



NEWS RELEASE

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Study finds mental health needs continue in areas impacted by Gulf of Mexico oil spill

FOR IMMEDIATE RELEASE

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Results of a second Community Assessment for Public Health Emergency Response household-based survey in coastal areas of Mobile and Baldwin counties found that there was a decrease in mental health symptoms overall. However, mental health symptoms remain greater than state or national estimates, especially in those reporting decreased income following the oil spill. Additionally, physical ailments did not differ between 2010 and 2011.

The April 20, 2010, explosion of the Deepwater Horizon Offshore Drilling Unit and the subsequent Gulf of Mexico oil spill resulted in the largest marine petroleum release in history. Research from previous oil spill and man-made disasters suggests that effects of such disasters persist long after the actual event.

The Alabama departments of Public Health and Mental Health, with assistance from the Centers for Disease Control and Prevention, conducted in-person household surveys in the two counties to determine the impacts of the oil spill on residents as part of the ongoing response to public concerns in the aftermath of the oil spill.

The first survey was conducted on Aug. 27 and 28, 2010. The second survey was on Aug. 26 and 27, 2011. Both surveys used census data and a two-stage sampling method to randomly select households that would be representative of the population. Interview teams asked questions regarding respiratory, cardiovascular, dermatologic, and other physical symptoms and signs that had arisen or worsened in the 30 days prior to the interview.

Other standardized questions were asked on quality of life, mental health, social context, and individual and household-level oil spill-related exposure. In the 2011 survey, questions also were asked regarding emergency preparedness and planning.

Sixteen interview teams conducted 173 interviews in Baldwin County and 23 teams conducted 208 interviews in Mobile County. The data collected were analyzed by disaster epidemiology experts in the CDC's National Center for Environmental Health.

CDC Epidemic Intelligence Service Officer Dr. Danielle Buttke said, "Our work suggests that the economic impacts of the oil spill have had lasting mental health effects on the community members whose household incomes were directly affected." Buttke went on to say that other research suggests it may be several more years before mental health returns to normal for these individuals, but increased physical conditions do not appear to be present.

Physical conditions reported included respiratory symptoms such as nasal congestion and cough, cardiovascular symptoms such as chest pain, and headaches. Mental and behavioral health symptoms included trouble sleeping or nightmares.

The final 2011 report concludes that there were elevated levels of depression and stress among residents of the impacted areas as compared with state and national estimates.

While the overall prevalence of mental health concerns decreased between 2010 and 2011, a significantly higher proportion of those residents with decreased income reported mental health concerns when compared to those with unchanged or increased income. The report stated that mental health resources are especially needed in households that have experienced decreased income as a result of the oil spill.

Although the overall improvement cannot be attributed to any one factor, there has been extensive community outreach through the Alabama Department of Mental Health Project Rebound in the past year. Project Rebound provides relief and assistance in the aftermath of a disaster in partnership with community organizations. Currently serving individuals affected by the oil spill, as well as the devastating April tornadoes, Project Rebound counselors in the field provide emotional support, assess needs and make referrals to resources to meet specific needs. It also includes a 24/7 Call Center at 1-800-639-REBOUND. The report recommends that public health response and community outreach efforts continue to ensure the needs are addressed.

The report may be viewed at <http://adph.org/cep/>