

The Psychological Effects of Evacuations During Disasters: A Meta-Analysis

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Introduction

Evacuations save lives but may cause significant psychological consequences. Meta-analysis of 10 studies shows higher PTSD, depression, and anxiety in evacuees.

Methods

Meta-analysis of peer-reviewed studies (2017–2024). Focus: displaced vs. non-displaced populations in hurricanes, floods, and wildfires.



Recommendations

- Pre-position mental health professionals in shelters.
- Train staff in trauma-informed communication & psychological first aid.
- Expand tele-mental health services, esp. in rural areas.
- Develop culturally responsive outreach & family-centered interventions.
- Build community-based resilience programs (peer support, schools, churches).

Conclusion

Evacuations save lives but create long-term invisible wounds anxiety, depression, trauma.
Integrating mental health into disaster management is an ethical imperative.

Key Findings

- Children: regression, anxiety, bed-wetting, irritability, social withdrawal.
- Older adults: confusion, helplessness, medical complications (esp. dementia/mobility issues).
- General adults: PTSD most prevalent during abrupt/unplanned evacuations.
- Shelters: crowding, lack of privacy, noise, poor sanitation worsen trauma.
- Prolonged displacement: family separation, job loss, housing instability compound stress.

Implications

Evacuation is not just logistics it is a public health concern. Psychological impacts can persist long after danger passes. Unequal recovery highlights the need for mental health integration.



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