

# Disaster Behavioral Health: Resources at Your Fingertips

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## What is Disaster Behavioral Health?

When disasters strike, the ripple effects can be significant. Survivors may be injured or displaced or may have loved ones in similar situations. The emotional, physical, and financial tolls can be jarring, and no one in the community is immune. Disaster behavioral health (DBH) includes the provision of mental health, substance abuse, and stress management services to disaster survivors and responders (the [Administration for Strategic Preparedness and Response \[ASPR\], n.d.](#)). Incorporating DBH into all phases of emergency management can ensure resident and responder preparedness, an effective, compassionate response effort, and a more resilient community moving forward.

This ASPR Technical Resources, Assistance Center, and Information Exchange (TRACIE) document provides information on and links to select DBH programs and resources. This is not meant to be a comprehensive list, but a selection of programs and resources that can be of immediate use to emergency health care providers, emergency management stakeholders, and other professionals and survivors affected by naturally occurring or human-caused incidents. Access the [ASPR TRACIE DBH Resources Page](#) for more information.

If your jurisdiction or health care entity has a DBH plan or similar resource that you would like ASPR TRACIE to consider for inclusion, please send it to [askasprtracie@hhs.gov](mailto:askasprtracie@hhs.gov).

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## A Note for Leaders in Emergency Health Care

During and just after a disaster or other type of emergency, it is important to remember that some of your employees may have literally “lost everything.” In 2016, in response to significant flooding in the Baton Rouge area, ASPR TRACIE worked closely with subject matter experts to publish [Tips for Retaining and Caring for Staff after a Disaster](#). In this document (which was updated in 2023), we remind readers that on-site DBH professionals (e.g., a member of your facility’s employee assistance program [EAP] who has been trained in [Psychological First Aid](#)) can help staff get through the initial shock of the event, and provide them with additional resources and services as necessary. The online course [Building Workforce Resilience through the Practice of Psychological First Aid](#) can also help leaders guide their teams through stressful disaster response operations.

It is equally important to promote good mental health practices to your team in non-emergency times. For example, the [2016 National Survey on EMS Mental Health Services](#) (the most recent survey conducted by the National Association of Emergency Medical Technicians) found that while nearly 100% of respondents said their agency had a policy regarding drug and alcohol use, only a quarter noted that their agencies offered programs that could assist those suffering from substance abuse and addiction. Half of the agencies surveyed offered occupational health and wellness programs with on-premises fitness centers and tobacco cessation programs being the top two services offered. Just one fifth of these programs offered classes in stress management, and approximately one-third of respondents said they were not allowed to access mental health services during work hours.

## How the COVID-19 Pandemic Changed the DBH Landscape

When the nation shut down in March 2020, and healthcare workers were subject to immeasurable levels of stress, compassion fatigue, and burnout, the entire DBH landscape shifted. Communities and hospitals were rocked by loss. Patient surges overwhelmed health care workers (who were also dealing with the fear of catching/transmitting an unknown virus, arranging child and elder care when those services were shut down, and learning about and managing shortages of personal protective equipment). In many areas of the country, healthcare organizations “stepped up” and did what they could to bolster staff resilience, but this varied, and it will take years to fully realize the true financial and mental health costs of the COVID-19 pandemic.

## Related ASPR TRACIE Resources

- [ASPR TRACIE Mini Modules to Relieve Stress for Health Care Workers](#)
- [COVID-19 Behavioral Health Resources Collection](#)
- [Issue 12: COVID-19 and Healthcare Professional Stress and Resilience](#)
- [ASPR TRACIE Responder Safety and Health Topic Collection](#)

## General DBH Resources for Emergency Medical Responders

DBH staff are integrated into preparedness and response activities throughout many state agencies and community organizations. This can make it easier for you to access their services before, during, and after an incident more easily and with less stigma. During non-emergency times, or prior to deploying, you and your colleagues can learn more about the negative behavioral health effects of disasters and how to respond to people experiencing these effects. These agencies and organizations (listed alphabetically) have developed helpful resources.

