

Disaster Spiritual Care

During disasters, a diverse cross-section of people seek spiritual care. Religious leaders will be challenged to support and offer an open environment with respect to religious diversity, social diversity, and unfamiliar cultural and mass care settings. These tips can guide you as you help your congregants and the broader community during relief efforts and as they recover from the impact of a disaster. Pay attention to self-care as you care for others.

TIP SHEET

08

GUIDING PRINCIPLES FOR PROVIDING DISASTER SPIRITUAL CARE

- Offer spiritual care through the practice of presence and hospitality
- Meet, accept, and respect persons exactly as they are
- Do no harm – never evangelize, proselytize, or exploit a vulnerable person reacting to a traumatic event
- Nurture and encourage each person's own spiritual perspective to be a source of strength in difficult times
- Protect confidentiality
- Respect social diversity and cross-cultural settings
- Function at levels appropriate to your training and educational background
- Help to understand and normalize what has happened
- Know the available resources and assistance and mental health referral protocols

SPIRITUAL STRESS REACTIONS TO DISASTER

Many people will experience spiritual stress reactions during or after a disaster. Learn about these reactions, and how to recognize them in yourself and others. (See **NDIN Tip Sheet "Faith Communities & Disaster Mental Health"** to learn about different types of stress reactions and coping practices.) Some common spiritual stress reactions include:

- Reconsidering core tenets of religious beliefs
- Questioning justice and meaning
- Feeling far from previously held beliefs
- Suddenly turning away from or to God
- Losing a sense of meaning and purpose
- Feeling isolated from God and one's religious community
- Being angry at God, divine beings or spiritual leaders
- Feeling disconnected from familiar religious practices (prayer, ritual acts, sacred texts)

SPIRITUAL CARE BEST PRACTICES: SUPPORTING THE HEALING PROCESS

Chaplains and other disaster spiritual care providers are called upon to provide a sense of support and hope. This is done through practices that validate an individual's experience and nurture their own belief and spiritual resources to support them during relief and recovery. Some examples of such practices are:

- Understanding and normalizing what has happened
- Carrying-out spiritual care through the practice of presence
- Identifying and solving immediate, concrete problems
- Encouraging individuals to talk about their experiences and being an active and supportive listener
- Recognizing normal stress reactions; finding or making referrals to resources to address immediate problems
- Attending to anniversaries and other important dates

DISASTER SPIRITUAL CARE TRAINING

To be effective, spiritual care providers should become educated in various aspects of disaster response and recovery — including the federal Incident Command System. NDIN offers trainings in disaster chaplaincy, spiritual care, and trainer training. Each course includes these components:

- How to work as members of an interdisciplinary team within the Incident Command System
- What to expect at disaster sites
- How to provide Spiritual First Aid and Psychological First Aid
- How to make appropriate assessments and referrals to Mental Health and other services
- How to develop and maintain holistic self-care practices

Contact NDIN at www.n-din.org or 212.669.6100 for more information on training opportunities.

REFERRAL TO MENTAL HEALTH SERVICES

While working so closely with individuals who are coping with the traumatic impact of a disaster, spiritual care providers are in a unique position to help identify mental health needs and to make referrals to mental health services.

Referral is the act of recommending that an individual speak to a mental health professional who is trained to handle the difficulties and complexities of his or her needs.

For more information, see **NDIN Tip Sheet “Faith Communities & Disaster Mental Health.”**

When to Refer

You should refer an individual when you realize that an individual needs help beyond your capability and level of training. Some indications that a person should seek help from a mental health professional include:

- An individual self-identifies as a psychiatric patient in need of care (or is so identified by his/her legal guardian)
- You have difficulty maintaining real contact with the person
- A person hints at or talks openly of suicide
- A person seems to be socially isolated
- A person presents imaginary ideas or details of persecution
- You become aware of child abuse or any criminal activity
- You see the development of persistent physical symptoms
- You become aware of dependency on alcohol or drugs
- You see the person engaging in risky behavior (showing carelessness towards self/others)
- You yourself become restless, confused, and have recurring bad thoughts or dreams about your interactions with an individual as a spiritual care provider or recovery leader

How to Refer

Chaplains and spiritual care providers typically serve in mass care settings on an interdisciplinary team that includes mental health professionals. In such settings, there are standardized protocols for assessment and referral among the team that should be followed. In field settings where a spiritual care provider is alone or amongst other spiritual care providers, there should be a pre-determined protocol for referral to a licensed mental health practitioner or mental health agency.

- Attempt to always work as a team and have a plan for how to keep physically safe and maintain appropriate boundaries
- Before contacting a mental health professional, inform the person concerned about your intentions
- Let him/her know that you care for him/her and then explain the reasons for the referral
- If possible, present different referral options to the person concerned
- Discuss matters such as fees, location, accessibility, etc.
- Assure the person that you will continue your support until the referral is complete
- You might offer to accompany him/her to the referral location in a mass care setting. If serving alone in the field, you may offer to accompany him/her to his/her first visit with the mental health provider.

Resources for Referrals

As trusted figures, spiritual care providers can help encourage people who are not likely to reach out for additional support through the mental health system. During times of disaster, this may include referrals to:

- Employee Assistance Programs (EAPs) through an employer
- Health insurance providers
- Mutual assistance networks
- Disaster Mental Health hotlines or programs (established by local mental health providers after a disaster)

OTHER RESOURCES

- **Centers for Disease Control (CDC) — Coping with Disasters and Trauma:** <http://www.bt.cdc.gov/mentalhealth/>
- **Church Disaster Mental Health Project:** churchdisasterhelp.org
- **Church World Service — Community Arise/Spiritual Care:** <http://communityarise.com/CMemoandSpirit.htm>
- **National Disaster Interfaiths Network — Disaster Chaplain Training:** www.n-din.org
- **NVOAD — “Light Our Way: A Guide for Spiritual Care in Times of Disaster for Disaster Response Volunteers, First Responders, and Disaster Planners”** offers great information and additional resources. Much of the information on this Tip Sheet was adapted from this guide: www.nvoad.org/articles/light_our_way_links.pdf.
- **NVOAD Points of Consensus on Emotional & Spiritual Care (in the Resource Library):** www.nvoad.org
- **NYDIS (New York Disaster Interfaith Services) — “The NYDIS Manual for Religious Leaders: Spiritual Care and Mental Health for Disaster Response in New York City”:** www.nydis.org
- **BOOK — Disaster Spiritual Care: Practical Clergy Responses to Community, Regional & National Tragedy by Co-Editors: Rabbi Stephen Roberts & Rev. Dr. Willard W. C. Ashley**