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Submission ID:	1994593410

Journal of Applied Health Management and Technology Vol 4, No 1 (2022)

Journal of Applied Health Management and Technology

p-ISSN: 2715-3061
e-ISSN: 2715-307X

http://ejournal.poltekkes-smg.ac.id/ojs/index.php/JAHMT

An Overview of Post-Traumatic Stress Disorder (PTSD) Among Flash Flood Victims

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Received: written by the editor; Revised: written by the editor; Accepted: written by the editor
(date of submission, 10pt)

ABSTRACT

Flash flood disaster is a natural disaster that can have a negative impact on victims. The psychological impact caused after the disaster is in the form of Post-Traumatic Stress Disorder (PTSD) which shows several symptoms in the form of Re-experiencing, Avoidance, and Hyper arousal. This research was conducted with the aim of knowing the description of Post-Traumatic Stress Disorder (PTSD) in the victims of the flash flood disaster one year after the incident. The method used in this study is descriptive research with a survey approach. The sample technique used in this study is a purposive technique. Data analysis used univariate analysis to determine the characteristics of the respondents which included age, occupation, gender, education, and description of PTSD symptoms. This study involved 48 people as respondents who showed the characteristics of 70% meeting the PTSD diagnostic criteria after the flash flood that hit their village two years ago. The results of this study can be used as a reference or basis for preparing interventions to improve mental health in communities especially those experiencing disasters.

Keywords: post-traumatic stress disorder; PTSD; mental health; traumatic syndrome

Introduction
(Pendahuluan)

Disaster is incident which threaten and bother pattern life normal Public, as well as cause loss big to life, property and social structure of society beyond capacity to deal with it so that it requires protection and assistance from party others (Harini, 2017) . Disaster specifically flash flood give impact on individual and family that is the disturbance physical and mental problems due to the traumatic event. Other impacts that is raises loss and suffering so that influence aspects life good environment and social. Blora Regency has a level of vulnerability high risk of disaster, both caused by natural factors as well as non-natural factors Most of the area of Blora Regency is located in threat disaster, Among other land landslide, flood, wind nipple pickaxe, and drought (BPBD Kabupaten Blora, 2020). Flash floods has hit in one of the areas in Blora Regency, precisely in the District Banjarejo which soak hundreds House inhabitant. Incident traumatic that give impact on individual and family that is the disturbance physical and mental problems. Not infrequently these mental problems are included in disturbance stressed post traumatized (PTSD / Post traumatic stress disorders). PTSD is a syndrome experienced by

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File name: JAHMT_Cipto_DKK.docx (381.83K)
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someone who experienced a traumatic event PTSD includes 3 symptoms; feeling experience return (re-experiencing), desire to avoid all stimulus which relate with incident traumatic (avoidance), and enhancement awareness which exaggerated (arousal), which is experienced over a period of one month or more (Erlin & Sari, 2020). kindly general condition PTSD thereby will raises impact psychological form disturbance behavior start from worried which excess, irritability, sleeplessness, tension, and various reactions others and can last months, years or up to several decades and may appear after a few months or years after exposure to the traumatic event (Endiyono & Hidayah, 2019). This study examines the overview of PTSD in victims of the flash flood disaster that occurred two years ago in one of the areas of Blora Regency.

Methods
(Metode Penelitian)

This research is a field study in Bogorejo village, Blora district, which examines the psychological symptoms of disaster victims in society. This study was carried out in October 2022 and involved 48 people as respondents. The sampling technique used in this study was purposive sampling in which the researcher carried out a sampling technique according to what the researcher wanted so that the sample could represent previously known population characteristics. PTSD events can be assessed with the PTSD Screening (PCL) instrument from the National Center for PTSD (NSPTSD) which has been translated by Gulo (2014). This questionnaire consists of 17 questions consisting of 3 groups. Questions number 1-5 are included in the re-experiencing symptoms group, questions number 6-12 are included in the avoiding symptoms group, and questions number 13-17 are included in the hyper arousal symptoms group. In determining the scoring statement given the answer choices Always (SL) = 5, Often (SR) = 4, Sometimes (KD) = 3, Rarely (JR) = 2, Never (TP) = 1. Respondents' answers for category 3 -5 is considered to have symptoms while respondents' answers for categories 1-2 are considered to have no symptoms, by following the provisions of the PTSD diagnostic criteria from DSM-IV-TR.