FEMA hosts a [Recovery and Resilience Resource Library](#) that includes links to related fact sheets, tools, videos, reports, and partner resources. ASPR also developed key fact sheets and reports, including:

- [American Indian and Alaskan Native Disaster Preparedness Resource](#)
- [Behavioral Health Tips for Responders: Maintaining Calm at a POD](#)
- [First Responder Communication Strategies: Steps for Assisting and Directing People in Crisis](#)
- [Disaster Behavioral Health](#)
- [Disaster Behavioral Health: Current Assets and Capabilities](#)
- [Disaster Response for Homeless Individuals and Families: A Trauma-Informed Approach](#)
- [Planning for Psychiatric Patient Movement During Emergencies and Disasters](#)
- Promoting Stress Management for Pregnant Women during the Zika Virus Disease Outbreak: A Resource for Healthcare Providers

The ASPR TRACIE [Mental/Behavioral Health Topic Collection](#) addresses the effects of post-disaster mental and behavioral health-related challenges on the health care system, while our [COVID-19 Behavioral Health Resource Collection](#) was created to help healthcare providers, caregivers, and the general population prepare for and manage the negative behavioral effects that can accompany a public health emergency. The [Responder Safety and Health Topic Collection](#) focuses on health care worker safety strategies (e.g., preventing fatigue, ensuring the availability and correct use of personal protective equipment) and maintaining behavioral health (e.g., working through stress and preventing/addressing compassion fatigue).

The [Center for the Study of Traumatic Stress](#) has developed a set of [factsheets](#) that can be searched by keyword, role, and topic. Their website also includes links to [education and training](#) resources (e.g., conferences, videos, and presentations); recent and ongoing [research efforts](#); and other [resources](#) (e.g., journal articles, newsletters, reports, and book chapters).

The [Skills for Psychological Recovery: Field Operations Guide](#) discusses skills and support for health professionals assisting survivors coping with stress after a disaster.

The U.S. Department of Veterans Affairs runs the [National Center for Posttraumatic Stress Disorder \(PTSD\)](#). Links to fact sheets, guidelines, research, and interventions are provided under the [Disasters and Mass Violence](#) tab.

The City of New York Department of Health and Mental Hygiene developed a resource on [Providing Psychological First Aid](#) for health care providers to support and encourage calmness and self-efficacy for survivors after an emergency.

The Minnesota Department of Health's [Disaster Mental and Behavioral Health and COVID-19](#) webpage contains links to resources on psychological first aid, adult, child and family resources, and disaster planning.

Maine's Department of Health and Human Services established the [Behavioral Health Resources for Those Affected by the Violence in Lewiston](#) page, which includes links to information for general help coping with a traumatic event and resources for: kids, families, and caregivers; those affected substance use; Veterans; the deaf and hard of hearing; interpretation services; organizations and communities; and providers. They also created the [Supporting Patient and Provider Behavioral Health in Response to Lewiston Tragedy](#) page specifically for health clinicians and providers.

The [National Child Traumatic Stress Network](#) includes resources related to [disasters](#), [terrorism](#) and violence, and [school violence](#). Their Psychological First Aid curriculum is available in several languages and for a variety of professional and paraprofessional audiences on their website.

The Substance Abuse and Mental Health Administration (SAMHSA)'s [Publications and Digital Products page](#) allows responders and community members to download DBH-related publications geared towards varied audiences (e.g., responders, administrators, caregivers, young adults, family members of responders, and teachers). These include, but are not limited to:

- [Tips for Survivors of a Disaster or Traumatic Event: What to Expect in Your Personal, Family, Work, and Financial Life](#)
- [Tips for Survivors of a Disaster or Traumatic Event: Managing Stress](#)
- [Tips for Survivors of a Disaster or Other Traumatic Event: College Students](#)
- [Tips for Talking with and Helping Children and Youth Cope After a Disaster or Traumatic Event](#)

The SAMHSA Disaster Technical Assistance Center's (DTAC) [Disaster Behavioral Health Information Series Resource Center](#) includes links to annotated bibliographies and other resources geared towards a variety of audiences (e.g., responders and survivors) and cover a range of DBH topics. Responders can share links to these tip sheets, webinars, and podcasts with survivors and each other as practical.

