



How To Cope With Sheltering in Place

Introduction

Sheltering in place means people are asked by local officials to stay where they are for a period of time. You may be at your own or a relative's home, school, or work. Sheltering in place may be required because of an emergency such as a threat of violence, a weather situation such as a tornado or hurricane, or a public health situation like an infectious disease outbreak. You may hear shelter in place also referred to as a "lockdown."

This tip sheet describes reactions often associated with sheltering in place. It also suggests ways to care for yourself and your family during the experience and provides additional resources you may find helpful.

What To Expect: Typical Reactions

Sheltering in place can be stressful. If you are sheltering because of an immediate threat of violence or severe weather, your first priority is to ensure that you and those in your care are safe—lock the doors, stay away from windows, and stay in interior rooms if possible.

Everyone reacts differently to stressful situations. Typical reactions to sheltering in place because of an immediate problem include:

- Anxiety about the situation
- Fear and worry about your own safety and that of your loved ones from whom you may be temporarily separated
- Concern about being able to effectively care for children or others in your care

- Uncertainty, anger, or frustration about how long you will need to remain sheltered, and uncertainty about what is going to happen

In shelter in place situations lasting longer than a few hours, you may also experience:

- Feelings of isolation, loneliness, sadness, or boredom
- Guilt about not being able to perform normal work or parenting duties
- Fear over loss of income
- Changes in sleep or eating patterns

Ways To Cope During Sheltering in Place

UNDERSTAND THE RISK

Consider the real risk of harm to yourself and others around you. For example, during a situation such as an infectious disease outbreak, the public perception of risk is often inaccurate. Media coverage may create the impression that people are in immediate danger when really the risk for infection may be very low. Take steps to get the facts:

- Stay up to date on what is happening, but avoid watching or listening to news reports 24/7 since this can increase anxiety and worry. Remember that children are especially affected by what they hear and see on television.
- Look to credible sources for information about the situation.

MAKE A PLAN

You can prepare in advance for a potential shelter in place in the following ways:

- Assemble an emergency supplies kit that includes at least 2 weeks' worth of water and shelf-stable food, medications, pet food, flashlights, and extra batteries.
- Ask your employer and your children's school administrators or daycare providers what their plan is for a shelter in place order.
- If you need ongoing medical care for a chronic health, mental health, or substance use condition, learn in advance what to do from your health care or treatment provider in the event that you cannot come to the office or clinic.



- Develop an emergency plan with family members that includes having each other's contact information and ensuring that all members will check in with one another as soon as possible if you are not sheltering in place together.
- Collect fun activities, books, games, and toys that can keep your children entertained, and books, movies, and games that will keep you occupied.

USE PRACTICAL WAYS TO COPE AND RELAX

You can do many things to keep yourself calm while sheltering in place.

- Relax your body often by doing things that work for you—take deep breaths, stretch, meditate or pray, wash your face and hands, or engage in pleasurable hobbies.
- Pace yourself between stressful activities, and do something fun after a hard task.



- Do activities you enjoy—eat a good meal, read, listen to music, take a bath, or talk to family.
- Talk about your experiences and feelings to loved ones and friends as often as possible, if you find it helpful.
- Maintain a sense of hope and positive thinking; consider keeping a journal where you write down things you are grateful for or that are going well.

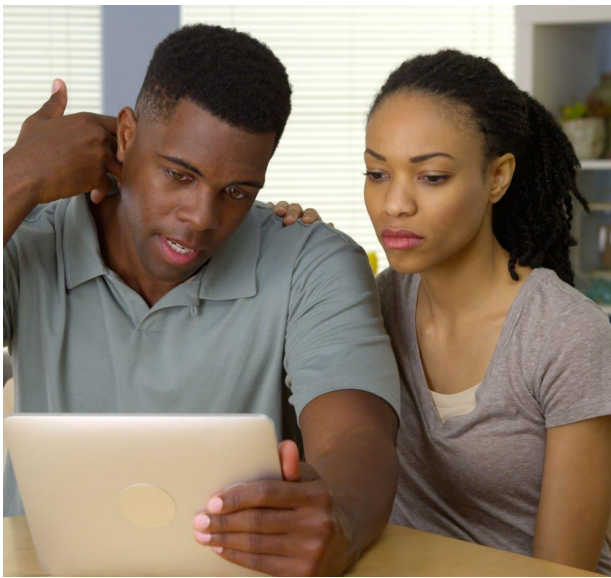
If you are feeling overwhelmed with emotions such as sadness, depression, anxiety, or feel like you want to harm yourself or others, call 911 or the National Suicide Prevention Lifeline at 1-800-273-TALK (1-800-273-8255).

