A GUIDE TO

MANAGING STRESS FOR DISASTER RESPONDERS AND FIRST RESPONDERS



SAMHSA
Substance Abuse and Mental Health Services Administration

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U.S. Department of Health and Human Services
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A Guide to Managing Stress for Disaster Responders and First Responders

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INTRODUCTION

Disaster responders and first responders serve on the front lines of disasters and other crises. By virtue of their work, they help communities address the broad range of challenges disasters present. They save lives, mitigate suffering, and improve post-disaster outcomes. However, also through their work, they may face hazards, horror, and suffering that can affect their mental health and well-being (Inter-Agency Standing Committee Reference Group for Mental Health and Psychosocial Support in Emergency Settings, 2010).

This easy-to-use guide provides a framework for stress management strategies for responders and their leadership. It also presents a brief orientation to the signs and symptoms of stress. The strategies in this guide are broad enough that individuals and groups can tailor the information to fit their needs and situations. The guide focuses on general principles of stress management and offers simple, practical strategies that can be incorporated into the daily routines of managers and responders. It is essential for responders to learn about and practice stress management strategies before a disaster, as part of their general personal preparedness, so they can respond effectively and sustain their own physical and mental health throughout their response.

Stress prevention and management should address both the responder and the organization. Adopting a preventive perspective allows both responders and their organizations to anticipate stressors and plan responses, rather than simply reacting to a crisis when it occurs.

WHO SHOULD USE THIS GUIDE?

This guide is designed for **disaster, crisis, and first responders,** a group that includes anyone who participates in responses to natural disasters, public health emergencies, technological disasters, and incidents of mass violence or terrorism. These responders include, but are not limited to, police, fire, and emergency medical services personnel, public health workers, construction workers, transportation workers, utility workers, crisis counselors, and volunteers.

I. UNDERSTANDING THE STRESS CYCLE

Stress is an elevation in a person's alertness or readiness to act caused by a stimulus or demand (also known as a stressor). As stress increases, an individual's performance may improve. When managed at a healthy level, stress can sharpen our attention and mobilize us to cope with demanding situations. Sometimes stress is positive—for example, the excitement you feel when you look forward to an event or assignment. Such stress is a good motivator. However, negative chronic or acute stress is a serious health concern.

At some point, the physical changes linked to stress reach their maximum benefit in helping us respond to a stressor. After this point, deterioration of health and performance begins.

Whether a stressor is a slight change in posture or a life-threatening assault, the brain determines when the body's inner equilibrium is disturbed and initiates actions that restore balance.

The brain decides what is threatening and what is not. When we face challenging situations, we think through the scenario:

- Have we been here before?
- How did we feel?
- What was the outcome?
- Reviewing this information, can we cope with the situation now?

If there is doubt or we have negative feelings about any of these questions, we can experience a "fight-or-flight" response. This response includes changes in hormones and physiological responses designed to help someone fight a threat or run from it (Harvard Health Publishing, 2020).

Figure 1 lists some common stress reactions. Stress response becomes problematic when signs and symptoms last too long and interfere with daily life.

Figure 1. Common Physical, Cognitive, Emotional, and Behavioral Reactions to Stress

PHYSICAL	THINKING	EMOTIONAL	BEHAVIORAL
◆ Digestive problems (stomachaches, vomiting) ◆ Headaches, other aches and pains ◆ Vision problems ◆ Sweating ◆ Chills ◆ Muscle tremors, muscle twitching ◆ Being easily startled ◆ Fatigue ◆ High blood pressure ◆ Fast heart rate ◆ Tooth grinding ◆ Trouble breathing	◆ Disorientation and confusion ◆ Trouble setting priorities and making decisions ◆ Trouble concentrating and remembering things ◆ Being more alert or less alert than usual ◆ Difficulty solving problems ◆ Nightmares ◆ Greater or less awareness of surroundings ◆ Intrusive thoughts	◆ Feeling heroic, euphoric, or invulnerable ◆ Denial ◆ Anxiety or fear ◆ Depression ◆ Guilt ◆ Not caring about anything, or as much as usual about things ◆ Sadness ◆ Intense anger ◆ Loss of control of expression of emotions	◆ Increase or decrease in activity level ◆ Substance use (alcohol or drugs) ◆ Angry outbursts, frequent arguments ◆ Being unable to rest or relax ◆ Worse performance at work and missing work ◆ Frequent crying ◆ Avoidance of activities and places that elicit memories ◆ Choosing to be alone more of the time than usual ◆ Eating more or less than usual

