

# GUIDANCE NOTE: MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT IMPLICATIONS OF HEATWAVES

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This document provides an overview of the psychosocial consequences of heatwaves and outlines key considerations for MHPSS programming.

This guidance note is intended for Red Cross Red Crescent Movement components who may be responding to heatwaves in their country, or region. It includes guidance on:

- common reactions and behaviors during and after heatwaves
- integration of MHPSS considerations for disaster responses
- links to existing relevant materials

## **FACTS ABOUT HEATWAVES**

Rising global temperatures due to climate change have increased the frequency and severity of heatwaves. Two of the top ten deadliest disaster events in the last 20 years were heatwaves: resulting in more than 128,000 death (UNDRR, 2020). Besides the direct health consequences, heatwaves also contribute to adverse mental health outcomes. The effects of heatwaves are more profound on vulnerable groups such as older adults, children, pregnant women, people with low socioeconomic status, people who are homeless, and people with pre-existing health conditions. People with mental health conditions are also more at risk, with higher rates of hospitalizations for psychological distress and increased suicide risk during heatwaves (Hansen et al., 2008; Whitton & Grundy-Campbell, 2024).

The link between heatwaves and climate change can affect the ability of affected communities to access accurate and relevant information. Mis- and disinformation related to climate change, especially on social media, can amplify fear and distress and make it harder for people to make informed decisions during climatological disasters. Mis- and disinformation may undermine official information regarding the severity and impact of heatwaves affecting how people interpret the risks that heatwaves pose to themselves and their loved ones. It is important that volunteers and staff have access to clear, relevant, and accurate information about heatwaves and local responses. Volunteers and staff should be provided with regular, updated, fact-based information to share with people they are supporting in their work.

## COMMON REACTIONS AND BEHAVIOURS AFTER HEATWAVES

(Guidance adapted from Australian Red Cross)

People are likely to experience noticeable feelings of fear and distress that can influence how they respond and behave during, and after heatwaves. These emotions can be beneficial by prompting people to take protective actions for themselves and their families. However, heatwaves can also cause significant and long-lasting mental health and psychosocial impacts.

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# Common reactions during and after emergencies include:

- Fear about the safety of self and others (including pets)
- Fear and uncertainty about the future
- Distress and sadness about personal losses, including home and belongings
- Fear of displacement and the loss of familiar environment
- Distress related to the disruption of daily routine associated with the loss of familiar places.
- Numbness and helplessness from the lack of control
- Replaying the frightening moments of the approaching disaster or during evacuation
- Feelings of grief over the loss of familiar places, memories, etc.
- Feelings of worry, overwhelm or anxiety about the future

## Specific reactions after heatwaves include:

(Guidance adapted from British Red Cross)

- Fear of death or of deterioration of pre-existing chronic conditions; especially amongst the most vulnerable groups
- Fear of helplessness and lack of control
- Anxiety about the length and recurrence of unpredictable heatwaves
- Sleep difficulties increasing sleep-related disorders

## Common physical, cognitive affects, and behaviors include:

- Affected mood with irritability, outbursts of anger
- Changes in sleep and appetite
- · Lack of interest in routine
- Increased physical health problems
- Difficulties with concentration or memory
- Cognitive challenges impairing daily life and well being

# Specific behaviors during and after heatwaves include:

(Guidance adapted from British Red Cross)

- Aggression and increased interpersonal violence linked to higher irritability, stress and sleep deprivation
- Loss of motivation and productivity due to heat fatigue
- Increase substance intake as coping mechanism





- Suicidal behavior with high temperature spikes
- Social withdrawal especially amongst the most vulnerable groups

## INTEGRATION OF MHPSS CONSIDERATIONS INTO HEATWAVE RESPONSES

Where possible, MHPSS activities should be integrated into disaster responses. Activities will differ depending on the local context, type of emergency, and impacts of the disaster. Ongoing assessments and monitoring will inform which MHPSS activities are the most appropriate at any given time. The following outlines some recommended minimum actions for the integration of MHPSS consideration into disaster responses.

# Minimum actions for disaster/emergency teams:

- Disseminate key psychoeducation messages about common reactions linked with mental health and wellbeing during and after heatwaves, their duration, when and where to seek additional help.
- Ensure frontline workers are briefed on sensitization messages relevant to the disaster so that they can provide correct information to the community. This can increase calm, promote a sense of safety, and trust in disaster responders and their efficacy.
- Ensure cooling centres are accessible for people with disabilities and people with mental health conditions including preparing referral pathways.
- Train frontline workers and community leaders in basic psychosocial support skills including dealing with difficult and aggressive behavior.
- Add MHPSS assessment questions to ongoing assessments, ensuring to include age sensitive communication following the protection standards for children and people of older age.

# **Minimum actions for MHPSS teams:**

- Advocate for integration of MHPSS activities and for access to care for people with mental health conditions.
- Support emergency response teams to integrate key messages mental health and wellbeing impacts of disasters.
- Support emergency response teams to integrate MHPSS assessment questions to ongoing assessments.
- Support emergency response teams with analysis of assessment results and planning for
- MHPSS activities, as needed.
- Support emergency response teams to develop, adapt, and distribute clear, relevant, and accurate information, education and communication materials that includes both physical and mental health information.
- With your HR function, ensure that staff and volunteers support activities are being implemented and if not, advocate to your HR department to implement staff and volunteer support including peer support.



