



A Health Needs Assessment for Paradigm-Shifting Disclosure Scenarios: Identifying vulnerable populations and quantifying support

February 2026



"I'm frequently asked, "Do you believe there's extraterrestrial intelligence?" I give the standard arguments – there are a lot of places out there, the molecules of life are everywhere, I use the word billions, and so on. Then I say it would be astonishing to me if there weren't extraterrestrial intelligence, but of course there is as yet no compelling evidence for it."

Carl Sagan, 1995

Thirty Years On:

Imagine if we received undeniable evidence—perhaps a biosignature from a distant exoplanet captured by the James Webb Space Telescope, or a sign from right here on Earth.

Would we be prepared for the profound impact of such a revelation?

What proactive measures should governments take today to ready our society for tomorrow?



In 2010, the Royal Society convened a two-day Discussion Meeting on the topic of 'the detection of extra-terrestrial life and the consequences for science and society'. The subsequent paper (Dominik & Zarnecki, 2011) stated:

"If extra-terrestrial life happens to be detected, a coordinated response that takes into account all the related sensitivities should already be in place."

No published preparedness framework specifically addressing paradigm-shifting disclosure scenarios currently exists. This document addresses that gap.

This paper presents the first systematic Health Needs Assessment for paradigm-shifting disclosures involving Non-Human Intelligence. It identifies vulnerable populations, quantifies potential support requirements and assesses whether such revelations could trigger a public mental health emergency requiring coordinated preparedness planning.

While this analysis focuses on the UK as a case study, the methodological framework is designed to be applicable across national contexts.

We welcome comments and feedback from stakeholders. These should be sent to: contact@unhidden.org.

Introduction

The discovery of non-human life – whether many light-years away or closer to home – would be an event of monumental significance. Beyond its scientific implications, it could have profound societal consequences, the scale of which may be considerable. The impact on public mental health and wellbeing is an issue that governments should address in advance of any announcement, ensuring that a plan is in place.

This document represents the first systematic health needs assessment for such scenarios, grounded in public health principles. It identifies vulnerable populations, quantifies potential support requirements, and assesses whether paradigm-shifting disclosures could plausibly trigger a public mental health emergency.

Such a plan will require interventions at the population level, involving individuals, families, communities, health providers, and governments working collaboratively, with international coordination.

Key priorities include prevention and risk reduction, strengthening resilience and coping mechanisms, ensuring access to care, and reducing stigma.



What is a Health Needs Assessment?

Health Needs Assessment (HNA)

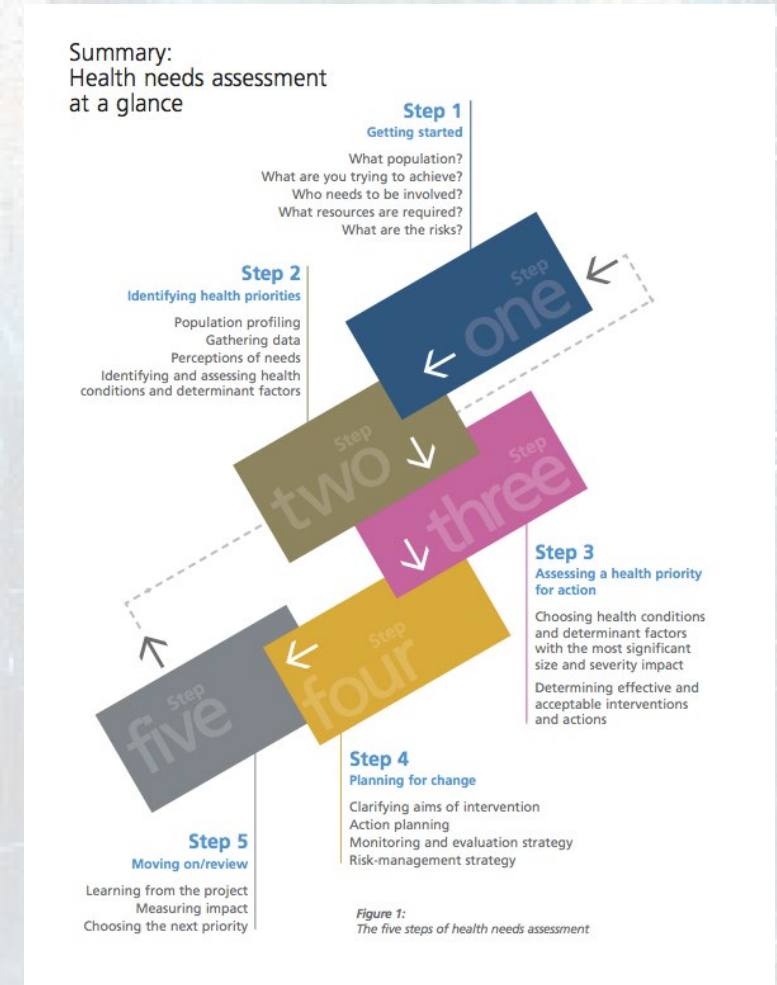
A systematic method for reviewing health issues facing a population, leading to agreed priorities and resource allocation that will improve health and reduce inequalities. *(Cavanagh & Chadwick, 2005 - UK Health Development Agency, now part of NICE)*

Our Approach

We employed **scenario-based modelling** combining qualitative expert elicitation with quantitative population extrapolation:

