the Internet, he was smart enough to analyze the four stages of an Internet relationship.

First Phase: You love the Internet.

(Odysseus: “Tis true; there’s magic in the web of it.”)

Second phase: You learn from the Internet.

(Henry IV: “Out of his self-drawing web, he gives us note.”)

Third phase: You realize you’re hooked on it.

(Richard III: “Whose deadly web entwines thee about?”)

Fourth phase: You lose your connection.

(Henry V: “The net has fallen upon me; I shall perish.”)

From: Globe and Mail, June 30, 1995

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The Internet Invasion

by Cynthia Lowe, Director

WellSpring may soon arrive at your door via the Superhighway...

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The Alberta Centre for Well-Being

Serving Professionals in All Areas of Wellness and Active Living

"The Alberta Centre for Well-Being is committed to enhancing the health and well-being of Albertans by providing leadership and creating educational, research and networking opportunities for well-being professionals and facilitators through coordinated, collaborative efforts."
The Well-Being of Seniors in Alberta: An Alberta Perspective on the National Survey on Ageing and Independence (Kady M. Sefson and W. Kerry Mummery, 1995, 105 p. Available from the ACFWR)

This report is a detailed examination of the Alberta data from the 1991 National Survey on Ageing and Independence, carried out by Statistics Canada. It focuses on economic well-being, preparation for retirement, perceptions of health, social life and leisure activities, and patterns of social support. Prior to publication, the report was presented at a one-day workshop sponsored by Health Canada (Health Promotion & Social Development, Alberta/NWT Region) and the Alberta Centre for Well-Being. Key stakeholders in the area of seniors' programs, planning and policy making in Alberta were in attendance and given the opportunity to review, challenge and discuss the findings of the documentary. Their candid discussion and recommendations (annotated and included) were incorporated into this report - making it a unique and valuable resource for future reference.

The Resource Centre has also recently created a Community Development collection which has two new additions - Building Communities: From the Inside Out: A Path Toward Finding and Mobilizing a Community's Assets and Social Well-Being: A Paradigm for Reform...
they come through a traumatic experience as well as possible.

1. Heed disaster warnings.
Expecting that a tragedy may occur can lead to better preparation. An event that is "sudden and unexpected" tends to have a more devastating impact. The chemical spill from a Mississauga railcar in 1979 was interesting from a research perspective: 80% of the residents in the area were successful in following the evacuation. In US disasters, the average rate of evacuation is about 40%.

2. Prepare safety plans that include emotional as well as physical dimensions.
Avoiding live is clearly the first step. But when one survives, however, does not mean that the impact of the disaster is over.

3. Recognize vulnerabilities.
Research indicates that some people are particularly vulnerable when a natural disaster occurs. Children and the elderly may have more difficulty because they are relatively powerless and need to depend on others. People with high stress levels prior to the disaster or who are dealing with a recent death, such as the loss of a parent, may be also more vulnerable.

4. Be productive and help others.
People who take action, help others in some way, and find a useful role, tend to come to terms with a disaster more readily. Passive observation is much less effective.

5. Manage stress.
Helping out during a natural disaster can be stimulating and rewarding. Reports of volunteers working around the clock is common. It is also potentially dangerous, especially when unexpected complications arise. The standardized role is frequent breaks, proper food and nourishment, limited alcohol and appropriate sleep.

6. Be aware of the potential long-term effects.
Research studies on the psychological and social effects of disasters have increased dramatically in the last twenty years. Data indicates that the vast majority of survivors recover from disasters quickly. A small number are severely traumatized and become emotionally disabled. Groups at risk can be readily identified. Assessing which individuals may be vulnerable is harder to predict.

7. Maintain control and adapt.
When sudden and unexpected events occur, there is loss of control. Maintaining or restoring some sense of control is essential during a disaster. This issue is often misinterpreted as being detached, not becoming too involved, hiding thoughts and feelings, or preserving the status quo. Sensing control means maintaining one's sense of self while adapting to the current environment.

8. Anticipate using one's support network.
Just as death and tragedy require a period of healing, so does survival. Be prepared to rely on family and friends for emotional support until recovery is complete. Recognize that recovery usually takes longer than is anticipated.

