

Behavioral Health Emergency Preparedness

Why address behavioral (mental) health in emergency preparedness?

A range of mental health and chemical abuse (behavioral health) problems may surface in the early stages of an emergency situation. These may continue to emerge among the public and among professionals who respond to an event. Some reactions include confusion, an inability to concentrate, anxiety, depression, phobias, sleep disturbance, panic disorders, acute or post-traumatic stress disorder (PTSD), depression, suicidal behaviors, rage, and rigidity.

Disasters can leave long-lasting impacts

A 1999 study by Tiemann and Staples (1999) after the 1997 Red River flood in Grand Forks, North Dakota found:

- a 24% increase in domestic

A longitudinal study by North, Pfefferbaum, Kawasaki, Lee, and Spitznagel (2010) on the mental health impact of the 1995 Oklahoma City bombing study found:

- at least six suicides of people directly involved with the bombing of the Murrah building;
- nearly 1/2 of the 182 building survivors had a post-disaster psychiatric disorder;
- 1/3 of the 182 survivors had symptoms of post-traumatic stress disorder.

More recent studies of the behavioral health impact of disasters has found that individuals with access and functional needs such as children, the elderly, individuals with physical, cognitive, or mental health issues, and those of low socioeconomic status experience higher levels of disaster trauma (Kruger, Hinton, Sinclair, and Silverman, 2018).

Pre-event behavioral health planning

Communities may not be adequately prepared to anticipate and care for the full range of behavioral health needs during and after an event. Questions to consider include:

- Who monitors the behavioral health of professionals who respond to an event?
- Do responders and others know how to identify behavioral health problems and how to intervene and make referrals to mental health services?
- How do we ensure the needs of the most vulnerable citizens are addressed (i.e., access and functional needs)?
- Do community members know where to go for behavioral health services?
- Will there be financial or other barriers to accessing behavioral health services?
- What can communities do now to reduce their vulnerability for behavioral health problems in the event of an emergency?

A public health approach

A public health approach to emergency preparedness addresses the needs of the entire population, by reducing risks and building on the strengths of individuals and communities. The Minnesota Department of Health is working regionally with hospitals, emergency services, public health, human services, schools, mental health providers, and community behavioral health resources to enhance Minnesota's behavioral health emergency preparedness.

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