1. **Scenario Development:** three disclosure contexts based on proximity and intelligence levels of discovered life
2. **Population Analysis:** seven demographic personas representing different vulnerability profiles
3. **Needs Assessment:** ontological and safety needs mapped across scenarios and populations using structured impact scoring

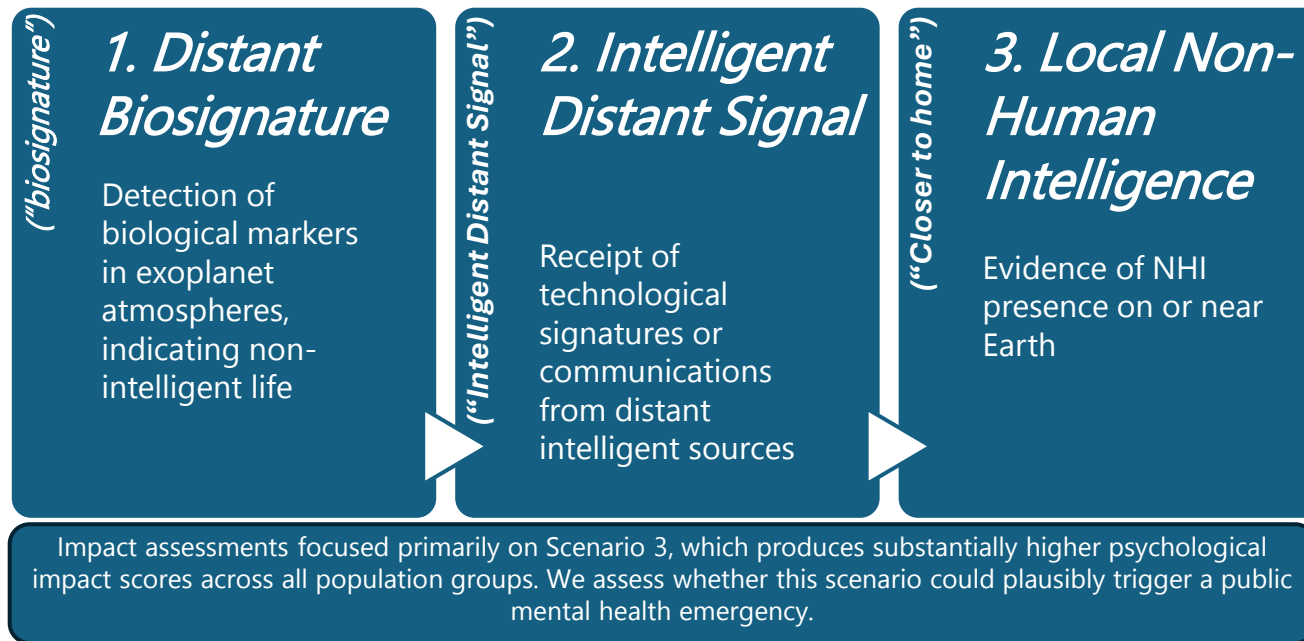
Throughout this process, we intentionally considered the **full continuum of potential responses** – from distress and anxiety through to curiosity, meaning-making, and post-traumatic growth.



Source: Cavanagh & Chadwick (2005)

Three scenarios for 'disclosure'

To contextualise our **Health Needs Assessment**, we must first define and clarify what we mean by 'disclosure'. Given the broad range of possibilities, we believe it is helpful to outline three main scenarios:



"Disclosure" of extraterrestrial life refers to any act by governments or authoritative bodies to reveal to the public their knowledge of alien life forms (extraterrestrials) from beyond Earth."



'Ontological needs' and 'safety needs'

Two-Dimensional Assessment Framework

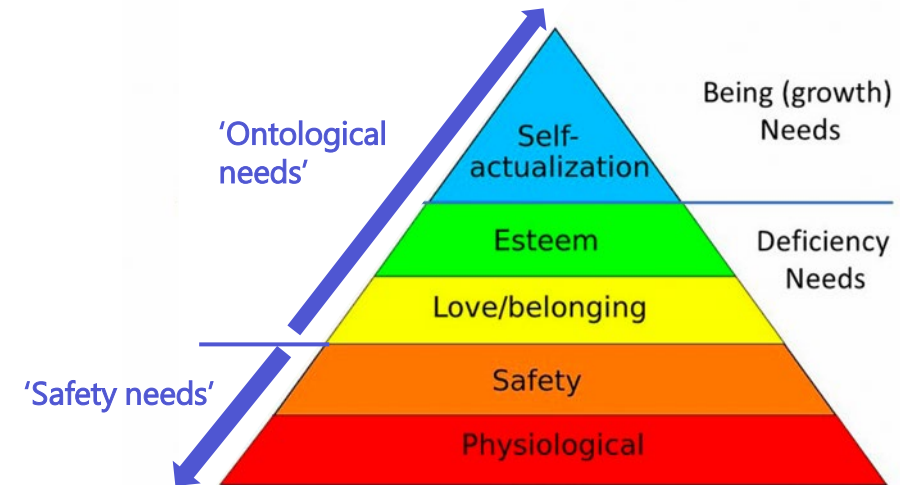
Drawing on Lazarus & Folkman's⁶ transactional model of stress and coping and Wendt & Duvall's⁷ (2008) distinction between ontological and physical security threats, we assess impact across two critical dimensions:

Ontological Needs

- Maintaining worldview coherence and life **meaning**
- Ensuring positive, stable emotions
- Avoiding existential chaos
- Preserving sense of purpose and identity

Safety Needs

- Protection from harm:
- Physical security
- Financial stability
- Social functioning
- Daily life disruption



'Ontological needs' and 'safety needs' overlaid on Maslow's five-layer *Hierarchy of Needs* model

This two-dimensional assessment is critical because disclosure scenarios may threaten each differently across demographic groups.