9. Seek professional help.
It is not uncommon for survivors to need short-term support from a counsellor specializing in disasters. Fortunately, such specialists are now available in many communities.

10. Monitor the long-term effects.
Disasters have a way of raising to the surface when they are least expected. They do not always go away quickly. Monitoring should occur during the following periods with decreasing intensity: the first day, the first week, the first month, one to six months, six to twelve months with emphasis on the first anniversary, and annually until necessary.

Employ Abilites: An Emerging Workforce

Employ Abilites is a non-profit organization funded by Alberta Family and Social Services, Human Resources Development, City of Edmonton as well as private and corporate donations. The mission: to support people with disabilities by providing a wide variety of resources including a job bank, workshops in resume writing, and sessions in how to tap the hidden job market.

For employees, the organization demystifies disabilities by providing an Employer Liaison Officer who starts by assessing business needs. This service includes writing job postings and forwarding them to 28 agencies on the Equal-Link Hiring Line who work with potential employers. The Liaison officer is also familiar with the various employment programs available and can advise about which may be applicable for additional funding.

Employ Abilites has on-site accessibility checks and information about the latest in devices and aids to help people with disabilities in the workplace.

Earth Issues

Disaster Relief Resources

Please note: While the following materials can be useful, they need to be read critically. Many of the publications are based in the US where the system of disaster response is very different than in Canada. For example, immediate food and clothing relief is provided by community agencies in the US, while it is usually provided by the government in Canada. Personal Services, the Canadian reference, is useful but somewhat outdated.


For more information please contact: Bernie Keswick, Criticus Consultants Inc.
Phone/Fax (403) 633-2485
Fun Facts

- It takes 13 muscles to smile and 50 muscles to frown! So, avoid facial wrinkles — smile!
- Laughter boosts the immune system by increasing the levels of cortisol, an immune suppressor in the body.
- Hearty laughter speeds up the heart rate, improves blood circulation, enhances breathing, and increases oxygen consumption.
- Laughter for 15 seconds adds two days to the life span.
- Laughing 100 times a day is equal to a 10-minute session of exercise, so why not when you can?


Oh, My Aching Back

Researchers using mathematical model to measure overexertion, safety and risk of injuries

The shooting pain, the aches of recovery. About 80 percent of us will suffer from low back pain at some time. Low back pain does not discriminate," says rehabilitation medicine professor Sharman Kumar. "It can affect anyone, regardless of the type of work they do. It's the price of our bipedal posture. And since we're not going to start walking on all fours, we have to look at changes to our lifestyles and the way we do our work."

Dr. Kumar's research program focuses on various aspects of low back pain, including understanding the biomechanics of the back, prevention and treatment of low back pain, and the development of devices to measure how well the back functions. It's an impressive list of research areas, but one that Dr. Kumar felt fell short in terms of actually helping people in pain. "We've amassed a lot of knowledge and understanding of back pain," he says. "And yet, when I look at people in pain, I realize we haven't made a meaningful dent in the problem. That's what triggered me to look at the problem differently."

The result is a conceptual mathematical model that quantifies overexertion, safety and risk of injury to help prevent and control low back pain. The next step for Dr. Kumar is to validate his model with data on people with low back pain.

"In the traditional approach, we look in depth at one factor that causes low back pain," he says. "But the back is really a linked chain. It's always the weakest link that causes the problems but it's not always the same link. The new model allows us to look at a number of factors at once and quantify them. And once we can quantify risk of injury, we're in a good position to help control the problem."

For example, Dr. Kumar's model could be used for job assessment. By analyzing the load, motion and duration of activities, and linking them to individual capability, it should be possible to know whether low back pain is a likely outcome of the activity. The job could then be altered to avoid that outcome, preventing a lot of pain and suffering and saving a great deal of money. The estimated cost of low back pain in the US for 1992 was $122 billion.

"This model offers a way to proactively manage labour," says Dr. Kumar. "It will be a way to control and hopefully prevent work-related low back problems."

Dr. Kumar's research is supported by the Medical Research Council and the Natural Sciences and Engineering Research Council.