Results and Discussion
(Hasil dan Pembahasan)

Result

The results of this study include the characteristics of respondents and an overview of PTSD criteria in disaster victims as follows;

Table 1. Characteristics of Respondents (n=48)

Demographic Data	PTSD		Not PTSD		Amount	
	f	%	f	%	f	%
Age						
12 – 25 years	0	0 %	6	12 %	6	12%
26 – 45 years	16	34 %	7	14 %	23	48%
46 - 65 years	18	38 %	1	2 %	19	40%
Gender						
Man	2	4 %	2	4 %	4	8%
Woman	32	68 %	12	24 %	44	92%
Education						
SD	25	52 %	4	8 %	29	61%
Junior High School	9	20 %	7	14 %	16	33%
Senior High School	0	0%	3	6 %	3	6%
Profession						
Farm workers	9	19 %	1	2 %	10	21%
Self-employed	2	4 %	5	11 %	7	15%
Doesn't work	23	49%	8	15 %	31	64%

The table shows the demographic data of the research respondents which include data on age , gender, education, and employment. In this study, 12% of respondents aged 12-25 years, 48% of respondents aged 26-45 years and 40% of respondents aged 46-5 years. Based on gender, the respondents in this study consisted of 8% male and 92% female. Meanwhile, based on education level, 61% had graduated from elementary school, 33% had graduated from junior high school, and 6% had graduated from high school. Based on the level of employment, 64% of respondents are unemployed or unemployed, 15% are self-employed, and 21% work as farm laborers.

Table 2. Distribution of frequency and percentage of PTSD features

Description of PTSD	Frequency (f)	Percentage (%)
Experiencing PTSD	34	70%
Not Experiencing PTSD	14	30%
Amount	48	100%

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Based on table 2 it can be seen that as many as 48 respondents who experienced flash floods, as many as 34 people or 70% experienced symptoms of PTSD. While the remaining 13 people or 30% did not experience PTSD symptoms.

Table 3. Frequency distribution of PTSD symptoms among disaster victims

Signs and Symptoms of experiencing PTSD	Frequency (f)	Percentage (%)
Re-experiencing	28	58%
avoidance	6	12%
Hyperarousal	0	0%

From table 2 it can be seen that of the 48 research respondents who experienced PTSD, 34 people or 70% and 14% others or 30% did not experience PTSD. Meanwhile, table 3 explains that of the 34 research respondents, 28 people or 58% experienced re-experiencing symptoms and the other people or 12% experienced avoidance symptoms.

Discussion

This study involved 48 people as respondents, the majority aged in the range of 26-45 years and most of them had post traumatic syndrome disorder. These results are similar to previous research by (Izza & Sugiharto, 2019) which examined the incidence of PTSD in residents who experienced tidal floods, the majority of whom were 30 years old. Based on the age classification according to WHO, this age range is in the middle adult age category. This age is a productive age in making decisions that are flexible because usually they have to be forced to develop and be involved in changes at home, work, and personal residence and individuals begin to have many tests in achieving goals and life relationships both within themselves, socially and at work. The results of this study indicate that the most respondents who experience PTSD are female. These results are in accordance with the opinion of Sadock, BJ & Sadock, VA in (Galo, 2014) which suggests that the prevalence of PTSD is higher in the female population. This is likely influenced by the level of resilience possessed by Nias women after the disaster. According to Baustita et al., resilience is an extraordinary ability in individuals to survive in the face of very severe suffering, to bounce back in the face of great life difficulties, and live a relatively normal life (Creamer et al., 2001). The National Institute of Mental Health (NIMH, 2008) states that resilience factors for PTSD include having support from other people such as friends and family, having a support group after a traumatic event, feeling better about reactions that arise in facing danger, having coping strategies that are effective, able to act and respond effectively rather than feel fear. The more these resilience factors are owned by individuals, the risk of suffering from PTSD will be reduced (Galo, 2014). Demographic characteristics of the education of respondents in this study the majority graduated from elementary school. This result is in line with a previous study by Izza which stated that the average population affected by PTSD had an elementary school education. In general, the aspect/level of education is related to a person's level of knowledge about something. Basic knowledge about natural disasters, such as their characteristics, symptoms, causes and consequences, is always used as the starting point for one's actions and awareness. So with the capacity of knowledge is expected to be the basis of one's actions. Low education greatly influences a person's mindset. The higher a person's education level, the easier it is to think rationally and be able to describe the problems faced (Kasana in (Izza & Sugiharto, 2019)). While the majority of respondents in this study did not have a job. Low income and social status affect the incidence of PTSD, not being able to guarantee to fulfill daily life and family responsibilities if married.

