Flint Survey – Key Takeaway Points

The survey of Flint residents in the aftermath of the Flint Water Crisis was conducted in 2019 – 2020 by the National Mass Violence Victimization Resource Center. **This survey did not specifically address the physical impact of the Water Crisis experienced by the people of Flint (with the exception of questions about “negative health impacts”).** Rather, it focused on residents’ perceptions of exposure; the prevalence of Post-Traumatic Stress Disorder (PTSD) and depression; risk and protective factors for PTSD and depression; and Flint residents’ access to and utilization of services and interactions with legal systems. However, it’s important to note that mental health impacts and physical impacts are not mutually exclusive; rather, they can actually be highly correlated. The findings from the survey were most troubling in that the public health crisis that ensued from the seemingly benign act of switching the water supply from the waters of Lake Huron to the Flint river continues to impact this community with long-term mental and physical effects.

The Flint Water Crisis had a large, community-wide impact. Many Flint residents described significant exposures to unsafe tap water, with four out of ten experiencing physical illness or health problems; and more than four out of ten (42.1%) experiencing mental or emotional problems related to concerns about the tap water. And over two-thirds (69.9%) believe **there may be long-term health effects** from exposure to the unsafe tap water, either a “moderate amount” (22.1%) or “a great deal” (47.8%).

The vast majority of residents of Flint stopped using tap water in the aftermath of the Water Crisis (and many continue this practice today).

When you **lack confidence** in information provided by public officials in the aftermath of an acute and chronic crisis (as was the case for the majority of Flint residents), it can be difficult to build trust and problem-solve for the future as a community when there are deep concerns about the veracity of information that can have life-altering effects on community members.

The mental health impact of the Flint Water Crisis was both immediate and long-term, resulting in significant numbers of people who had PTSD and depression; yet only one-third (34.7%) were offered mental health services for stress or other problems. Such mental health problems seldom desist without mental health support, which must be not only offered and available, but accessible to diverse community members.

With nearly four out of ten Flint residents reporting the significant risk factor of a prior physical or sexual assault, clinical and needs assessments should be offered that identify one’s previous victimization history and exposure to trauma.

Over two-thirds of Flint residents (68.5%) indicated they had “low social support,” which increased their levels of PTSD and depression. Concerted efforts to help survivors create a strong social support network within their personal community, and via trusted organizations with available resources at the Flint community and state levels, could help mitigate the negative mental health impact of the Water Crisis.
The devastating mental health impact affecting people with *histories of prior assault* and *low social support* cannot be emphasized enough. In Flint, those with a history of prior assault and low social support are 16.6 times more likely to have current PTSD, compared to those who have no prior assault history and high social support.

In the aftermath of mass violence incidents, including those caused by criminal negligence as in Flint, basic assistance such as medical services, mental health services, legal assistance, and financial support should be provided, especially since victims and survivors of this type of MVI are typically *not* eligible to apply for state crime victim compensation. In Flint, less than half of residents were offered these types of assistance to help them recover in the aftermath of the Water Crisis; yet *when they were offered these types of assistance*, most of them received it. Clearly, *there remain many unmet service needs among Flint residents*, that can and should be assessed and addressed today and in the future.

Almost *nobody* in Flint had ANY interactions with legal systems. It should, therefore, come as no surprise that over three-fourths of Flint residents expressed low levels of satisfaction with their ability to consult with prosecutors, be kept informed of case proceedings, the thoroughness of case preparation, and efforts to hold somebody responsible for the Water Crisis. With several upcoming criminal cases resulting from charges filed by the Michigan Attorney General, Flint residents’ constitutional and statutory rights to be present, heard and informed throughout criminal justice proceedings should be reflected and respected in such proceedings.

In contrast to what many people likely believe, the mental health burden of exposure to the Water Crisis in the Flint community was comparable or worse than the mental health burden we found in the three comparison communities that had experienced major mass violence incidents. *The fact that the percentage of adults with PTSD and depression in Flint was similar to those in communities that had experienced mass violence, documents not only the unmet need for additional mental health services, but also that the psychological harm produced by this type of large-scale criminal event is quite serious and should not be minimized.*

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