From: Spectrum: Research at the University of Alberta, Spring 1995

Job Postings/Opportunities

Research Participants Wanted

We are looking for women between the ages of 40 and 60 who would be willing to take part in a study about how women handle midlife issues. We are studying how women make choices about midlife issues including menopause, childbearing, work issues, relationship issues, health issues, etc. If you are willing to share your experiences please phone: Diane Kiefer (403) 492-5797 or Paula Brook (403) 492-7949, professors at the University of Alberta. Leave a message with your name and address and we will send you a questionnaire. Respondents will be identified by a code number for coding purposes and confidentiality will be protected.

Project Officer, Alberta Heart Health Project

The Alberta Heart Health project is a part of the Canadian Heart Health initiative and is funded by Alberta Health and Health Canada. Working as a member of the Alberta Heart Health Project team, the successful candidate will coordinate and participate in the ongoing developmental, communication and evaluation processes related to a 20 member multi-disciplinary, multi sectoral Provincial Heart Health Coordinating Committee. In addition, the incumbent will be required to assist in the coordination of several provincially planned workshops and meetings. Reporting to the Project Coordinator, this is a full-time contract position for 1 year with a possibility for extension.

Interested individuals are invited to send a resume and letter of interest, as well as the names and addresses of three references by August 15/95 to:

Alberta Heart Health Project
24th floor, 10025 Jasper Avenue
Edmonton, Alberta T3J 2N3

Do you have a job posting or professional development opportunity that you would like to see listed here? If so, send items for consideration to the Editor c/o WellSpring no later than one month before the publication date.
The concept of relapse refers to any "backward" movement among the stages and is thought to be a natural process, one which does not mean that subsequent behavioural change will fail to occur. Individuals may relapse several times during their efforts to achieve long-lasting personal change. The transtheoretical model also identifies the important role self-efficacy plays in the process of behavioural change.

The key concept for the practitioner is to identify the stage of behavioural change at which the target population is in, and tailor the promotional messages to the needs of that stage. For example, Leventhal et al. (1987) suggests a three phase approach to meet individual needs: a) promotion/motivation phase for the precontemplator and contemplator to interest them in changing risk behaviours, b) a skills training stage for people in the preparation or action phase to help them develop specific skills that are useful in the change process, c) a maintenance/gainfulness phase where efforts are aimed at helping people maintain their new behaviour through activities that include such things as social support networks.

By no means should the practitioner become driven by a single theory or approach. As can be seen by the three frameworks presented in this article, there is often conceptual overlap between theories and that many of the contradictory approaches are avoided, the initial practitioner can successfully draw from different theories to achieve success in program development and promotion.

References
The use of humour can enhance health and well-being. In the professional world, humour can be an effective tool for reducing stress, fostering communication, and improving relationships. However, it is important to use humour in a way that is appropriate for the situation and audience.

One way to incorporate humour into your daily life is to find opportunities to laugh at yourself. This can be done through self-deprecating humour or simply acknowledging your own mistakes. For example, if you are working on a difficult project, you might say something轻鬆 to yourself like, "Here I am, totally flailing around, trying to make this thing happen." This can help to reduce the pressure and make the situation feel less overwhelming.

Another way to use humour is to make it a part of your daily routine. This could involve watching a funny video during your lunch break, or finding a humorous quote to share with your colleagues. By incorporating humour into your daily life, you can help to maintain a positive attitude and reduce stress.

Remember, the key to using humour effectively is to be mindful of the situation and the people around you. Use humour to enhance relationships and create a positive atmosphere, but avoid using it in a way that is offensive or inappropriate. By using humour in a thoughtful and considerate way, you can help to improve your own well-being and that of those around you.
The 3rd World Congress of Medical Acupuncture and Natural Medicine

- Theme: Integrated Complementary Medicine for All in the 21st Century
- August 8-12, Edmonton
- For more information contact (403) 432-8520 or fax (403) 432-8520

Western Canada Games

- August 15-20, Abbotsford, BC
- For general and ticket information contact (604) 377-6000

Rol Up Your Sleeves and Dig In! A "How To" Symposium for Fundraisers

- August 24-25, Edmonton
- For a brochure and details, call Jamieson at Grant MacEwan Community College, (403) 497-5280

1995 Alberta Problem Gambling Conference

- August 27-29, Calgary
- For more information fax your name and address to fax number (403) 284-4384

Nurturing Relationships: Parenting the Child, Youth, Elder to Manager/Employee Relationships

- September 22-24, Vancouver
- Contact the Native Mental Health Association of Canada (613) 966-7610 or fax (613) 966-8670

Nobody's Perfect Alberta Conference

- September 28-29, Edmonton
- For more information contact Evelyn Hamilton (403) 486-8886 or Curtis Gilgolpe (403) 423-2031

This conference is for trainers, facilitators, area coordinators and sponsoring agencies that deliver and implement the programs to meet the needs of young parents and improve their knowledge and understanding of their children's health, safety, behaviour and development.

