

## Letter to the Editor

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# Enhancing Disaster Mental Health Preparedness: Insights from Taiwan's Earthquake Response and a Comparative Reflection on the Izmir Earthquake

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## To the Editor,

I write in response to the article “Evaluation of the Situations of Coping with Mental Trauma and Trauma in Emergency Service Personnel Who Medically Intervened to Earthquake Affected People in the 2020 Izmir Earthquake”<sup>1</sup> by Keskin G and Yurt E, published in *Disaster Medicine and Public Health Preparedness*. While the study provides invaluable insights into the psychological impact of disaster response on emergency service personnel, it also prompts a broader reflection on the mental health implications for both responders and survivors in the aftermath of natural disasters.

The recent earthquake in Hualien, Taiwan, on April 3, 2024, underscores the critical need for immediate and sustained mental health support mechanisms. With a magnitude of 7.2, this earthquake resulted in significant loss, including 13 lives and over 1000 injuries, alongside extensive property damage.<sup>2</sup> The Taiwanese Ministry of Health and Welfare's proactive measures, which offer free psychological support to affected individuals through various platforms, including a dedicated hotline (1925), community mental health centers, and collaboration with local government and professional associations, serve as an exemplary model of disaster mental health response.

As highlighted in the Taiwanese response, integrating mental health support in disaster preparedness and response plans is crucial. This includes addressing the immediate trauma and stress experienced by both the affected populations and the frontline responders, as well as the long-term psychological effects. The use of diverse channels to reach out and provide support, as well as the emphasis on community-based interventions, can significantly contribute to resilience and recovery.

In light of findings by Keskin and Yurt,<sup>1</sup> which illuminate the mental trauma endured by emergency personnel in Izmir, and the comprehensive approach taken by Taiwan's health authorities, there is a clear imperative for more integrated and accessible mental health support systems in disaster management frameworks globally. It is also pertinent to acknowledge the role of religious coping, social support, and professional mental health interventions in mitigating the psychological aftermath of disasters.

In conclusion, the Taiwan earthquake response not only reaffirms the findings from Keskin and Yurt's study but also expands the discourse on disaster mental health preparedness and response. It underscores the necessity of early intervention, continuous support, and the adaptation of strategies to meet the diverse needs of all affected individuals. As we advance in our understanding and implementation of disaster mental health services, let us strive for resilience, healing, and hope in the face of adversity.

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## References

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