Disaster Mental Health Risk Reduction
An Upstream Paradigm Shift for Disaster Mental Health
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Background
The recent inclusion of ‘mental health’ in the Sendai Framework for Disaster Risk Reduction marks a pivotal point in the recognition of the significant burden of disasters on the mental health of populations, and a global commitment to reducing its impacts.

Problem
Effective agreement implementation and reduction of disaster mental health risks and consequences face significant challenges. These include a lack of clarity about the conceptual interlinkages and place of disaster risk reduction principles within the field of disaster mental health, which is traditionally marked by a prevailing recovery orientation, and the need for translation into disaster mental health policy and practice.

Disaster mental health (DMH) risks as likelihood and severity of
- Newly Emerging or Exacerbated MH Issues among disaster affected populations (Type A)
- Adverse Impacts on Existing MH Support Systems (Type B) (e.g., in terms of patient/staff safety, wellbeing, evacuation, surge capacity, business continuity)
- Secondary Effects of A&B on individual, community, business, and societal functioning (Type C)

Does DMH need disaster?

Present focus on:
- Response and recovery
- Managing disaster consequences
- Downstream strategies

There is a need to explore upstream strategies to reduce DMH risks

Upstream strategies include a broad arsenal of measures:
- General DRR, mitigation, preparedness measures (incl. forecasting, early warning, evacuation) that reduce overall disaster likelihood, exposure, vulnerability) will simultaneously reduce DMH risks
- DMH-focussed measures (analysing DMH risks, monitoring/mapping population vulnerability and resilience in disaster-prone areas, mapping existing system resources, strategic preparedness planning, targeted resilience and capacity building at relevant levels, research and evaluation)

Implications (there is a need to...)
Integrate DRR principles within DMH policy and practice
Understand and analyse existing DMH risks (Types A, B, C)
Explore and devise effective upstream strategies for DMH risk reduction
Integrate DMH RR strategies in national and local DRR frameworks and plans