The Canadian Association for Suicide Prevention Annual Conference

- October 11-14, Banff
- For more information contact the Suicide Information and Education Centre in Calgary at (403) 245-3900, fax (403) 245-0299

Re-Creating Community Opportunities

- October 15-16, Edmonton sponsored by the Alberta Therapeutic Recreation Association and City of Edmonton, Parks and Recreation
- For more information contact Cheryl Pedigree at 4:00 pm (403) 465-3942

Keynote speaker is Dr. John Lord and is targeted at leaders working in health care and community recreation settings.

Partnerships for Change: North American Conference on the Family

- October 19-22, Winnipeg
- For more information contact Family Service Canada (613) 230-9680 or fax (613) 230-8884

Alberta Association of School Psychologists Fall Conference '95

- October 21, Edmonton
- For more information contact Donna Duhl (403) 365-9992

Fearing Dr. Larry Feng - Mediation Training for Professionals Working in Schools, and a panel presentation - Interactions in the Violence Cycle: 3 Levels.

Changing Times... Taking on the Challenge! 1995 Regional Conference of the Child Welfare League of Canada

- October 22-24, Edmonton
- For more information contact the Program Committee, CWWLC Regional Conference, 10709 105 Street, Edmonton, AB, T5H 2X3

Ageing: Bridging Communities, Building Futures

- 24th Annual Scientific and Educational Meeting of the Canadian Association on Gerontology
- October 26-29, Vancouver contact Susan Smith, Simon Fraser University (604) 291-5222, fax (604) 291-5066, e-mail: smithak@sfu.ca

The Balancing Act: Alberta Recreation and Parks Association (ARPA) Conference, General Meeting and Energize Workshop

- November 2-4, Jasper
- For more information contact (403) 453-8631

Keynote speakers include A. Roger Merrill, Michael Knoule, Jeff Bereauilt and Sandy Queen.

Changing Gears '95: A Meeting of Minds to Get Bodies Moving

- November 9-10, Calgary
- For more information please leave a message at Calgary Parks and Recreation (403) 223-3980

A health and wellness symposium for professionals and volunteers committed to the health and well-being of individuals in their communities. Featuring keynote speaker Dr. Steven Blair, Cooper Institute for Aerobics Research.

Healthy People in Rural Based Communities: Linking Knowledge and Action

- November 16-18, Lethbridge
- For more information contact University of Lethbridge (403) 382-7151, fax (403) 329-2668

Provincial Health Authorities of Alberta

As of June 5, 1995, Provincial Health Authorities of Alberta (formerly known as Alberta Healthcare Association) will be moving. Their new mailing address will be: Provincial Health Authorities of Alberta 44 Caribou Boulevard 200 - 10004 108 Street NW Edmonton, AB T5J 3L7 Phone (403) 426-8504 Fax (403) 424-4309

Health Canada's Health Promotion Directorate Eliminated

Effective May 1, 1995, the Health Programs and Services Branch of Health Canada has been restructured, eliminating the Health Promotion Directorate. Now there are four Directorates, dealing with:

- 1. Research, Program Policy and Planning (health promotion knowledge development focal point)
- 2. Population Health and Issues (e.g. Children, Families, Mental Health, Alcohol, Tobacco...)
- 3. Healthy Living and Disease Prevention (e.g. Nutrition, Health...)
- 4. Support Services

According to Ray Stanley, Assistant Deputy Minister, the change "...confirm the Department's commitment to the social and economic well-being of the Canadian population."

From: Canadian Public Health Association, "Health Promotion Research Centre Newsletter, Volume 8, June 1995.

Look!

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