For example: A distant biosignature might pose high ontological threat with minimal safety impact, whilst evidence of local non-human intelligence could reverse this pattern.

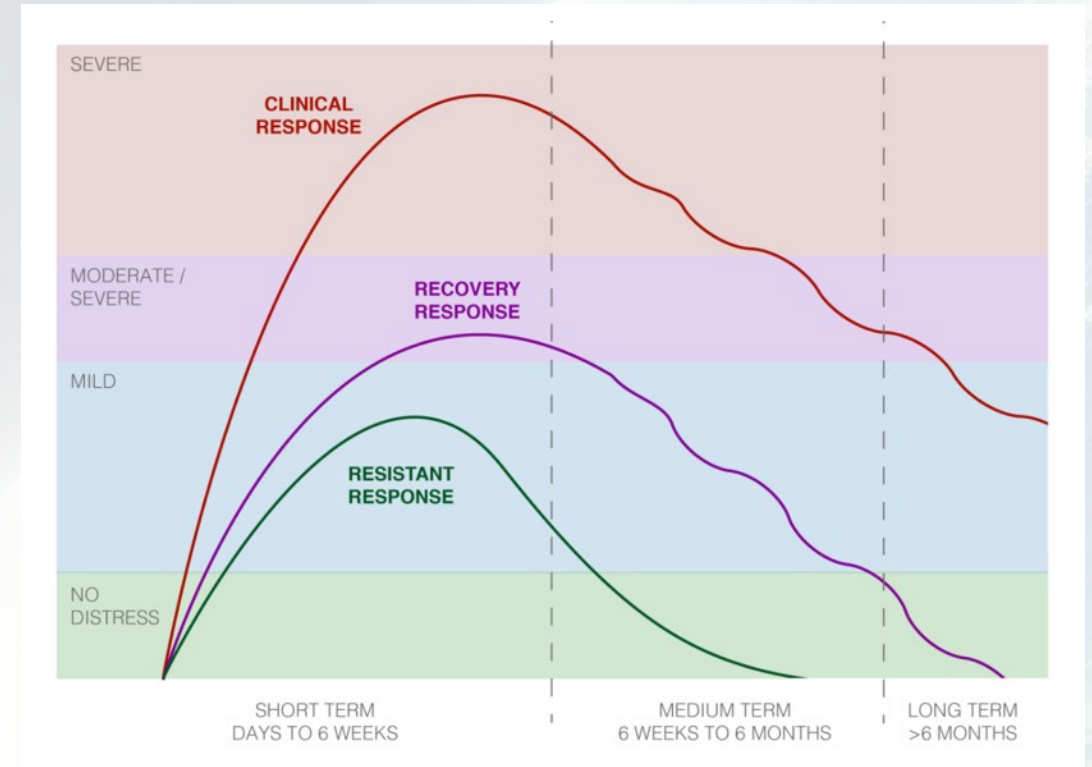
Response to stress

The spectrum of human response

- Human beings are remarkably adaptable and resilient. Responses exist on a continuum from distress through adaptation to growth (Tedeschi & Calhoun, 2004).
- Stress and anxiety relating to any shock dissipate over time, albeit at different speeds.

Evidence from comparable events

- Drawing on evidence from terrorist attacks and mass-casualty incidents, we know that:
- Response trajectories vary significantly across populations
- Most people demonstrate natural resilience
- **However, 10-30% of those directly affected may experience adverse psychological effects** requiring support (Rostami Zarinabadi et al., 2025).



Varying trajectories of psychological response to threat from Williams (2016)

Seven population archetypes were developed based on psychological vulnerability research and demographic analysis:



Children

Younger children have more fluid cognitive frameworks and tend to integrate new information with limited existential distress. Their responses depend heavily on caregiver modelling.



Young Adults

Young adults in identity-formation phases who may experience existential questioning, but whose worldview flexibility supports adaptive integration of new information.



Parents

Adults managing family and caregiving responsibilities, for whom concern for family stability motivates adaptive coping and pragmatic focus.





Religious Communities

Individuals for whom religious belief plays a significant part in their worldview and meaning-making. This demographic group applies to religious views generally and is not specific to any particular faith tradition.



Scientists & STEM Professionals

Individuals whose professional identity is rooted in established scientific frameworks, for whom disclosure challenges fundamental paradigms about intelligence and technological capabilities.



Vulnerable Populations

Individuals with severe mental health conditions or significant psychosocial vulnerability, for whom limited access to adaptive meaning-making resources increases risk of sustained disruption.



Experiencers

Individuals reporting prior UAP or anomalous encounters, who face complex validation dynamics and potential re-traumatization alongside possible relief from stigma.