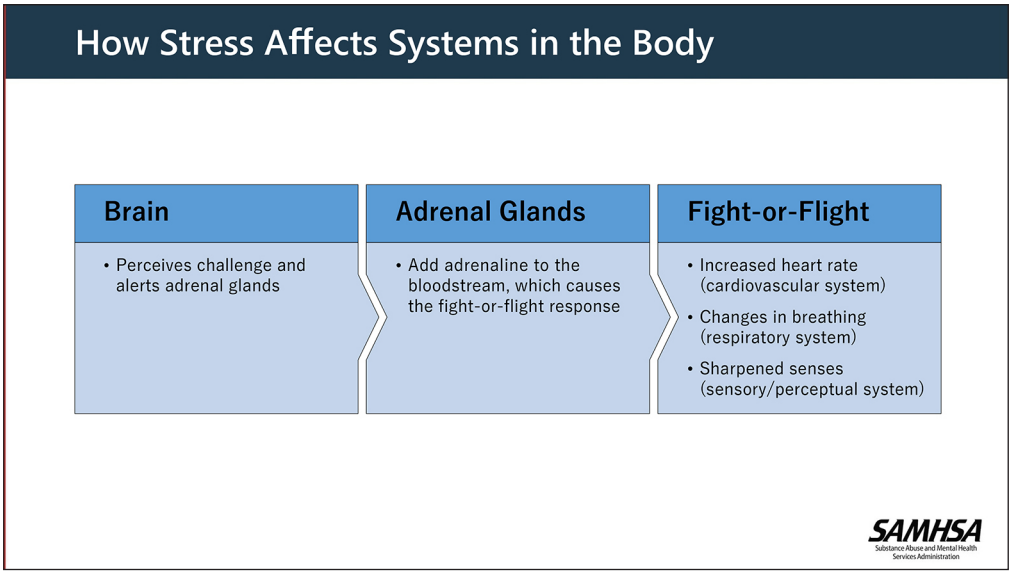
Source: International Critical Incident Stress Foundation, 2021

What happens in the body during the experience of stress? The brain sounds an alert to the adrenal glands. The adrenals answer by adding the stress hormone adrenaline to the bloodstream. This increase in adrenaline increases heart rate, changes breathing to get more oxygen into the lungs, sharpens senses, and causes other changes that are part of the classic fight-or-flight response (Harvard Health Publishing, 2020). The fight-or-flight response evolved to ensure our safety and survival. The increased heart rate

sends extra blood to the muscles and organs. Increased oxygen in the lungs and brain keep us alert and ready to take action. This phase, in which adrenaline plays a leading role, is part of the immediate response to stress (Harvard Health Publishing, 2020).

When the stress response is active for a long period of time—when stress is chronic—it can damage the cardiovascular, immune, and nervous systems (American Psychological Association [APA], 2013; APA, 2018). See Figure 2 for an overview of the experience of stress and its effects in the body.

Figure 2. How Stress Affects Systems in the Body



EXTREME STRESS REACTIONS

An optimum level of stress can act as a creative, motivational force that drives a person to achieve incredible feats. Most people do not suffer severe effects from manageable levels of stress. However, chronic stress may increase risk of heart attack and stroke, cause body fat increases and weight gain, and raise risk of anxiety, depression, and addiction (Harvard Health Publishing, 2020).

Another type of stress, traumatic stress, may have particularly negative effects. A traumatic stressor is a life-threatening event—one involving actual or possible death or sexual violence. Examples include serious car accidents, sexual or physical abuse or assault, house fires, natural disasters, and incidents of mass violence or terrorism (International Society for Traumatic Stress Studies [ISTSS], n.d.). Most adults have experienced at least one traumatic event (ISTSS, n.d.).

Some individuals who survive a traumatic event go on to develop posttraumatic stress disorder (PTSD). PTSD is a mental illness than can occur following the experience or witnessing of life-threatening events (National Center for PTSD, n.d.). People who suffer from PTSD often relive the traumatic event through nightmares and flashbacks, avoid things that remind them of the trauma, experience more negative thoughts and emotions than they did before the trauma, and feel overly



keyed up or reactive to what is happening around them (National Center for PTSD, n.d.). People with PTSD may have other mental health and substance use issues and conditions, such as mood disorders, anxiety and panic disorders, and substance use disorder (Mann & Marwaha, 2022). People with PTSD often experience substantial distress, and the disorder may cause major problems in relationships and at work (University of Michigan Department of Psychiatry, n.d.).