- Deliver basic training in psychological first aid and supportive communication for volunteers, health, and community workers.
- Update referral mapping and referral pathways.
- Assist with dealing with complex and severe reactions.

## **COMMUNICATION CONSIDERATIONS**

It is extremely important to communicate in a clear and supportive way when visiting and talking to people affected by heatwaves. Staff and volunteers should be well briefed about the disaster, so they feel confident about the messages they deliver, and they should be trained in psychological first aid, supportive communication, and active listening.

Every crisis is personal, and reactions will vary depending upon previous experiences, and what an affected person says may differ from what they are experiencing inside.

# When interacting consider and acknowledge the needs of every person and group, such as:

- age, as children need things explained in simpler language.
- gender e.g. women may prefer to talk to women and men to men.
- culture e.g. will affect how people communicate about mental health and wellbeing, their behavior and how they choose to access and engage with service providers
- faith e.g. when people need to pray or what they can eat.
- needs and abilities that may affect where and how assistance may be accessed.

Ensuring that these considerations are included in the evacuation process to sensitize the DR teams.

# **Key psychosocial phrases conveying interest and empathy:**

- I hear your concerns ...
- You have the right to be (sad, angry ...) ....
- I hear what you are saying ...
- I am hearing that you are worried ...
- In this situation, your reaction is to be expected ...
- Maybe we can discuss possible solutions ...
- What we can offer is ...
- I am concerned about you ...
- With your consent, we would like to ...

# Phrases that are unhelpful:

Everything will be okay...





- The most important, you are alive...
- Using the word "victim"; rather "survivor"
- Using the word "traumatized"; rather "affected person"

## COORDINATION OF MHPSS ACTIONS & MHPSS ASSESSMENT

Effective MHPSS programming requires close coordination among all aspects of the emergency response. It is recommended that MHPSS teams ensure they are coordinating with stakeholders inside their National Society as well as with external partners. During disaster responses, it is important to collaborate with communication teams so that public messaging includes MHPSS considerations.

In terms of MHPSS assessment, it is important to assess needs to guide planning for potential MHPSS activities. Coordinate with disaster response teams to include MHPSS questions in general assessment, and if feasible join assessment teams or conduct in-depth MHPSS assessment. This may include with other departments within the National Society, with partner National Societies, the IFRC, the ICRC and with external stakeholders.

The following are suggested assessment questions that can be used to determine MHPSS needs and capacities.

# For rapid assessment (usually desk-based):

- How have the consequences of the disaster affected communities' ability to cope post disaster (considering the pre disaster context)?
  - What are the prior/existing stressors and/or traumatic events?
  - Existence of poverty, conflict, climate risks, inequality, and discrimination etc.
  - Communities' level of autonomy.
- Are there sufficient and appropriate MHPSS resources to cope with the demand for MHPSS support?
  - Are there sufficient MHPSS responses being provided/or planned (by any actor, nationally or internationally)?
  - Does the current NS have the capacity to respond to MHPSS needs?

#### For initial assessment:

- What is the severity of the disaster's impact on people's mental health and ability to cope?
  - Since the event, what changes have you noticed in yourself and others?
  - Do you know of someone who has or is at risk of a mental health or psychosocial difficulty and how to respond?
  - In the community, how is mental health perceived, do people support each other (how?) and what resources are there?





### **REFERENCES**

- Australian Red Cross, (2022), Recovery basics: looking after yourself during and after disasters
- Australian Red Cross, (2022), Recovery basics: the impact of disasters on communities and individuals
- British Red Cross (2021), Feeling the Heat: A British Red Cross briefing on heatwaves in the UK.
- Hansen A, Bi P, Nitschke M, Ryan P, Pisaniello D, Tucker G. (2008). The Effect of Heat Waves on Mental Health in a Temperate Australian City.
- RCRC Climate Center (2022), Climate change and mental health.
- UNDRR, (2020). The human cost of disasters: an overview of the last 20 years (2000-2019)
- Whitton S, Grundy-Campbell G. (2024). Hot and Bothered: Applying the Five Elements Framework to the Climate Crisis.

## **RELEVANT MATERIALS**

# Caring for staff and volunteers

- Caring for staff and volunteers (video), IFRC Psychosocial Centre
- Caring for Volunteers: A Psychosocial Support Toolkit, IFRC Psychosocial Centre
- Guidelines for Caring for Staff and Volunteers in Crises, IFRC Psychosocial Centre

## **Integrating MHPSS**

- An engagement tool for introducing MHPSS, Working Group 1 of the MHPSS Roadmap
- Key messages to support the integration of MHPSS across 4 specific sectors, Working Group 1 of the MHPSS Roadmap

#### Basic PSS and PFA

- Mapping of basic psychosocial support courses, Working Group 1 of the MHPSS Roadmap
- A Short Introduction to Psychological First Aid, IFRC Psychosocial Centre

#### Disaster recovery

Recovery Basics - During and After Disaster, Australian Red Cross

#### Communicating with communities after emergencies

Communication in Recovery, Australian Red Cross

## MHPSS assessment

- Rapid Assessment for Psychosocial Support and Violence Prevention, International Federation of Red Cross and Canadian Red Cross
- Lessons learnt: MHPSS Assessments, Working Group 4 of the MHPSS Roadmap
- Assessment Monitoring Tools and Preparedness Plan for MHPSS, Working Group 1 of the MHPSS Roadmap
- Multi-sectoral MHPSS Needs and Resources Assessments Toolkit, IASC MHPSS Reference Group