The seven personas and the three scenarios

This table illustrates the possible level of impact of the three scenarios on the seven population groups in terms of high (H), medium (M) and low (L). It demonstrates the logic for Scenario 3 ('Closer to home') being the scenario with greatest psychological stress – and therefore greatest potential for causing a plausible public mental health emergency.

	1 "Biosignature"	2 "Intelligent Distant Signal"	3 "Closer to home"	Commentary
Children	L	L	M	Children need simple, clear explanations from trusted adults to help them integrate new information without overwhelming their sense of reality.
Young Adults	L	L	L	Being part of a supportive social circle is crucial. Open channels of communication within peer networks help young people feel safe and validated as they process the implications of disclosure.
Parents	L	L	M	With the pressures of balancing work and family responsibilities, parents need emotional support—from partners, trusted friends, or professional services—to help manage anxiety or stress related to disclosure.
Religious Communities	M	H	H	In the wake of potentially unsettling revelations, religious individuals need support from their faith community, spiritual leaders, and personal networks to manage anxiety and existential concerns.
Scientists	L	H	H	Access to peer support, professional networks, and possibly counselling can help scientists and STEM professionals manage any resultant stress or uncertainty.
Vulnerable Populations	M	M	H	Vulnerable individuals require access to mental health resources and supportive counselling to help manage potential anxiety or distress triggered by disclosure. Ongoing support from trusted community or health professionals is critical.
Experiencers	M	H	H	Access to non-judgmental counselling or peer support groups is essential to help experiencers process feelings of shame and stigma, fostering a safe space for emotional healing.

Detailed rationales for impact scores in Scenario 3

Two-dimensional scoring framework

This assessment provides detailed rationales for impact scores assigned to each demographic persona under **Scenario 3** (detection of local Non-Human Intelligence).

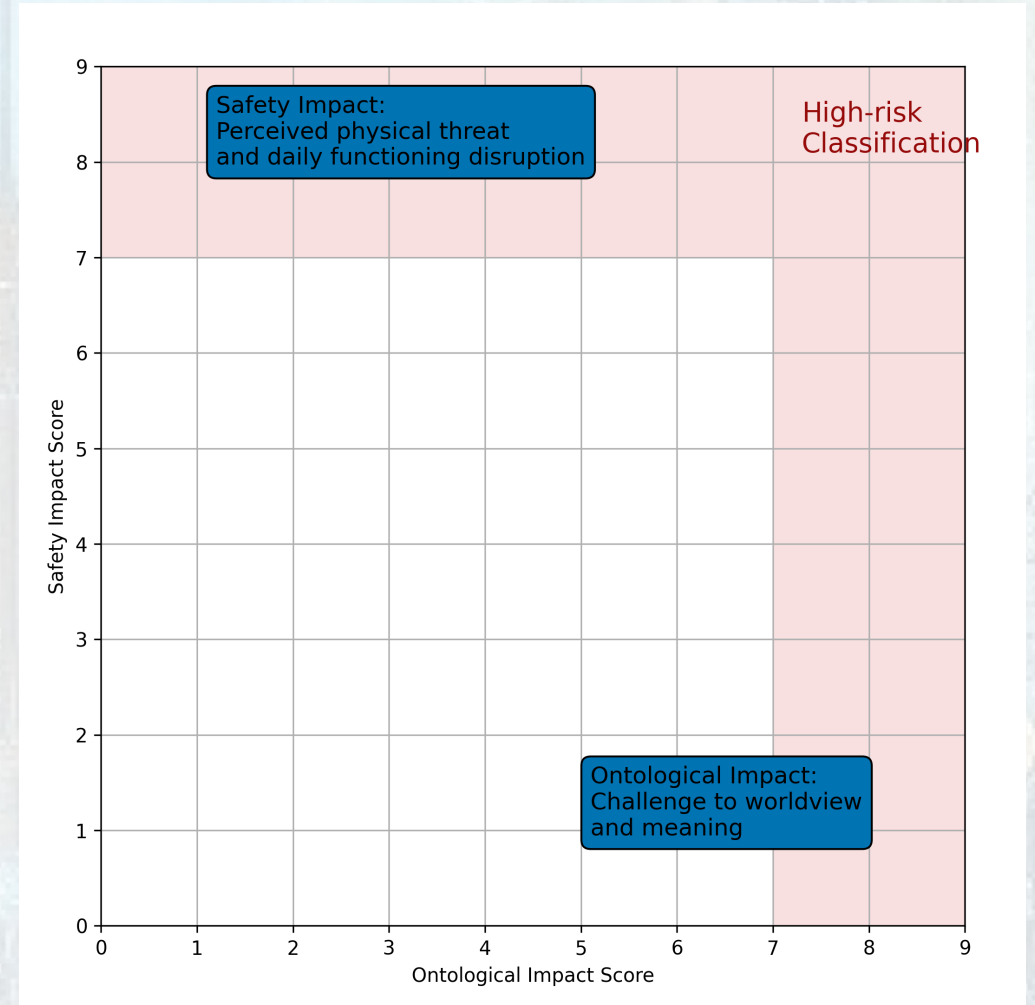
Scoring Scale: 1 (minimal impact) to 9 (severe impact)

Two Dimensions:

