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Mental health in the face of natural disasters

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Editorial

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The release of the present issue of SALUD MENTAL coincides with the International Day for Natural Disaster Reduction. Natural and man-made disasters have always existed; however, in recent years they have drawn more attention due to the subsequent problems they bring with them, especially around mental health. For this reason, October 8 2008 was declared as the International Day for Natural Disaster Reduction;1 the motive behind this declaration was due to the Kashmir earthquake (also known as the Indian subcontinent earthquake, the North Pakistan earthquake, and the South Asia earthquake) which took place on October 8 2005 in the region of Kashmir between India and Pakistan. The death toll from the earthquake was 73 000 people in Pakistan, 106 000 were injured, three million people were made homeless, and thousands of children were left without winter clothes and made to live in tents or shelters made of cardboard and rocks.^{2,3} Because of this, United Nations Member States committed to taking measures to reduce the risk of disasters and adopted an approach called the Hyogo Framework of the Hyogo Framework for Action (HFA) to reduce vulnerability to natural threats. The aim of this instrument is to increase resilience of nations and communities to disasters by 2015, achieving a considerable reduction in losses caused by disasters, both of human life as well as the social, economic, and environmental goods of communities and countries.4

Paradoxically, and by coincidence, in 1992 (13 years before), the World Federation for Mental Health and the World Health Organization proposed October 10 as World Mental Health Day, which is held every year to focus the world's attention on the identification, treatment, and prevention of a particular emotional or behavioral disorder. The aim of marking this day was to raise public awareness of these types of illness and promote frank debate about mental disorders and investment in services for their prevention, promotion, and treatment.⁵

Because of this, caring for mental health in disaster situations is increasingly important due to the feelings of anguish, desperation, powerlessness, anger, sadness, and anxiety they bring, even leading to more serious events such as substance

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abuse (primarily alcohol), depression, post-traumatic stress disorder, and others.6

Both natural disasters and those provoked by man attracted the attention of international bodies in terms of the effects on mental health of people exposed to catastrophic events. As such, the World Health Organization and the Pan-American Health Organization made a series of articles, books, and notices available online that offer information to help health teams make decisions and deal with this problem. However, little is known about the issue; information is anecdotal, scarce, and not very scientific, making it necessary to delve deeper into the subject and create mental health teams exclusively dedicated to caring for said problems in disaster situations. As such, the World Psychiatric Association and the World Health Organization have spoken out about the role that psychiatry should play in mental health care in disasters, indicating that this should be both active and ongoing.⁷

Finally, the formation of an international mental health team has been suggested, which would provide support to all regions in the world. To create such a team, it would be necessary to train multi-disciplinary staff (psychiatrists, doctors of internal medicine, general and family practitioners, nurses, social workers, and psychologists, among others) to have an international professional certificate which allows them to prescribe psychopharmacological drugs in any part of the world, and access basic medication. Without a doubt, psychotherapeutic support is crucial given that the consequences and damage caused to mental health are observed mediumand long-term, and therefore the education of mental health advisers (community leaders, schoolteachers, and parents) becomes even more important.

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