

Disaster Psychology

EMERGENCY PREPAREDNESS



Disaster preparedness initially involves the physical health, welfare and safety of individuals impacted. Often “Psychological First Aid” for disaster-induced stress and trauma will be needed.

Disaster-induced stress and trauma are “normal reactions” to an “abnormal” event.

Emotional reactions will vary and may be influenced by:

- Prior experience with the same or similar event
- The intensity and length of the event
- Pre-incident stressors
- The length of time since the event
- Loss of loved ones, housing etc.

Emotional reactions can vary depending upon the phase of the event:

- Before the event, as concern escalates, and information is made available through the media and the authorities
- During the event’s impact - responding to the immediate effects of the disaster
- Immediately after the event’s impact when rescue may be needed
- Immediately after the event when an inventory is made of losses - personal and material
- Well after the event during recovery

Traumatic Stress Reactions

Traumatic events are shocking and emotionally overwhelming situations that may involve actual or threatened death, serious injury, or threat to physical integrity.

Reactions to traumatic events vary considerably, ranging from relatively mild creating minor disruptions in the person's life to severe and debilitating.

Some common signs/symptoms of emotional reactions to a disaster:

Physical

- Nausea and/or upset stomach
- Dizziness
- Headache
- Restlessness
- Difficulty sleeping

Emotional

- Anxiety and/or fear
- Guilt
- Grief and/or depression
- Anger

Cognitive

- Nightmares
- Confusion and/or disorientation
- Difficulty concentrating

Behavioral

- Avoidance and/or withdrawing
- Emotional outbursts
- Erratic behavior

Dial 9–1-1 for life threatening emergencies

Emergency Contacts

SAMHSA 24/7, 365 1-800-662-HELP (4357)

Disaster Stress Hotline 24/7, 365

1-800-985-5990

Crisis Text line Text TALK to 741741

Physical emergencies - dial 9-1-1

Taking care of yourself following a traumatic event . . .

- Try to rest a bit more
- Contact friends and talk
- Re-establish your normal schedule as soon as possible
- Fight against boredom
- Physical activity can be helpful
- Eat well-balanced and regular meals
- (even when you don't feel like it)
- Avoid alcohol and drugs taken without physician recommendation/prescription
- Recurring thoughts, dreams or flashbacks are normal - don't try to fight them - they'll decrease over time and be less painful
- Seek out professional help if the feelings become prolonged or intense



This document was modified from the original found at the Bergen County Office of Emergency Management.

Taking care of others following a traumatic event

- Listen carefully
- Spend time with the traumatized person
- Offer your assistance and a listening ear even if they have not asked for help
- Help them with everyday tasks like cleaning, cooking, caring for children etc...
- Give them time to be alone
- Help them stay away from alcohol and drugs
- Keep in mind what they've been through
- ❖ Don't try to explain it away
- ❖ Don't tell them that they are lucky it wasn't worse
- ❖ Don't take their anger, other feelings, or outbursts personally
- **Get further assistance if...**
 - The person is having life-threatening symptoms
 - The person is suicidal or homicidal
 - The person is out of control

References:

- <https://www.webmd.com/balance/stress-management/stress-management>
- <https://www.ptsd.va.gov/understand/types/disaster-terrorism.asp>
- <https://www.samhsa.gov/find-help/national-helpline>
- <https://www.ready.gov/coping-with-disaster>
- <https://www.psychiatry.org/patients-families/coping-after-disaster-trauma>

FM 22-51 Leaders Manual for Combat Stress Control