



Recovering emotionally from disaster



Disasters such as hurricanes, earthquakes, transportation accidents or wildfires are typically unexpected, sudden and overwhelming. For many people, there are no outwardly visible signs of physical injury, but there can be nonetheless an emotional toll. It is common for people who have experienced disaster to have strong emotional reactions. Understanding responses to distressing events can help you cope effectively with your feelings, thoughts and behaviors, and help you along the path to recovery.

What are common reactions and responses to disaster?

Following disaster, people frequently feel stunned, disoriented or unable to integrate distressing information. Once these initial reactions subside, people can experience a variety of thoughts and behaviors. Common responses can be:

- **Intense or unpredictable feelings.** You may be anxious, nervous, overwhelmed or grief-stricken. You may also feel more irritable or moody than usual.
- **Changes to thoughts and behavior patterns.** You might have repeated and vivid memories of the event. These memories may occur for no apparent reason and may lead to physical reactions such as rapid heartbeat or sweating. It may be difficult to concentrate or make decisions. Sleep and eating patterns also can be disrupted — some people may overeat and oversleep, while others experience a loss of sleep and loss of appetite.
- **Sensitivity to environmental factors.** Sirens, loud noises, burning smells or other environmental sensations may stimulate memories of the disaster creating heightened anxiety. These “triggers” may be accompanied by fears that the stressful event will be repeated.
- **Strained interpersonal relationships.** Increased conflict, such as more frequent disagreements with family members and coworkers, can occur. You might also become withdrawn, isolated or disengaged from your usual social activities.
- **Stress-related physical symptoms.** Headaches, nausea and chest pain may occur and could require medical attention. Preexisting medical conditions could be affected by disaster-related stress.

How do I cope?

Fortunately, research shows that most people are resilient and over time are able to bounce back from tragedy. It is common for people to experience stress in the immediate aftermath, but within a

few months most people are able to resume functioning as they did prior to the disaster. It is important to remember that resilience and recovery are the norm, not prolonged distress.

There are a number of steps you can take to build emotional well-being and gain a sense of control following a disaster, including the following:

- **Give yourself time to adjust.** Anticipate that this will be a difficult time in your life. Allow yourself to mourn the losses you have experienced and try to be patient with changes in your emotional state.
- **Ask for support from people who care about you and who will listen and empathize with your situation.** Social support is a key component to disaster recovery. Family and friends can be an important resource. You can find support and common ground from those who've also survived the disaster. You may also want to reach out to others not involved who may be able to provide greater support and objectivity.
- **Communicate your experience.** Express what you are feeling in whatever ways feel comfortable to you — such as talking with family or close friends, keeping a diary or engaging in a creative activity (e.g., drawing, molding clay, etc.).
- **Find a local support group led by appropriately trained and experienced professionals.** Support groups are frequently available for survivors. Group discussion can help you realize that you are not alone in your reactions and emotions. Support group meetings can be especially helpful for people with limited personal support systems.
- **Engage in healthy behaviors to enhance your ability to cope with excessive stress.** Eat well-balanced meals and get plenty of rest. If you experience ongoing difficulties with sleep, you may be able to find some relief through relaxation techniques. Avoid alcohol and drugs because they can be a numbing diversion that could detract from as well as delay active coping and moving forward from the disaster.
- **Establish or reestablish routines.** This can include eating meals at regular times, sleeping and waking on a regular cycle, or following an exercise program. Build in some positive routines to have something to look forward to during these distressing times, like pursuing a hobby, walking through an attractive park or neighborhood, or reading a good book.
- **Avoid making major life decisions.** Switching careers or jobs and other important decisions tend to be highly stressful in their own right and even harder to take on when you're recovering from a disaster.

In addition to these recommendations, APA's [Road to Resilience](#) brochure describes steps that you can take to build resilience — the process of adapting well in the face of adversity, trauma, tragedy, threats or significant sources of stress.

When should I seek professional help?

If you notice persistent feelings of distress or hopelessness and you feel like you are barely able to get through your daily responsibilities and activities, consult with a licensed mental health professional such as a psychologist. Psychologists are trained to help people address emotional reactions to disaster such as disbelief, stress, anxiety and grief and make a plan for moving forward. To find a psychologist in your area, visit APA's [Psychologist Locator](#).

Thanks to psychologists Kevin Rowell, PhD, and Rebecca Thomley, PsyD, for their assistance with this article.

Revised August 2013

Resources

Bonanno, G. A., Galea, S., Bucciarelli, A., & Vlahov, D. (2007). What predicts psychological resilience after disaster? The role of demographics, resources, and life stress. *Journal of Consulting and Clinical Psychology, 75* (5), 671. doi: 10.1037/0022-006X.75.5.671

Bonanno, G. A., Papa, A., & O'Neill, K. (2001). Loss and human resilience. *Applied and Preventive Psychology, 10* (3), 193-206. doi: 10.1016/S0962-1849(01)80014-7

Butler, L. D., Koopman, C., Azarow, J., Blasey, C. M., Magdalene, J. C., DiMiceli, S., ... & Spiegel, D. (2009). Psychosocial predictors of resilience after the September 11, 2001 terrorist attacks. *The Journal of Nervous and Mental Disease, 197* (4), 266-273. doi: 10.1097/NMD.0b013e31819d9334

Silver, R. C., Holman, E. A., McIntosh, D. N., Poulin, M., & Gil-Rivas, V. (2002). Nationwide longitudinal study of psychological responses to September 11. *JAMA: The Journal of the American Medical Association, 288* (10), 1235-1244. doi: 10.1001/jama.288.10.1235

The full text of articles from APA Help Center may be reproduced and distributed for noncommercial purposes with credit given to the American Psychological Association. Any electronic reproductions must link to the original article on the APA Help Center. Any exceptions to this, including excerpting, paraphrasing or reproduction in a commercial work, must be presented in writing to the [APA](#). Images from the APA Help Center may not be reproduced.

Find this article at:

<http://www.apa.org/helpcenter/recovering-disasters.aspx>