This study illustrates that of the 48 respondents involved, it was found that 70% or a number of 34 people met the PTSD diagnostic criteria. Of the 34 people, it was found that 58% experienced re-experiencing symptoms and 12% experienced avoidance symptoms. The results of this study are no different from previous studies in Patani, Southern Thailand, where as many as 76.53% of victims of traumatic events from the conflict in Thailand experienced similar PTSD symptoms (Adnan Kamah, 2020). The incident of flash floods in the village of Banjarejo, Blora has occurred approximately 2 years ago. PTSD symptoms can come and go throughout the patient's life, so that it can interfere with work function and life effectiveness. The results of this

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re-experiencing symptom can be as if the sufferer is experiencing the traumatic event again, the individual often remembers the incident and has nightmares about it. Those with PTSD can exhibit emotional detachment, social isolation, and loneliness. A condition in which a person has feelings and thoughts that are getting worse after trauma. This symptom is characterized by the inability to recall important points from the traumatic event experienced, having thoughts about oneself or the surrounding environment, blaming oneself or the environment, blaming oneself or others as the cause of the traumatic event, feeling isolated, decreased interest in activities, negative emotional feelings (such as fear, horror, and shame), and difficulty expressing positive emotional feelings (Erlin & Sari, 2020) . There are several factors that cause why this symptom is still being experienced, such as a new environment, having to start life from scratch because of lost property, and the relocation site which is not far from the location of the landslide incident so that it continues to be exposed to stimulation, this causes an increase in the burden psychological experience experienced by respondents (Endiyono & Hidayah, 2019) . Hatta (2016) explains the risk factors for experiencing PTSD are living in trauma and danger events, having a history of mental illness, getting injured, feeling scary, helpless and so on (Tri Aidatul Khasanah, 2020) . While factors that can reduce the risk of PTSD are seeking support from others such as friends and family, seeking group support after a traumatic event, feeling good about one's own actions in the face of danger, etc. PTSD symptoms can come and go throughout life. Sufferers, so that it can interfere with work function and the effectiveness of life. The results of research conducted by Giacco, Matanov, Priebe (2013) stated that PTSD disorders are closely related to a decrease in a person's quality of life or Subjective Quality of Life (SQOL) (Galo, 2014) . Natural disasters call for a public response to provide humanitarian assistance in any form victims need such as health promotion assistance, reconstruction and recovery and the provision of basic needs (Zainal et al., 2020). Based on previous studies on the incidence of PTSD in China, there are various therapies that have been adopted for the initial management of PTSD such as forward treatment, five key principles for aiding psychiatric casualities, electrical treatment, psychotherapy with assistance of drug, in vivo exposure therapy, hypnosis, and group therapy (Zhou et al., 2021).

Conclusion
(Simpulan)

The results of this study involving 48 people from Banjarejo village as respondents obtained an illustration that 70% or 34 of them met the diagnostic criteria for post traumatic syndrome disorder (PTSD) after the flash flood that hit their village in 2020. Of the 34 research respondents, 28 people or 58% experienced symptoms of re-experiencing and the other people or 12% experienced symptoms of avoidance. The results of this study can be a source of information related to the incidence of PTSD in disaster victims for conducting studies on effective therapeutic management to reduce or cure PTSD symptoms. Besides this, it is necessary to improve psychological health, especially for respondents who experience PTSD in the form of psychological therapy so as to reduce PTSD symptoms in disaster-affected communities.

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