Priority Analysis for Korean Disaster Mental Health Service Model Using Analytic Hierarchy Process

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Abstract: Early intervention after a disaster is important for recovery of disaster victims and each country has its own professional mental health service system such as Disaster Psychiatric Assistant Team in Japan and Crisis Counseling Program in the USA. The purpose of this study was to determine key prior components of the Korean Disaster Psychiatric Assistant Team (K-DPAT) for building up Korean disaster mental health service system. We conducted an Analytic Hierarchy Process (AHP) with disaster mental health experts using pairwise comparison questionnaire which compares the relative importance of the key components of Korean disaster mental health service system. Forty-one experts answered the first online survey, and among them, 36 responded to the second. Ten experts were participated in panel meeting and discussed the results of the survey and AHP process. Participants decided the relative importance of the Korean disaster mental health service system regarding initial professional intervention as follows. K-DPAT could be organized at a national level (43.0%) or regional level (40.0%). K-DPAT members should be managed (59.0%) and educated (52.1%) by national level than regional or local level. K-DPAT should be organized independent of the preexisting mental health system (70.1%). Funding for K-DPAT should be from the Ministry of Public Safety and the system could be managed by Ministry of Health (65.8%). Experts agreed K-DPAT leader is suitable for key decision maker for most types of disaster except infectious disease. We expect new model for disaster mental health services can improve insufficiency of the system such as fragmentation and decrease the unmet needs of early professional intervention for the disaster victims.

Keywords: analytic hierarchy process, decision making, disaster, DPAT, mental health services

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