Consultation on long-term psychosocial impact of disaster in WHO Center for Health Development（2017/2/16）

Topics: Psychological/mental health needs and interventions – Lessons from Japan
Venue: WHO Center for Health Development (Kobe, Japan)

On Feb. 16, 2017, WHO Center for Health Development invited Prof. Shinichi Egawa of IRIDeS, Tohoku University as a discussant in the Consultation on long-term psychosocial impact of disaster. This consultation meeting consists of multidisciplinary experts in disaster medicine to elucidate the psychosocial impacts of disaster on affected people and responders, to implement the effective intervention and preparedness for current and future disasters in the world.

Experts included Prof. Egawa, Associate Prof. Matsumoto from Graduate School of Medicine, Associate Prof. Aida from Graduate School of Dentistry, Tohoku University (Prof. Tomita was absent due to giving a presentation at Japan-NIH joint symposium) and representatives from Hyogo Institute for Traumatic Stress, National Institute of Public Health, National Center of Neurology and Psychiatry, Nagasaki University, Okayama Psychiatric Medical Center, DMAT Office, University of Environmental and Occupational Health, Fukushima Medical University, Hyogo Prefectural University, Soma Central Hospital, Tsukuba University, Disaster Psychiatry Assistance Team (DPAT) Office and Kumamoto Mental Health and Welfare Center. Observers were from Ministry of Health, Labour and Welfare, International Recovery Platform, Hyogo Earthquake Memorial 21st Century Research Institute and OCHA.

Dr. Kato from Hyogo Institute for Traumatic Stress summarized as Key Note the initiative mental health response in 1991 Mt. Unzen volcanic eruption and 1993 Hokkaido Earthquake, the remarkable advancement of traumatic stress care after 1995 Great Hanshin-Awaji Earthquake, the mental health responses in 2004 Chuetsu Earthquake. These experiences prompted the importance of mental health response after disaster subsequently to the rapid response after 2011 Great East Japan Earthquake. He shared the current situation and gaps of centers for traumatic stress in the affected prefectures. DPAT Office shared the establishment and activities of DPAT and the challenging issues. The participating experts actively discussed the challenges in bridging across acute phase and long-term phase of mental health response after disaster.

The latter half of the consultation meeting was group discussion to identify research and knowledge gaps and priorities about long-term psychological/mental health care/support and system, bridging across acute phase and longer-term activities. Each group summarized the product and presented in the plenary discussion to elucidate the required research and draft roadmap of research agenda. The five main categories of required research was as follows:

a. Assessment of Mental Health
b. Bridging between physical and psychosocial health
c. Psychosocial assistance of responders
d. Phase dependent traumatic stress care
e. Research and outreaching ethics

We will further promote this collaborative research initiative to establish better psychosocial response from acute to long-term phases after disaster. Since psychosocial impact of disaster strongly depend on the culture of affected people, the whole discussion and research process will be conducted in Japanese, but the output will be propagated to the world through WHO.

Reported by Shinichi Egawa (Disaster Medical Science Division) (continues on the next page)
Multidisciplinary members of the consultation meeting

Group discussion on the research agenda

Presentation of the product