The [Multi-State Disaster Behavioral Health Consortium](#) works with the National Association of State Mental Health Program Directors to provide states with a forum for promoting dissemination and sharing of response and recovery plans; standardized training and technical assistance; integration of DBH services into all phases of emergency management; and collaboration among federal, state and local disaster response agencies.

## **DBH Tools and Planning Guidance**

In 2016, ASPR released an updated version of the [U.S. Department of Health and Human Services Disaster Behavioral Health Concept of Operations](#). This document outlines how HHS prepares for the behavioral health effects of large-scale emergencies and disasters and transitions from day-to-day operations to provide coordinated response and recovery activities. Their [Disaster Behavioral Health Capacity Assessment Tool](#) allows state and local agencies and provider organizations to assess and integrate DBH into all planning, preparedness, response and recovery efforts. The tool can help users identify strengths and gaps and how to address them. ASPR's [Disaster Behavioral Health Coalition Guidance](#) can help health care coalitions coordinate DBH care; it includes a worksheet specific to member recruitment and coalition assessment that can be used to identify gaps. [Building Workforce Resilience through the Practice of Psychological First Aid – A Course for Supervisors and Leaders](#) provides participants with a solid understanding of Psychological First Aid, explains why it is important, and teaches strategies for offering it to staff. In 2020, ASPR created the [Emergency Responder Self-Care Plan: Behavioral Health PPE](#), a fillable form that includes steps people can take to stay healthy and fit for duty while caring for others.

[The Behavioral Health Emergency Plan Template for Health Care Organizations](#) was created by the State of Missouri but can be used by other hospitals and health care providers interested in integrating behavioral/mental health functions into their emergency plans.

SAMHSA also offers the [Disaster Planning Handbook for Behavioral Health Service Programs](#) document that can help state and local mental health public officials create emergency preparedness plans for human-caused or natural disasters. The guide stresses integrating DBH services and conducting epidemiological surveillance.

SAMHSA DTAC offers the following [Promising Practices in Disaster Behavioral Health Planning](#) webinars (available on YouTube):

- [Introduction to Promising Practices in Disaster Behavioral Health Planning](#)
- [Financials and Administration Operations](#)
- [Building Effective Partnerships](#)
- [Implementing Your Disaster Behavioral Health Plan](#)
- [Assessing Services and Information](#)
- [Logistical Support](#)

- [Legal and Regulatory Authority](#)
- [Integrating Your Disaster Behavioral Health Plan](#)
- [Plan Scalability](#)

The [Health Insurance Portability and Accountability Act \(HIPAA\)](#) protects the privacy of patients' health information (protected health information) but allows for the disclosure of information when necessary to treat a patient, to protect the nation's public health, and for other critical purposes. The [National Alliance on Mental Illness](#) explains [What HIPAA Means for Mental Illness](#) in *non-disaster* periods. The following resources explain how the HIPAA rule applies in times of emergency:

- [Health Insurance Portability and Accountability Act \(HIPAA\) Privacy Rule: A Guide for Law Enforcement](#)
- [Bulletin: HIPAA Privacy in Emergency Situations](#)
- [HIPAA Privacy Rule: Disclosures for Emergency Preparedness – A Decision Tool](#)
- [Health Information Privacy – Is HIPAA Privacy Rule Suspended during a National or Public Health Emergency?](#)

### Select State DBH Plans

The [State of California Disaster Behavioral Health Plan](#) provides a statewide approach to the mental/behavioral health disaster function and can help government and other agencies and organizations develop, revise, and implement their own mental/behavioral health disaster policies, plans and procedures.

The [Missouri Behavioral Health Emergency Plan Template for Health Care Organizations](#) is meant to assist hospitals and other health care providers in integrating behavioral / mental health functions into their emergency plans and incident command functions.

The [Nebraska Behavioral Health All-Hazards Disaster Response & Recovery Plan](#) provides a framework for organizing the behavioral health response to disasters to include addressing mental health and substance abuse issues, mitigating the severity of adverse psychological reactions and restoring social and psychological functioning for individuals, families, and communities.

SAMHSA's [Disaster Behavioral Health Planners Resource Portal](#) can help staff develop comprehensive DBH plans and includes links to related resources.