Following some types of traumatic stress, including disasters, increased substance use and other behaviors like impulsive shopping, gambling, and self-isolation are also a concern. While research has not found consistent evidence that substance use disorders increase after a disaster, there is evidence to suggest that substance use increases, which can create potential health and public safety problems. This is of particular concern when the affected people are response personnel who may have responsibility for public safety as part of their job duties.

While PTSD is serious and difficult to deal with, it can be treated by a variety of forms of psychotherapy and medication. For more information and resources on PTSD, check the resources section at the end of this guide.

II. PROMOTING A POSITIVE WORKPLACE ENVIRONMENT

A proactive stress management plan focuses on the workplace environment as well as the individual. Leaders of crisis, emergency, and disaster response teams are responsible for building and promoting health within their organizations, and this work includes planning to help workers cope with stressors. Leaders can use several techniques to help responders manage stress, including meeting with them regularly, encouraging (and taking) regular breaks, and encouraging (and using) the stress management services the organization provides (Wilkie, 2020).

As a supervisor or manager, you must assume shared responsibility for promoting a positive and healthy work environment and not rely exclusively on workers initiating their self-care practices. You should address the following dimensions when designing a stress management plan that prioritizes environmental and organizational health:

- Effective management structure and leadership
- Clear purpose, goals, and training
- Functionally defined roles
- Administrative controls
- Team support
- Plan for stress management

Just like all workers and volunteers, responders do better work when they are engaged in the effort they are part of, and so the qualities of leaders that foster engagement are especially important. Engaging leaders facilitate, or empower, those they manage, allowing them to make independent decisions. They strengthen those they manage by giving them challenging tasks to complete and helping them build knowledge and skills. They also foster connections between and among their workers, helping them build a sense of team cohesion, and they help them understand the meaningful nature of their work and how they contribute to the team (Schaufeli, 2021).



According to the *Harvard Business Review,* leaders can foster positive and healthy cultures for their teams in several crucial ways:

- Treating those they manage as friends
- Offering support to team members, and creating a culture in which team members support each other
- Inspiring one another at work
- Highlighting the meaningful nature of the work
- Treating team members with respect, gratitude, trust, and integrity (Seppälä & Cameron, 2015)

Managers can boost employees' perception of strong management support through feedback, open communication, and high visibility.

MINIMIZING STRESS IN THE WORKPLACE

- Set the tone by relating to workers with respect and valuing their contributions.
- Hold regular staff meetings or check-ins to plan, solve problems, recognize accomplishments, and promote staff cohesiveness.
- Clearly communicate the rationale behind procedural or supervisory changes and performance expectations.
- Create a formal employee suggestion system and encourage staff to contribute.
- Resolve conflicts early and quickly.
- Prepare workers for concrete tasks they may perform through technical training.
- Acknowledge that work is often stressful and connect staff to professional help if necessary.
- Promote an atmosphere where attention to personal emotional state is acceptable and encouraged rather than stigmatized or disregarded.

III. ORGANIZATIONAL STRESS MANAGEMENT BEFORE, DURING, AND AFTER AN EVENT

Everyone who experiences a disaster is touched by it, including responders, managers, and their leadership. The basic structure for disaster planning includes the four phases of comprehensive emergency management: mitigation, preparedness, response, and recovery (Chartoff, Kropp, & Roman, 2021). Good planning by organizations and groups of responders can limit health and psychological consequences, minimize disruptions to daily life, and contribute to the growth and empowerment of individuals experiencing a disaster.



The nation's mental health, substance use, public health, medical, and emergency response systems face many challenges in meeting the needs that result from disasters. Management of the mental health and substance use-related consequences of disasters requires a range of interventions at multiple levels in the pre-event, event, and post-event phases.

PRE-EVENT PLANNING

There are many preventive measures that you as a supervisor can put in place before an event occurs that can minimize stress. A thoughtfully planned communications strategy can lessen stress while delivering accurate and timely information within the organization and to the public.

