Returning Home After Disaster Relief Work

A Post-Deployment Guide for Emergency and Disaster Response Workers
Whether your disaster relief assignment took you to the front lines or behind the scenes, you have made an enormous contribution to our fellow Americans. You have faced difficult challenges to help people in a time of extraordinary need. You have experienced rare and rewarding opportunities that have proven to be uniquely stressful. The effects of that stress can cause difficulties as you reenter the workplace. This brochure contains useful information to ease your transition and enhance your return to your usual work routine.

Before Returning to Work
During your disaster response and recovery efforts, you most likely worked under less than desirable conditions while taking care of others. Before you return to your normal duties, you will want to take care of yourself by making sure that all your basic needs are met. These include the following:

- Maintaining a healthy diet, routine exercise, adequate rest/sleep
- Spending time with family and friends
- Paying attention to health concerns
- Meeting neglected daily personal tasks (e.g., pay bills, mow lawn, shop for groceries)
- Reflecting upon what the experience has meant personally and professionally
- Getting involved in personal and family preparedness.

Signs of Stress
The following is a list that you may find helpful in identifying signs of stress in yourself or others who have had experiences similar to yours:

- Anxiety, fear
- Grief, guilt, self-doubt, sadness
- Irritability, anger, resentment, increased conflicts with friends/family
- Increased use of alcohol or other drugs
- Feeling overwhelmed, hopeless, despair, depressed
- Anticipation of harm to self or others; isolation or social withdrawal
- Insomnia
- Gait change
- Hyper-vigilance; startle reactions
- Crying easily
- Gallows/morbid humor
- Ritualistic behavior
- Memory loss, anomia (i.e., difficulty naming objects or people)
- Calculation difficulties; decisionmaking difficulties
- Confusion in general and/or confusing trivial with major issues
- Concentration problems/distractibility
- Reduced attention span and/or preoccupation with disaster
- Recurring dreams or nightmares
- Fatigue
- Nausea
- Fine motor tremors
- Tics or muscle twitches
- Paresthesia (e.g., numbness and tingling in extremities)
- Profuse sweating
- Dizziness
- Stomach or gastrointestinal upset
- Heart Palpitations/fluttering
- Choking or smothering sensation
- Intrusive thoughts
- Relationship problems
- Job/school-related problems
- Decreased libido/sexual interest
- Appetite change
- Overly critical, blaming
- Decreased immune response.

Expecting the Unexpected
Upon returning to your routine duties, you may notice changes in yourself, your coworkers, or your work environment. The following are a few examples of potential difficulties you may face and some tips on how to overcome them.

Pace change—The disaster environment often moves at a pace that is much faster than the normal workplace. After working in a disaster response environment, this begins to feel normal. When returning to normal work, it may appear that people are moving at a much slower pace than you remember. It is easy to misinterpret this as laziness or lack of caring or motivation. Remember that it is probably you who has changed, not them. Be slow to judge, criticize, or make assumptions.

Unrelenting fatigue—Even with what seems like sufficient sleep, you may experience chronic fatigue. This may be a result of several factors. You may need more rest than you realize.
Sometimes chronic stress results in never feeling rested. Chronic fatigue may also be a result of a medical condition. See a doctor if chronic fatigue persists.

_Cynicism_— Typically, during disaster work you see the best and the worst in individuals and systems and it is easy to become cynical. This is expected. These feelings often diminish over time once you are able to focus on the positive results of your work.

_Dissatisfaction with routine work_— It is very rewarding to be involved, directly or indirectly, in saving lives and protecting our fellow citizen’s health and safety. Most work does not provide such dramatic and immediate reinforcement. You might start seeing your daily work routine as lacking meaning and satisfaction. These feelings are normal. To counter these feelings, incorporate the positive things you have learned during disaster response into your personal and professional life.

_Easily evoked emotions_— Sometimes the combination of intense experiences, fatigue, and/or stress leaves you especially vulnerable to unexpected emotions. For example, you may cry easily, be quick to anger, or experience dramatic mood swings. These are normal reactions that typically subside over time. In the meantime, be aware of your reactions, discuss your experiences, and be sensitive of comments that might be hurtful or upsetting to others.

_Relating your experiences_— While you may want to share your experiences with others, you may be unsure if it is appropriate. This is normal. Exercise care when discussing your disaster relief experiences, especially graphic and disturbing topics while in the presence of children or others who are emotionally vulnerable.

**Difficulties with colleagues and supervisors**— You may not experience a welcome back from your colleagues and supervisors that meets your expectations. Coworkers may resent having to assume additional workloads, may not understand the difficulty of the work you did, or may resent the recognition that you are receiving as a responder. In response to any negative feelings, express appreciation for their support during your deployment and take care in relating your experiences.

_Cultural issues_— Culture affects how an individual reacts to trauma. For example, showing emotion, discussing problems with others, or touching is acceptable with some groups and not with others. On the basis of this understanding, it is important to appreciate and respect these differences.

**When to Seek Help**

Remember, stress is a normal reaction to abnormal situations like disasters. If you experience the following signs of persistent or severe stress, seek help from a licensed mental health professional.

- Disorientation (e.g., dazed, memory loss, unable to give date/time or recall recent events)
- Depression (e.g., pervasive feeling of hopelessness and despair, withdrawal from others)
- Anxiety (e.g., constantly on edge, restless, obsessive fear of another disaster)
- Acute psychiatric symptoms (e.g., hearing voices, seeing visions, delusional thinking)
- Inability to care for self (e.g., not eating, bathing, changing clothing, or handling daily life)
- Suicidal or homicidal thoughts or plans
- Problematic use of alcohol or drugs
- Domestic violence, child abuse, or elder abuse

Sometimes it may be difficult to determine if what you are experiencing is a result of a physical illness or stress (or both). In some disaster situations, workers may have been exposed to infectious disease and/or environmental exposure that may result in signs and symptoms similar to stress. When in doubt, get an evaluation from a health care professional.