Ontological Impact: Challenge to worldview and meaning

Safety Impact: Perceived physical threat and daily functioning disruption

High-risk Classification: Groups scoring ≥ 7 on either dimension



Religious Communities

Ontological Impact Rationale	Safety Impact Rationale
Detection of local NHI may challenge some theological frameworks about humanity's unique relationship with the divine, creation narratives, and spiritual purpose. Religious individuals whose identity and meaning-making are deeply rooted in faith traditions face profound questions about divine intention, the scope of creation, and humanity's theological significance. The immediacy and technological advancement of local NHI intensifies theological dilemmas compared to distant discoveries. However, religious traditions have historically demonstrated capacity for theological adaptation (e.g., accepting heliocentrism, evolution), suggesting potential for integration over time through reinterpretation of doctrine.	Moderate safety concerns arise from uncertainty about NHI intentions and capabilities, amplified by religious apocalyptic narratives that may frame contact in existential terms. Some traditions include prophecies of cosmic events or divine judgment that could be mapped onto disclosure scenarios. However, religious communities often provide strong social support networks and coping mechanisms through collective meaning-making, prayer, and pastoral guidance, which buffer against severe safety anxiety. Daily functioning impacts are moderate — initial disruption likely followed by community-supported adjustment.

Ontological Impact: 8/9

Safety Impact: 5/9

Classification: HIGH-RISK (≥7 on at least one dimension)



Note: the impact score reflects initial vulnerability and does not capture the strong protective social networks and collective meaning-making resources often present within religious communities, which may moderate longer-term outcomes.

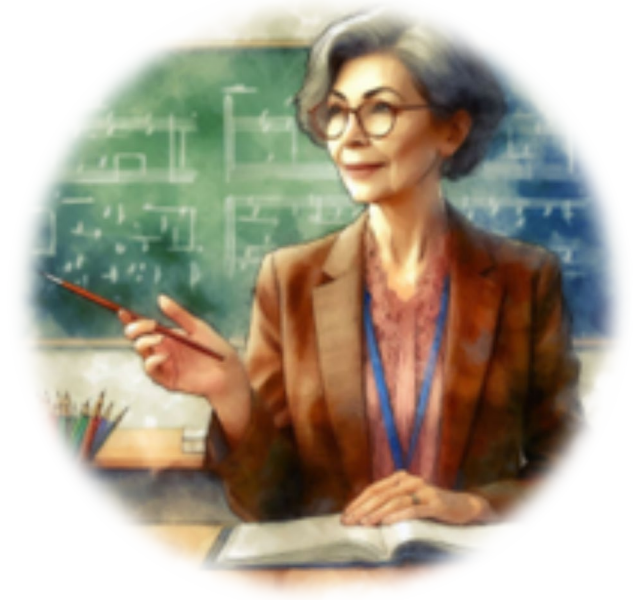
Scientists and STEM Professionals

Ontological Impact Rationale	Safety Impact Rationale
Scientists and STEM professionals are trained to revise models in light of new evidence, and many would approach disclosure with intellectual curiosity and engagement. The scientific community would likely mobilise rapidly around new questions and research priorities. However, local NHI detection would challenge fundamental paradigms about intelligence, technological capabilities, and detection methodologies. For some professionals, particularly those whose identity is most closely tied to specific models or frameworks, discovering that NHI remained undetected despite existing methods may produce significant professional disruption alongside intellectual stimulation.	Moderate safety concerns stem from rational assessment of technological disparities — an intelligence capable of interstellar travel and prolonged concealment possesses technological advantages whose implications are unknown. Scientists may be particularly attuned to both existential risks and opportunities. However, professional training emphasizes evidence-based assessment rather than speculation, potentially moderating extreme anxiety. Career disruption is possible as research priorities shift, but the scientific community would likely mobilize rapidly around new questions.

Ontological Impact: 8/9

Safety Impact: 5/9

Classification: HIGH-RISK (≥ 7 on at least one dimension)



Experiencers

Ontological Impact Rationale	Safety Impact Rationale
Experiencers have often already undergone significant ontological adjustment — many report that their experiences fundamentally altered their understanding of reality. Formal disclosure may provide validation and reduce isolation from prior stigmatization. However, disclosure could also trigger re-traumatization by bringing suppressed memories or unresolved experiences back to conscious awareness. The ontological impact is therefore variable but generally lower than for those encountering the concept for the first time, though still high due to profound worldview implications.	Experiencers face elevated safety impact due to potential re-traumatization. Many experienter accounts include reports of medical effects, psychological distress, and in some cases lasting fear responses. Disclosure could validate these experiences but also remove protective psychological mechanisms such as denial or dissociation. Healthcare systems currently lack established protocols for supporting experiencers, and stigma has historically prevented many from seeking help, compounding potential crisis responses.

Ontological Impact: 8/9

Safety Impact: 6/9

Classification: HIGH-RISK (≥ 7 on at least one dimension)



Vulnerable Populations

Ontological Impact Rationale	Safety Impact Rationale
Individuals with severe mental health conditions or significant psychosocial vulnerability may experience disclosure as confirming pre-existing beliefs, potentially reinforcing rather than challenging their worldview. For some, disclosure may interact with pre-existing patterns of thinking in ways that increase distress rather than resolve it. Limited access to adaptive meaning-making resources — whether due to mental health conditions or socioeconomic circumstances — can increase the risk of sustained disruption.	For individuals living with existing mental health conditions, a major disclosure event could place significant additional strain on coping resources. Those already managing anxiety, psychosis-spectrum conditions, or other conditions affecting their relationship with reality may face particular challenges in integrating paradigm-shifting information. Maintaining access to usual clinical support, medication, and trusted relationships will be important. The primary risk is that already-stretched coping resources become overwhelmed, potentially affecting engagement with ongoing treatment.