Also, a clear understanding of roles and procedures is critical to helping individuals manage stress. Training and preparedness in incident management procedures are therefore key to stress management.

An understanding of the National Incident Management System (NIMS) and NIMS Incident Command System (ICS) structures can give staff more confidence and reduce stress before and during an event. Developed by the U.S. Department of Homeland Security (DHS), NIMS establishes standardized incident management processes, protocols, and procedures that all responders—federal, state, tribal, and local—use to coordinate and conduct response actions (Federal Emergency Management Agency [FEMA], 2022).

The NIMS ICS provides a consistent, flexible, and adjustable national framework within which government and private entities at all levels can work together to manage domestic incidents, regardless of their cause, size, location, or complexity. ICS helps all responders communicate and get what they need when they need it (FEMA Emergency Management Institute, 2018). For more information on NIMS and NIMS ICS, go to FEMA's NIMS web page at https://www.fema.gov/emergency-managers/nims.

Following are some suggestions that may help you and your team members cope with stress in a more effective manner.

MINIMIZING STRESS BEFORE THE CRISIS

- If not already required by your role, become familiar with the NIMS ICS and your organization's role in it, and train responders in its use.
- Establish clear lines of authority and responsibility so everyone knows who reports to whom. This reduces confusion and uncertainty, which can help lower stress.
- Provide regular training on stress management techniques.
- Create a facility evacuation plan and practice drills regularly.
- Provide ongoing training to ensure staff are thoroughly familiar with safety procedures and policies.
- Develop guidelines to help responders prepare for deployment.
- Maintain an up-to-date list of family members' contact information for each responder.
- Have a pre-established plan for how responders will check on their families if disaster strikes during work hours.
- Develop guidelines about social media use and updates during and after disaster to ensure that communication protocols are followed.

DURING THE CRISIS—AT THE SCENE

At the disaster scene, leaders can provide certain supports for their teams to lower stress and help them effectively perform the tasks at hand.

MINIMIZING STRESS DURING THE CRISIS—AT THE SCENE

- Clearly define individual roles and reevaluate them if the situation changes.
- Institute briefings at each shift change that cover the current status of the work environment, safety procedures, and required safety equipment.
- Partner novice or less experienced workers and volunteers with those who have responded before to crises. The buddy system is an effective way to provide support, monitor stress, and reinforce safety procedures. Require outreach personnel to enter the community in pairs.
- Rotate workers from high-stress to lower stress functions.
- Initiate, encourage, and monitor work breaks, especially when casualties are involved. During lengthy events, implement longer breaks and days off, and curtail weekend work as soon as possible.
- Limit team members' exposure to bodies of casualties as much as you can (Center for the Study of Traumatic Stress, n.d.).
- Establish respite areas that visually separate workers from the scene and the public. At longer operations, establish an area where responders can shower, eat, change clothes, and sleep.

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- Implement flexible schedules for responders who have experienced direct impacts of an event. This can help them balance home and response duties.
- Reduce noise as much as possible by providing earplugs, noise mufflers, or telephone headsets.
- Mitigate the effects of extreme temperatures through the use of protective clothing, proper hydration, and frequent breaks.
- Ensure that lighting is sufficient, adjustable, and in good working order.
- Lessen the impact of odors and tastes and protect workers' breathing by supplying face masks and respirators.
- Provide security for staff at facilities or sites in dangerous areas, including escorts for workers going to and from their vehicles.
- Provide mobile phones for workers in dangerous environments. Ensure that staff know whom to call when problems arise.



AFTER THE CRISIS

The ending of the disaster assignment, whether it involved immediate response or long-term recovery work, can be a period of mixed emotions for responders. While there may be some relief that the disaster operation is ending, there is often a sense of loss and "letdown," with some difficulty making the transition back into family life and regular work. Following are some steps that can help ease the transition for responders.