**Coping Suggestions**

Find ways to use your disaster experience to better understand yourself— You have had an experience/opportunity that not many people have had. During that experience you undoubtedly learned things about yourself. What stresses you most? What were you able to handle in ways that surprised yourself? What unrecognized skills/talents did you discover? What did you learn about how you function in extreme environments? Use the experience to better understand yourself.

Find ways to use disaster experience to enhance your job function— Your normal job role probably does not involve disaster response. What skills/knowledge did you bring from your normal role that was helpful? What skills/knowledge/perspective did you gain from the disaster deployment that can enhance your normal job function? Did your experience point you in directions in which you would like to move professionally or make you cognizant of assignments you would like to seek or avoid?
Use the experience to change your life in positive ways—Few of us get the opportunity and privilege of serving and being with individuals and communities in the hours of their greatest need. It is indeed a privilege. With that privilege comes responsibilities. One is the responsibility to be as well prepared as possible to be optimally helpful. If there is the potential for being deployed again, take all opportunities available to become as prepared as possible.

There is also a responsibility to use this unique experience as a way of honoring and bearing witness to the loss and suffering of others, to use the experience to positively influence our lives. Are our priorities and values what they should be? Are we as prepared for adversity as we should be? Do we value our family, friends, and colleagues as we should? When we see others whose lives have been turned upside down, lives prematurely ended, and lives forever changed through loss, we are well served by reassessing our own values and priorities.

Getting Help

If you feel you need additional information, you may find this list of resources to be helpful.

SAMHSA Resources

Information Clearinghouses
SAMHSA’s Health Information Network (SHIN)
P.O. Box 2345
Rockville, MD 20847-2345
Email: SHIN@samhsa.hhs.gov
(877) SAMHSA-7 or (877) 726-4727
(800) 487-4889 (TTY)
(240) 221-4292 (FAX)
www.samhsa.gov/shin

Disaster Technical Assistance Center (DTAC)
www.mentalhealth.samhsa.gov/dtac

Treatment Locators
Mental Health Services Locator
(800) 789-2647 (English and Español)
(866) 889-2647 (TDD)
www.mentalhealth.samhsa.gov/databases

Substance Abuse Treatment Facility Locator
(800) 662-HELP (4357) (Toll-Free, 24-Hour English and Español Treatment Referral Service)
(800) 487-4889 (TDD)
www.findtreatment.samhsa.gov

Hotlines
National Suicide Prevention Lifeline
(800) 273-TALK (8255)
(800) 799-4889 (TDD)
SuicidePreventionLifeline.org

Other Federal Resources

Centers for Disease Control and Prevention—Mental Health
www.bt.cdc.gov/mentalhealth/

Federal Occupational Health Employee Assistance Program for Federal and Federalized Employees
http://www.foh4you.com or
(800) 222-0364
(888) 262-7848 (TTY)

National Center for Post-Traumatic Stress Disorder (PTSD)
www.ptsd.va.gov/

U.S. Department of Health and Human Services—Employee Assistance Program
(202) 690-8229
HHSEAP@hhs.gov
Disaster behavioral health is the provision of mental health, substance abuse, and stress management services to disaster survivors and responders.

**Behavioral Health Concerns Affecting Survivors and Responders:**

Following an emergency event, it is common for individuals and families in and around the affected region to experience distress and anxiety about safety, health, and recovery. Previous exposure to large scale events, such as a severe hurricane or flood, may place residents and responders who experience a new disaster at greater risk for adverse stress reactions. People may display symptoms and reactions such as:

- Emotional symptoms such as irritability or excessive sadness.
- Cognitive dysfunction such as difficulty making decisions or following directions.
- Physical symptoms such as headache, stomach pain, or difficulty breathing.
- Behavioral reactions such as consuming more alcohol or interpersonal conflict.
- Failure to adhere to needed physical or psychiatric medication needs.

Other factors that can influence how people respond to disaster include:

- Residents of disaster affected areas may be displaced, living in temporary emergency shelters, and separated from their usual support systems.
- Circumstances may make it difficult to learn the status of recovery efforts or to find out the condition of friends, family members, and communities.
- The exposure of disaster responders and volunteers to widespread destruction, the injury or death of others, or to hazardous materials may result in distress or a need for support.

**The Need for Disaster Behavioral Health Capabilities:**

Natural disasters, terrorist attacks, and other emergencies of the last several years, as well as the growing research on the impacts of these events, have highlighted the need for behavioral health capabilities:

- Research shows a link between exposure to trauma and the onset of other health care needs immediately following an emergency event, and often for many years after.
- Studies correlate trauma with later cardiovascular, musculoskeletal, and neurological illness, as well as psychiatric diagnoses such as Post-Traumatic Stress Disorder (PTSD), anxiety, depression, and substance abuse disorders.
- Costs associated with the treatment of those problems also increase.

**Disaster Behavioral Health Response:**

Behavioral health professionals trained in disaster response often work in shelters, medical and psychiatric facilities, or may engage in outreach and educational activities in communities to facilitate the resiliency and recovery of survivors and responders by:

- Providing psycho-education and information on physical and environmental hazards.
- Engaging in supportive listening.
- Screening individuals who are at greater risk for longer-term adverse reactions.
- Ensuring referral to appropriate medical, psychological, or tangible services.