Ontological Impact: 7/9
Safety Impact: 7/9
Classification: HIGH-RISK (≥7 on at least one dimension)



Parents

Ontological Impact Rationale	Safety Impact Rationale
Parents may experience disclosure as challenging assumptions about humanity's place in the universe, but responsibilities toward children provide grounding meaning and pragmatic focus. Concern for family stability often motivates adaptive coping and meaning-making, reducing risk of sustained ontological disruption.	Safety concerns relate primarily to perceived threats to children and family stability. However, parental roles encourage problem-solving behaviours, information-seeking, and community engagement, moderating risk of severe or prolonged disruption.

Ontological Impact: 6/9

Safety Impact: 6/9

Classification: LOWER-RISK (Not ≥ 7 on at least one dimension)



Young Adults

Ontological Impact Rationale	Safety Impact Rationale
Young adults are in active identity-formation phases and may experience existential questioning. However, worldview flexibility and familiarity with speculative cosmological concepts through media and education support adaptive integration of new information.	Safety concerns are typically abstract and moderated by peer networks, digital information access, and psychological adaptability, reducing risk of severe functional disruption.

Ontological Impact: 6/9
Safety Impact: 5/9
Classification: LOWER-RISK (Not ≥ 7 on at least one dimension)



Children

Ontological Impact Rationale	Safety Impact Rationale
Younger children have more fluid cognitive frameworks and are likely to integrate NHI concepts into imaginative or exploratory thinking with limited existential distress. Older children may ask abstract questions, but developmental plasticity supports rapid adaptation when supported by caregivers.	Children's safety responses depend heavily on caregiver modelling. In stable and supportive environments, reassurance and age-appropriate explanation typically prevent severe or lasting disruption. Greatest risk arises where caregivers themselves experience high anxiety.

Ontological Impact: 4/9

Safety Impact: 4/9

Classification: LOWER-RISK (Not ≥ 7 on at least one dimension)

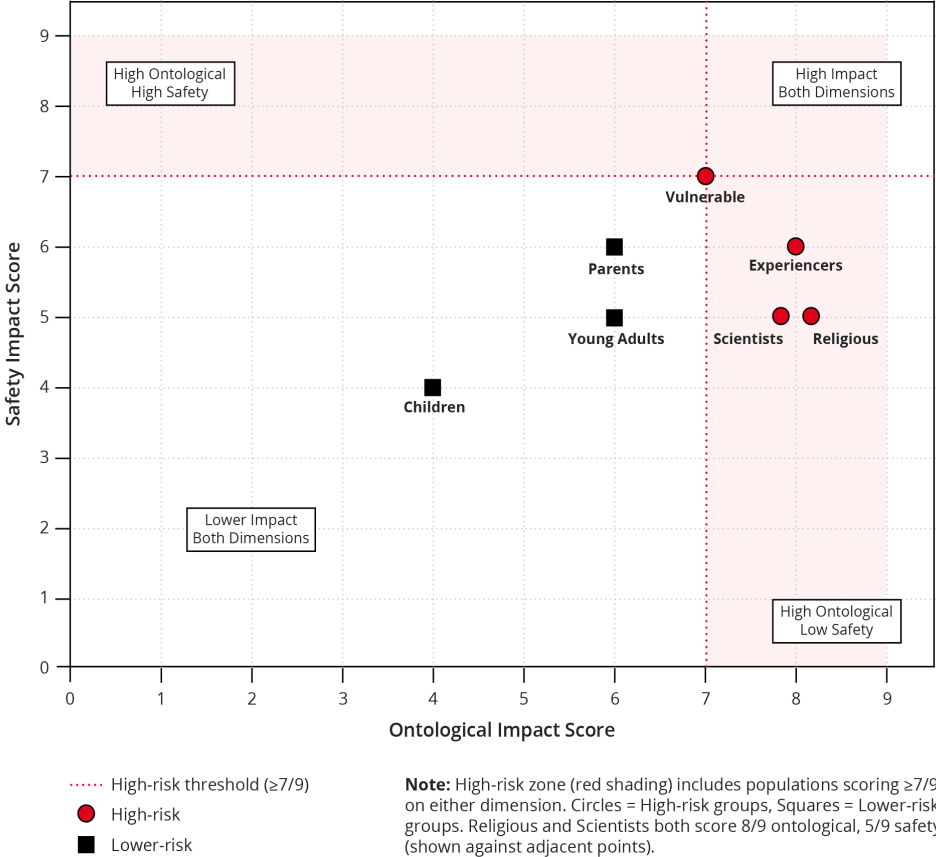


Consolidation of responses

Population Group	Ontological Impact (0–9)	Safety Impact (0–9)	High-Risk Classification	
Religious Communities	8/9	5/9	High-risk (ontological)	
Experiencers	8/9	6/9	High-risk (ontological)	
Scientists	8/9	5/9	High-risk (ontological)	
Vulnerable Populations	7/9	7/9	High-risk (both)	
Parents	6/9	6/9	Lower-risk	
Young Adults	6/9	5/9	Lower-risk	
Children	4/9	4/9	Lower-risk	

The result is the identification of four higher-risk groups who it is plausible to conclude may have a significant adverse reaction to (Scenario 3) disclosure – and we take forward to the next part of the analysis.