MINIMIZING STRESS FOR WORKERS AFTER THE CRISIS

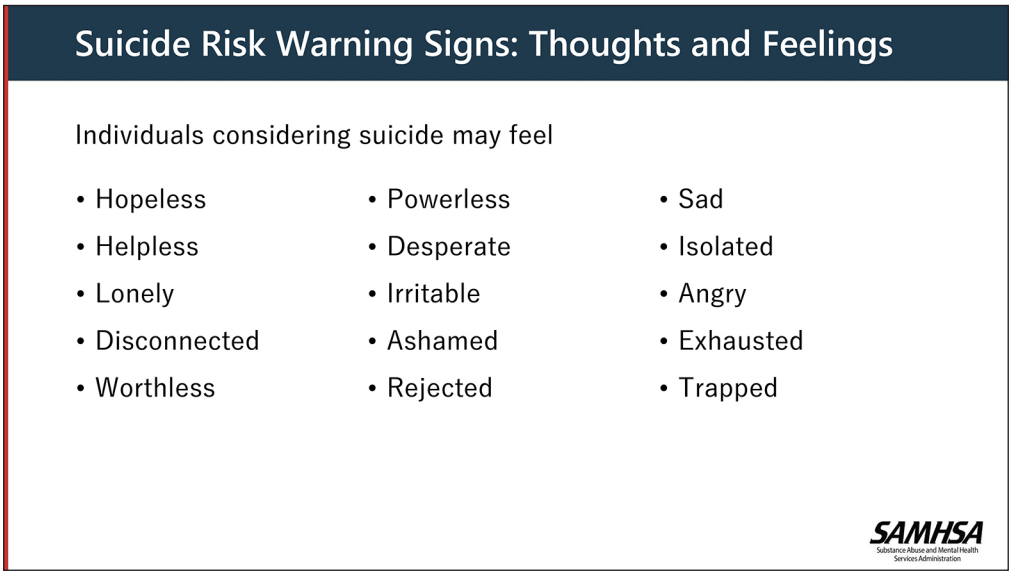
- Allow time off for responders who have experienced personal trauma or loss. Transition these individuals back into the organization by initially assigning them to less stressful jobs or tasks.
- Develop protocols to provide responders with counseling so they can address the emotional aspects of their experience.
- Institute exit interviews and/or seminars to help responders put their experiences in perspective and to validate what they have seen, done, thought, and felt.
- Provide educational in-services or workshops on stress management and self-care.
- Offer group self-care activities and acknowledgments.

IV. MANAGING PERSONAL CRISES/RISK OF SUICIDE

From 2018 to 2020, suicide was the 11th leading cause of death among people of all ages in the United States and the second among 25- to 34-year-olds (Centers for Disease Control and Prevention [CDC], 2021; CDC, 2020). Responders in some fields may be at increased risk of thinking about, planning, and attempting suicide relative to people working in other fields. This is due to their emotionally demanding work often involving high-stress scenarios. For example, more law enforcement officers die by suicide than from being killed in the line of duty (Heyman, Dill, & Douglas, 2018). Stigma within the response community may also contribute; a 2020 Congressional Research Service report pointed to one study that found that first responders felt they could not "show weakness," which was how they saw seeking help for mental health problems, without risking losing their jobs (Jones, Agud, & McSweeney, 2020; as cited in Duff, Gallagher, James, & Cornell, 2020).

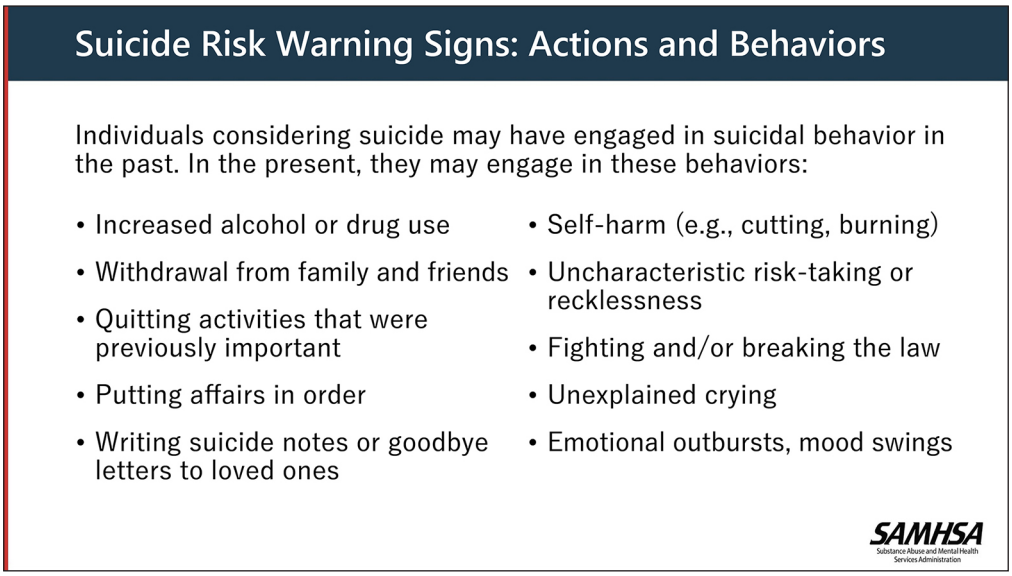
Over time, the stressors responders face in their work can combine with other factors to lead to mental health conditions or worsen conditions responders had before starting their work (Duff et al., 2020). Because response work can be stressful, peer-to-peer support can be especially useful. In peer-to-peer support, pairs or small groups of responders support each other through regular meetings and sometimes through structured methods. Peer-to-peer support helps in part because people who have worked or volunteered in the same role have deep understanding of the nature and demands of the role. This type of support also helps reduce stigma, as responders may learn that their peers have gone through struggles similar to theirs. It can be a way to build mentoring and worker development into the response experience. Through peer-to-peer support, responders and their team members have an opportunity to notice warning signs of risk of suicide, which can be expressed through thoughts, feelings, actions, and behaviors, as shown in Figures 3 and 4.