## Self-Care Resources: SAMHSA DTAC

As a responder, clinician, or other health care professional involved in disaster response, it can be easy to lose track of your own needs. You may not be eating or sleeping well or enough, and you may be worrying about what is happening at home in addition to focusing on your field assignment. You may notice yourself or your colleagues engaging in risky coping behaviors. And returning home after being deployed—to your loved ones and/or your “regular” job—may be difficult, requiring an adjustment period. Knowing what the cues are and how to plan for them prior to deployment and then manage them after an event can be helpful. [SAMHSA DTAC](#) links to many resources on self-care for responders on their [First Responders and Disaster Responders Resource Portal](#). These include (listed in alphabetical order):

[Adjusting to Life at Home: Tips for Families of Returning Disaster Responders](#)

[Helping Staff Manage Stress When Returning to Work: Tips for Survivors](#)

[Tips for Disaster Responders: Identifying Substance Misuse in the Responder Community](#)

[Tips for Disaster Responders: Preventing and Managing Stress](#)

[Tips for Disaster Responders: Returning to Work](#)

[Tips for Disaster Responders: Understanding Compassion Fatigue](#)

[Understanding Compassion Fatigue and Compassion Satisfaction: Tips for Disaster Responders Podcast](#)

## Self-Care Resources: Other Sources

ASPR TRACIE’s Responder Safety and Health Topic Collection contains a section on [Behavioral Health and Resilience](#) that provides links to resources on stress, resilience, and best practices.

The [National Association of Emergency Medical Technicians](#) (NAEMT) has a page dedicated to EMS Mental Health, where they share links to helpful resources.

The [Disaster Distress Helpline](#) is a free, confidential 24/7 hotline service that provides support for disaster survivors, responders, or anyone experiencing the stress of an event. Users can call or text 1-800-985-5990 and connect with trained and caring professionals from a network of crisis centers across the country. Helpline staff provide supportive counseling, including information on common stress reactions and healthy coping, as well as referrals to local disaster-related resources for follow-up care and support.

The [National Suicide Prevention Lifeline](#) (988) provides a free, confidential 24/7 crisis response hotline, plus information on getting help for yourself or someone else, learning more about suicide and suicide prevention, how to get involved, and professional initiatives and best practices.



## Training Programs

ASPR TRACIE [Disaster Behavioral Health Self Care for Health Care Workers Modules](#) are designed for healthcare workers in all settings, but primarily hospital-based providers, to use prior to a disaster to recognize and reduce stress levels and maintain resilience during recovery.

The webinar [Aftermath of Disaster: Addressing Trauma with Mental Health First Aid](#) teaches health care providers about providing mental health first to disaster survivors to bolster resilience.

ASPR recently published [A Guide to Compassionate and Empathic Dialogue](#), which offers information on communicating effectively and empathically with survivors after a disaster.

The [International Critical Incident Stress Foundation, Inc.](#) provides leadership, consultation, and education in comprehensive crisis intervention and DBH services to first responders and others. Their site includes links to online and in-person trainings on topics such as Critical Incident Stress Management with Children, Compassion Fatigue, Resilience Training, and Staff Support in the Healthcare Setting.

[Mental Health Aspects of an Emergency Response](#) is a webinar from the Centers for Disease Control and Prevention which addresses mental health and spiritual needs for survivors of disasters.

The [National Crime Victims Research & Treatment Center](#) at the Medical University of South Carolina provides training for clinical and research interns on a variety of specialized, evidence-based assessment, intervention, and treatment services for adults and children who are victims of violent crimes (including terrorist attacks and mass casualty incidents).

[Psychological First Aid](#), an online training and mobile app, developed by the National Child Traumatic Stress Network and the National Center for PTSD, is an evidence-informed training tool that can help responders build their skills to work effectively with disaster survivors. Training materials are offered in a variety of languages and to a variety of audiences (e.g., [Medical Reserve Corps members](#), [community religious professionals](#)).

A wide variety of training materials are available on the [SAMHSA DTAC Education and Training](#) page, including webcasts, web-based courses, and field events (e.g., conferences and workshops). Of note is the [SAMHSA Disaster App](#) that provides behavioral health responders with information about pre-deployment preparation, on the ground assistance and post-deployment resources via a smartphone app.

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