Figure 1: Distribution of Population Groups Across Impact Dimensions (Scenario 3: Local Non-Human Intelligence)



Population Estimates for High-Risk Groups

Translating Personas to Population Scale
To estimate the scale of potential mental health impact, we identified UK demographic groups corresponding to the **four high-risk categories** (scoring $\geq 7/9$ on ontological or safety dimensions):

Net High-Risk Population
Recognising substantial overlap between groups, the number of unique individuals affected is lower than the aggregate figure. Nevertheless, the scale remains sufficient to constitute a potential public health emergency: **19.1 million UK adults (35% of adult population)**

Demographic Group	UK Population	Prevalence Rate	Data Source
Very Religious	1.7 million	3% of adults	YouGov 2014
Vulnerable Populations (severe mental health conditions)	10.8 million	20.2% of adults	NHS England 2023-24
Scientists & STEM Professionals	2.8 million	8.5% of workforce	ONS 2022
UAP Experiencers	3.8 million	7% of adults	YouGov 2021

Note: These prevalence rates can be applied to other national contexts with appropriate adjustment for cultural variations in religiosity, mental health service utilization, and STEM workforce composition.

From Population Estimates to Intervention Needs

Conservative Projection Approach

Drawing on Dolan & Zabel (2012) and disaster-response literature (Rostami Zarinabadi et al., 2025), we estimate **10-30% of high-risk populations** may experience adverse psychological effects following paradigm-shifting disclosure.

Why the High-Risk Approach?

The whole-population approach does not account for differential vulnerability and likely overestimates impact on lower-risk groups (parents, young adults, children). Our scaled approach provides a **more conservative estimate**.

Approach	Population Base	Support Range	% of UK Adults
Whole population	54.4 million	5.4-16.1 million	10-30%
High-risk population (our approach)	19.1 million	1.9-5.7 million	3.5-10.6%

This analysis suggests that between 1.9 million and 5.7 million UK adults (3.5-10.6% of the adult population) could plausibly require psychological support or intervention following a high-impact disclosure scenario. These are planning estimates, not predictions.

Would this constitute a public health emergency?

Definition of Public Health Emergency:

"An extraordinary event posing public health risk requiring immediate coordinated action beyond routine service capacity"
(WHO; Cabinet Office)

This scale of demand, combined with temporal concentration, could plausibly exceed routine service capacity and may constitute a public mental health emergency requiring coordinated preparedness planning.

Conclusion: Disclosure scenarios of this magnitude warrant inclusion in systematic emergency preparedness planning and development of surge capacity well beyond existing mental health infrastructure.

Current NHS Mental Health Capacity

Annual referrals (2024): 5.2 million *(BMA, 2024)*

Projection	Additional Demand	Surge over Current Capacity
Lower bound	1.9 million	+37%
Upper bound	5.7 million	+110% (more than doubling)

Critical Factors

- **Temporal concentration:** Need likely concentrated within weeks or months of disclosure, not distributed across a full year.
- **Service capacity:** Even the lower bound would strain existing infrastructure. The upper bound would substantially exceed routine capacity.

Note: These figures are not intended to be definitive predictions. Rather, they demonstrate that there exists a plausible scenario in which intervention requirements could reach levels constituting a potential public mental health emergency.

Methodological Limitations

This Health Needs Assessment provides a planning framework, not precise predictions.

Key Limitations:

Impact Scoring Methodology

- Scores represent structured expert elicitation, not empirical measurement
- Process: Independent scoring by two authors → iterative refinement → external academic review → fourth author validation
- Grounded in stress/coping literature; aims to bound plausible ranges
- Detailed rationale in Supplementary materials

Scenario Constraints

- No direct empirical precedent for validation
- Expert judgment applied to hypothetical but psychologically plausible scenarios

Population Estimates

- Considerable demographic uncertainty
- UK-focused; cultural adaptation needed for other contexts
- Conservative classification thresholds ($\geq 7/9$) reduce overestimation risk

Why Plan Despite Uncertainty? The Precautionary Principle in Public Health

The precautionary principle — well-established in public health emergency planning — supports systematic preparedness for plausible high-impact scenarios even when precise probability cannot be determined.

The asymmetry of outcomes:
The precautionary principle supports systematic planning for plausible high-impact scenarios even when precise probability cannot be determined.