Figure 3. Warning Signs—Thoughts and Feelings



Most people who go on to take their lives exhibit one or more warning signs beforehand, either through what they say or what they do, so it is important to know common warning signs in others and yourself. Be an active, empathetic listener, and lead by example. Provide as much support and assistance as you can in the moment and be sure to facilitate any possible contacts to other people or groups that could assist.

Figure 4. Warning Signs—Actions and Behaviors



In addition to peer-to-peer support, responders can also engage in activities to build resilience and create positive coping strategies. Resiliency is an ability to recover from or adjust to adversity, misfortune, or change. By learning ways to be resilient, responders can learn how to adapt to a variety of sources of stress.

Seeking help can be difficult, but reaching out is critical. Below are a few positive coping methods that responders can use:

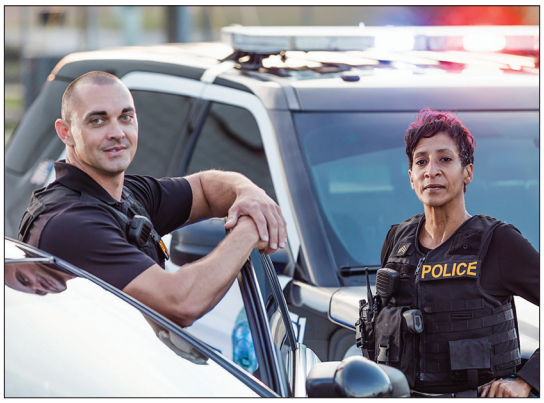
- Talking to a colleague, friend, or family member
- Reaching out to peer and organizational supports (e.g., other workers or volunteers on the response team, community or religious leaders or groups, employee assistance programs)
- Accessing resources from the Substance Abuse and Mental Health Services Administration Disaster Technical Assistance Center, such as the ones included in the Resources section of this guide

If you're concerned about someone else or yourself, free help is available. You can call the 988 Suicide and Crisis Lifeline by dialing 988 or 1–800–273–TALK (1–800–273–8255). The Lifeline also offers help in Spanish and via online chat. TTY users can use a relay service to contact the Lifeline or dial 711 and then 988. Learn more about the Lifeline and other sources of support in the Resources section of this guide.

- Taking courses on stress management and Psychological First Aid
- Starting a personal exercise routine or taking classes in yoga—some are available that are designed specifically for first responders
- Completing a resilience training course or webinar
- Meditating or using breathing exercises to be present and manage stress

V. SELF-CARE FOR RESPONDERS

Supervisors, managers, workers, and volunteers must assume responsibility for their own self-care. Part of self-care is self-awareness, a skill that involves recognizing and heeding early warning signs of stress. There are many things you can do to mitigate and manage stress before, during, and after a crisis. Peace of mind and concentration can be enhanced if you are prepared. This section outlines some ideas that can be put in place to help you and your family cope with whatever emergencies may occur.



SELF-MONITOR FOR SIGNS OF STRESS

Be familiar with the signs of too much stress. Common stress reactions are provided in the first part of this guide, Understanding the Stress Cycle. Usually, the signs and symptoms simply suggest a need for corrective action to limit the impact of a stressful situation. Information is also provided in the first section of the guide about when stress becomes chronic or traumatic.

