A Call for All Emergency Responders to Receive De-Escalation Training

When disaster strikes, an unbelievable breadth and depth of individuals, organizations, and agencies mobilize to establish and delivery emergency response services to those affected. From sheltering operations to emergency food, clothing donation distribution to relief registration, there are a wide range of touch points between responders and communities affected.

From my own experience as an emergency responder, and additional research into responder safety trends, I’ve found a systematic lack of training for responders around trauma and behavioral healthcare needs. This lack of training leaves not only responders vulnerable to escalating situations, but also those in congregate settings such as sheltering and feeding operations.

In my poster session, I examine the trends in incidents responders face that threaten either their safety or those around them and how those trends overlap with individuals experiencing disaster trauma and/or unmet behavioral healthcare needs as a result of the disaster (i.e. medication access, talk therapy access, crisis services, etc.). My research and experience shows the incredible value case of providing responders with (1) the education to understand disaster trauma and common behavioral healthcare needs, (2) the tools to recognize these conditions and needs in
those they're serving, and (3) the steps to deescalate situations before they become unsafe. My poster will outline the content and logic behind all three of these training/education areas. These trainings draw deeply from the social workspace, and I ultimately argue for all responders to receive this education and training to protect themselves and those they serve.

**Presentation Theme:** My themes are safety and training. Providing all emergency responders with de-escalation training elevates their ability to not only recognize and understand the trauma responses and behavioral health care needs of those they’re serving, but also protect themselves and those around them from incidents escalating to unsafe conditions.

**Collaborators, Advisor(s) and Department(s) that assisted with this research:** Hudson Harris, Lorena Edwards-Rincon.