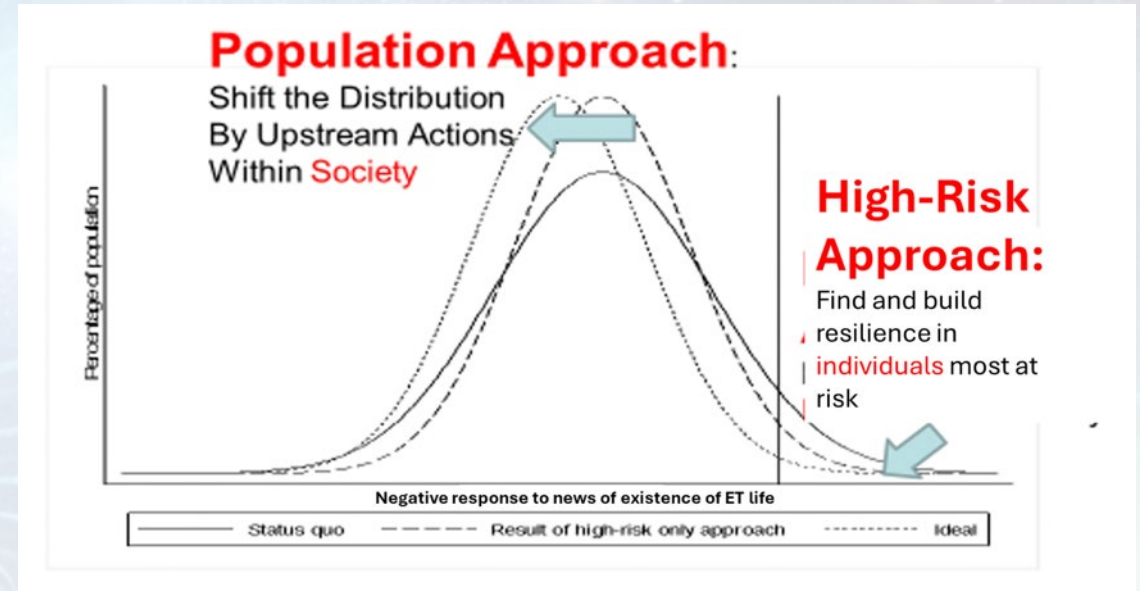
Public health context

Responding to Population-Level Health Events: health needs differ across groups, requiring a variety of approaches.

The Rose Prevention Paradox (1985)

Geoffrey Rose's classic public health principle suggests **two complementary actions**:

- 1. Population Approach:** Shift the distribution
Build general resilience across entire population
Public education and transparent communication
Move the whole curve leftward
- 2. High-Risk Approach:** Target vulnerable groups
Intensive support for religious communities, scientists, experiencers, vulnerable populations
Reduce health inequalities
Early identification and rapid response



Application to Disclosure

Rose argued that **small reductions in risk across an entire population can have greater overall health impact** than targeting only high-risk individuals. However, addressing those at greatest risk is essential to reduce inequalities.

For disclosure scenarios: Both approaches are essential – build societal resilience broadly while ensuring those facing greatest ontological and safety challenges receive appropriate support.

Next Steps - Developing a Public Health-Led Plan

From Assessment to Action:

This Health Needs Assessment identifies vulnerable populations and quantifies support requirements. The next step: develop a comprehensive plan for improving mental health outcomes post-disclosure.

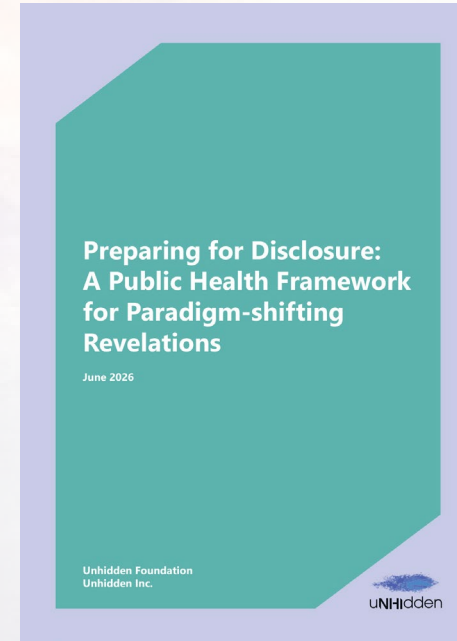
Approach:

Grounded in public health emergency response best practice (pandemics, disasters) while addressing disclosure's unique challenges—particularly ontological shock from paradigm-shifting revelations.

uNHIDDEN has established an expert advisory group to guide plan development.

Theory of Change Framework

- ***Pre-Disclosure:*** Build resilience across populations and within high-risk groups
- ***Post-Disclosure:*** Deploy rapid psychological support, evidence-based interventions, and community networks



uNHIDDEN intends to build on this Health Needs Assessment with the development of a plan, based on public health best practice.

Deliverables:

- Key messages for different population groups
- Roles and responsibilities across sectors
- Implementation pathways for preparedness and surge capacity

Publication target: Second half of 2026

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About uNHIDDEN

About uNHIDDEN:

The Unhidden Foundation ('uNHIDDEN') is a UK not-for-profit organization (est. 2023) advancing public health preparedness for non-human intelligence disclosure.

What we do:

- Develop evidence-based preparedness frameworks for ontological shock
- Conduct research on psychological impacts of paradigm-shifting revelations
- Advocate for coordinated response planning across government and healthcare
- Reduce stigma around anomalous experiences and open scientific inquiry
- Support system-level infrastructure for experiential care

Our Team:

The uNHIDDEN Foundation works with clinicians, psychologists, public health professionals and academic researchers to develop evidence-based preparedness frameworks for paradigm-shifting disclosure scenarios.

Our Approach:

We collaborate with academic institutions, professional bodies, and international organizations to translate research into actionable policy and preparedness strategies.

This document

A systematic health needs assessment for NHI disclosure scenarios, providing a foundation for coordinated multi-sector response planning.

Collaborate With Us

We welcome partnerships with government agencies, healthcare providers, academic researchers, mental health organizations, and international preparedness networks.

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