Whether you are a supervisor or worker, you may not be the best judge of your own stress as you become intensely involved in disaster work. Therefore, a buddy system, where coworkers agree to keep an eye on each other's stress reactions, can be important, as can other types of peer-to-peer support.

Before the Crisis: Preparation Begins at Home

Your entire family should be involved in developing and maintaining a family emergency preparedness plan. Excellent materials on home emergency preparedness are available from DHS, FEMA, local chapters of the American Red Cross, and local offices of emergency services.

For more information on personal preparedness, go to https://www.ready.gov.

MINIMIZING YOUR STRESS BEFORE THE CRISIS

- Post a weekly schedule at home and know the daily location of family members so that they can be located or contacted in an emergency.
- Develop a home safety and evacuation plan, and review and practice it regularly.
- Create childcare and pet care plans.
- Design a plan for how family members will contact each other during a crisis and include a backup plan or meeting place in case phone or internet service is disrupted.
- Familiarize yourself with the disaster plans in your children's schools and in each family member's workplace.
- Gather and store emergency supplies including food, water, first aid kits, a battery-operated radio, flashlights, and extra batteries.
- Prepare an emergency bag in advance in case you are deployed.
- Create a "go bag" for family members and pets in case of evacuation. Include a supply of medications that may be difficult to refill during or immediately following a disaster.
- Take advantage of any pre-disaster training and orientation that your organization provides, including training on cultural awareness and humility.

During the Crisis

Responders commonly experience stress during a disaster operation, but remember that stress can be identified and managed. There are many steps you can take to help minimize stress during a crisis.

MINIMIZING YOUR STRESS DURING THE CRISIS

- Adhere to established safety policies and procedures.
- Encourage and support coworkers.
- Recognize that "not having enough to do" or "waiting" are expected parts of disaster behavioral health response.
- Take regular breaks whenever you experience troubling incidents and after each work shift. Use time off to decompress.
- Practice relaxation techniques such as exercise—a walk or baseball or basketball game with coworkers can be as helpful as a run or a gym session. Meditation, deep breathing, and stretching may also be helpful.
- Eat regular, nutritious meals and get enough sleep. Avoid alcohol, tobacco, drugs, and excess caffeine.
- Stay in contact with your family and friends.
- Pace yourself between low- and high-stress activities.
- Participate in peer-to-peer support programs if you think they would be helpful to you and if they're available.

After the Crisis

You may finish a disaster response project in a state of physical and emotional fatigue, and you may have mixed feelings about giving up your disaster role. Be aware that you may experience some "letdown" when the disaster operation is over. It is important to give yourself time to stop and reflect on the experience and how it changed you. Following are some steps that may be helpful in the weeks after crisis response.

MINIMIZING YOUR STRESS AFTER THE CRISIS

- If possible, participate in an after-action review to consider how your team performed on the assignment and how to improve in the future.
- Reconnect with your family.
- Have a physical checkup.
- Continue normal leisure activities. Stay involved with your hobbies and interests.
- Consider stress management activities such as exercise, meditation, acupuncture, and massage therapy.
- Draw upon your spirituality and personal beliefs.
- Avoid using alcohol, tobacco, or drugs to cope with stress. Seek professional substance use disorder treatment if necessary.
- Speak with a counselor if it would be helpful. Workplace counseling units and employee assistance programs may be good, convenient, and affordable sources of support.

VI. SUMMARY

Stress management is key to emergency management. Successful stress management is built on prevention and planning, a solid understanding of roles and responsibilities, support for colleagues, good self-care, and seeking help when needed.



Responders may be repeatedly exposed to unique stressors during the course of their work. Successful implementation of any stress management plan requires overcoming some obstacles and barriers, including priority setting, resource allocation, organizational culture, and stigma.

Taking action to prevent and reduce stress is a critical element of effective emergency management and supports responders in continuing to do their important work to foster community healing and recovery. Figure 5 offers a summary of ways to mitigate and manage stress.