STAY CONNECTED

Staying connected with family, friends, and others you trust is one of the most helpful ways to cope with any stressful situation. Because of advances in technology, it's possible to connect with others during a shelter in place situation.

You can:

- Take advantage of current technology such as Skype or FaceTime to talk “face to face” with friends and loved ones.



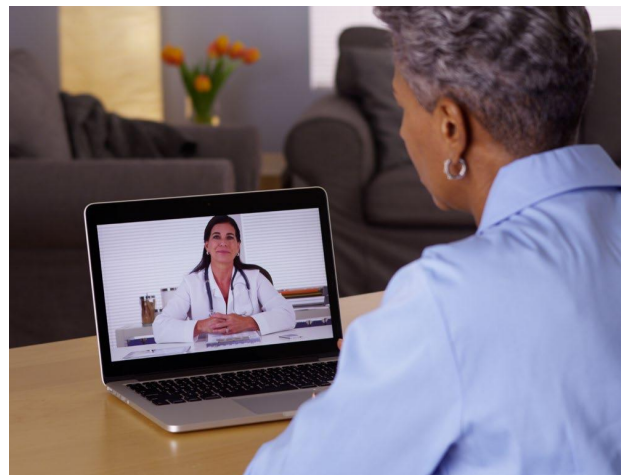
- Check in with people regularly using text messaging.
- Plug into social media sites such as Facebook and Twitter to gain insight into what is going on in the world—just be sure that sources you follow are credible and avoid sites that produce stress or worry.
- Sign up for emergency alerts via text or email to ensure you get updates as soon as they're available.
- Call SAMHSA's free 24-hour Disaster Distress Helpline at 1-800-985-5990, if you feel lonely or need support.

- If you need to connect with someone because of an ongoing alcohol or drug problem, consider calling your local Alcoholics Anonymous or Narcotics Anonymous offices.

TALK TO YOUR DOCTORS ABOUT TELEHEALTH

Many health care providers can now interact with patients via Skype, FaceTime, or email. In an emergency requiring sheltering in place for several days or longer, such as an infectious disease outbreak:

- Ask your provider whether it would be possible to schedule remote appointments for mental health, substance use, or physical health needs.



- If you're worried about physical symptoms you or your loved ones may be experiencing, call your doctor or other health care provider.
- In the event that your doctor is unavailable during shelter in place and you are feeling stressed or are in crisis, call the hotline numbers listed at the end of this tip sheet for support.

What To Expect: After the “All Clear”

After a shelter in place order is lifted, most people will be able to resume normal activities. Some people, including children, may have a hard time getting back to usual routines. To support children:

- Explain that the danger is over and the situation was not their fault.
- Try to get back to normal routines and activities as soon as possible.
- Encourage them to talk or write about their feelings, but don't pressure them.



If you or your loved ones experience symptoms of extreme stress—such as trouble sleeping, problems with eating too much or too little, inability to carry out routine daily activities, or use of drugs or alcohol to cope—speak to a health care provider or call one of the hotlines listed at right for a referral.

Helpful Resources

Hotlines

SAMHSA's Disaster Distress Helpline

Toll-Free: 1-800-985-5990 (English and español)

SMS: Text TalkWithUs to 66746

SMS (español): “Hablanos” al 66746

TTY: 1-800-846-8517

Website (English): <http://www.disasterdistress.samhsa.gov>

Website (español): <http://www.disasterdistress.samhsa.gov/espanol.aspx>

SAMHSA's National Helpline

Toll-Free: 1-800-662-HELP (24/7/365 Treatment Referral

Information Service in English and español)

Website: <http://www.samhsa.gov/find-help/national-helpline>

National Suicide Prevention Lifeline

Toll-Free (English): 1-800-273-TALK (8255)

Toll-Free (español): 1-888-628-9454

TTY: 1-800-799-4TTY (4889)

Website (English): <http://www.suicidepreventionlifeline.org>

Website (español): <http://www.suicidepreventionlifeline.org/gethelp/spanish.aspx>

Treatment Locator

Behavioral Health Treatment Services Locator

Website: <http://findtreatment.samhsa.gov/locator/home>

SAMHSA Disaster Technical Assistance Center

Toll-Free: 1-800-308-3515

Email: DTAC@samhsa.hhs.gov

Website: <http://www.samhsa.gov/dtac>

**Note: Inclusion or mention of a resource in this fact sheet does not imply endorsement by the Center for Mental Health Services, the Substance Abuse and Mental Health Services Administration, or the U.S. Department of Health and Human Services.*



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