Figure 5. Summary—Individual Approaches for Stress Prevention and Management

KEY FOCUS AREA	SUGGESTIONS
Management of Workload	◆ Set task priority levels with realistic work plans. ◆ Recognize that "not having enough to do" or "waiting" is an expected part of disaster behavioral health response.
Balanced Lifestyle	◆ Eat nutritious food and stay hydrated, avoiding excess caffeine, alcohol, and tobacco. ◆ Get adequate sleep and rest, especially on longer assignments. ◆ Get physical exercise. ◆ Maintain contact and connection with primary social supports.
Stress Reduction Strategies	◆ Reduce physical tension by using familiar personal strategies (e.g., take deep breaths, gentle stretching, meditation, wash face and hands, progressive relaxation). ◆ Pace yourself between low- and high-stress activities. ◆ Use time off to decompress and "recharge batteries" (e.g., get a good meal, watch TV, exercise, read a novel, listen to music, take a bath, talk to family). ◆ Talk about emotions and reactions with fellow responders during appropriate times.
Self-awareness	◆ Recognize and heed early warning signs of stress reactions. ◆ Accept that you may not be able to self-assess problematic stress reactions. ◆ Recognize that overidentification with or feeling overwhelmed by victims' and families' grief and trauma may signal a need for support and consultation. ◆ Understand the differences between professional helping relationships and friendships to help maintain appropriate roles and boundaries. ◆ Examine personal prejudices and cultural stereotypes. ◆ Recognize when your own experience with trauma or your personal history may interfere with effectiveness. ◆ Be aware of personal vulnerabilities and emotional reactions and the importance of team and supervisor support.

10 TIPS FOR EFFECTIVE STRESS MANAGEMENT

1. Familiarize yourself with signs of stress.
2. Get enough rest, exercise regularly, and maintain a healthy diet.
3. Have a life outside of your job.
4. Avoid tobacco, alcohol, drugs, and excess caffeine.
5. Draw strength from faith, friends, and family.
6. Maintain your sense of humor.
7. Have a personal preparedness plan.
8. Participate in training offered at your workplace.
9. Get a regular physical checkup.
10. Ask for help if you need it.



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VIII. SELECTED RESOURCES

SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION (SAMHSA) RESOURCES

SAMHSA Disaster Technical Assistance Center (DTAC)
Toll-free: 1–800–308–3515
Email: dtac@samhsa.hhs.gov
Website: https://www.samhsa.gov/dtac
Website portal for responders: https://www.samhsa.gov/dtac/disaster-responders
Online first responder training courses: https://www.samhsa.gov/dtac/education-training

- Creating Safe Scenes, a 1.5-hour course about how first responders can assist individuals in crisis: https://www.samhsa.gov/dtac/creating-safe-scenes-training-course
- First Response, a 1-hour course about the impact of the opioid crisis on first responders: https://www.samhsa.gov/dtac/first-responders-training

- Service to Self, a 1-hour course for fire and emergency medical services personnel about organizational and individual stress: https://www.samhsa.gov/dtac/service-to-self-training-course
- Shield of Resilience, a 1-hour course to help law enforcement officers understand and address the stress in their profession: https://www.samhsa.gov/dtac/shield-resilience-training-course

SAMHSA Disaster Distress Helpline
Toll-free talk or text: 1–800–985–5990
Español: Llama o envía un mensaje de texto 1–800–985–5990 presiona "2".
American Sign Language (ASL): Click on the "ASL Now" button on the website or call 1–800–985–5990 from your videophone.
Website: https://disasterdistress.samhsa.gov

SAMHSA Disaster Mobile App
Website: https://store.samhsa.gov/product/samhsa-disaster

OTHER RESOURCES

American Red Cross
Disaster preparedness: https://www.redcross.org/get-help/how-to-prepare-for-emergencies.html

Centers for Disease Control and Prevention
Emergency preparedness and response: https://emergency.cdc.gov

Federal Emergency Management Agency
Website: https://www.fema.gov

National Institute of Mental Health
Website: https://www.nimh.nih.gov
Coping With Traumatic Events: https://www.nimh.nih.gov/health/topics/coping-with-traumatic-events

Ready.gov
Website: https://www.ready.gov

988 Suicide & Crisis Lifeline
Call or text: 988
Chat: 988lifeline.org
Línea de Prevención del Suicidio y Crisis (español): 988
For TTY users: Use your preferred relay service or dial 711 and then 988.
Website: https://988lifeline.org
Website (español): https://988lifeline.org/help-yourself/en-espanol

SAMHSA

Substance Abuse and Mental Health
Services Administration

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