

Psychological Effects among Internally Displaced Persons (IDPS) Residing in two Districts of Sindh

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ABSTRACT

Objective: To identify the psychological effects of IDPs and to assess the psychological illnesses.

Study Design: Descriptive Cross Sectional study

Place and Duration of Study: This study was conducted at shelters surrounding the campus of Liaquat University of Medical & Health Sciences, Jamshoro and New Sabzi Mandi, Hyderabad after 1 month of the flood.

Materials and Methods: During study 300 affected Internally Displaced Persons (IDPs) were examined for physical, social and psychological effects after one month of flood through structured interviews. We focused on the behavior and activities according to Diagnostic Statistical Manual of Mental Disorders IV (DSM-IV) to identify psychological effects. Beside that the history of diet manual in children, male and female gender was addressed.

Results: Out of 300 respondents, the mean age was 40 years. According to DSM IV, 134 (44%) participants met the criteria of depression. 30 (10%) IDPs reported aggression. 26 (9%) IDPs met the criteria of post traumatic stress disorder (PTSD), 110 (37%) IDPs reported lack of sleep.

Conclusion: Geographically Pakistan faces frequent natural calamities. In recent past Pakistan has suffered a lot due to floods. There is need to focus on mental health of internally displaced persons which is most neglected aspect during and after flood and disasters. The government and nongovernment organizations should make implementing policy to take care of post health issues of IDPs.

Key Words: Psychological effects, Internally Displaced Persons, Diagnostic Statistical Manual of Mental Disorders IV (DSM-IV).

INTRODUCTION

Pakistan was hit by a devastated flood in July 2010 which spread all over the country and it wrecked various cities & villages. The effect of flood was such a huge that it damaged the infrastructure including homes, health care facilities, roads, communication system, electricity, etc. The affected areas were almost inaccessible. The intensity of flood was such that people didn't get time to save their livelihood and rush towards safer places. People were homeless and were forced to live under open sky till they were provided shelter.

Disaster is a sudden and terrible event which can be natural or man made, leading to great destruction in human life and affecting physical, mental and social well being of individuals, families and communities. Geographically Pakistan is more prone to natural disasters such as floods, cyclones, earthquakes, etc. Pakistan has highest annual average number of people being physically exposed to floods occurring due to storm system begin from Bay of Bengal during monsoon period.¹ The flood of 2010 was worst flood of this century which affected almost whole country. It will take many years to overcome the losses. The scale of disaster was worse than Haiti's earthquake and Pakistan earthquake of 2005.^{1,2}

Around 14 million people were affected by the floods alone in year 2010 Pakistan which created multiple losses for whole society. It has been estimated in terms of loss and damages that over 1200 people died and 2, 88,000 homes damaged or destroyed. Damage to agriculture sector was recorded 100% in these areas especially in Sindh, Punjab and Khyber Pakhtunkhwa provinces.³

The flood affectees residing in shelter camps around LUMHS Jamshoro campus and around New Sabzi Mandi, Hyderabad were living in open sky and in temporary shelters, exposed to unfamiliar surroundings without privacy and basic facilities which lead towards unrest, lack of sleep, depression, stress and anxiety. The level of depression and anxiety increases in the flood affected population.⁴ The flood survivor's mental health deteriorates due to uncertain future.⁵ The unavailability of social support is one of the factors for meager mental and physical health.⁶ Old age persons during floods were more prone to get psychological stress and required special attention.

MATERIALS AND METHODS

A Descriptive Cross Sectional study was conducted at shelters surrounding the campus of Liaquat University of Medical & Health Sciences, Jamshoro and New Sabzi Mandi, Hyderabad after 1 month of the flood. A random sample was collected & sample size was 300

IDPs. Inclusion criteria for the sampling was (1) IDPs. (2) Age 12 years onwards. (3) IDPs who were agreed to participate. Exclusion criteria: children under 12 years and those who were not willing to participate were not included. Verbal formal consent was obtained from every IDP.

RESULTS

According to DSM IV criteria of disease, 300 IDPs were interviewed for insomnia, depression, anxiety, PTSD and aggression. Unavailability of basic facilities, lack of privacy and damage of property has been identified as risk factors for psychological illnesses such as stress, anxiety and aggression. The mean age of the respondents was 40 year. The age range for the sample was 12 yrs to 80 yrs. Every person was met the criteria of anxiety. Twenty six (9%) IDPs reported with screaming by dreaming, crying severely, nightmares, severe fear and unable to sleep, these all signs and symptoms are according DSM-IV meeting the criteria of PTSD. One hundred thirty four (44%) participants met the criteria of DSM-IV with the symptoms of depression such as sad mood, not taking interest in his/her surrounding and personal Hygiene. One hundred ten (37%) IDPs reported insomnia, lack of privacy and lack of basic facilities. These factors affect their attitude and behavior which lead to thirty (10%) aggression.

Table No.1: Table shows percentage of psychological illnesses

Percentage of psychological illness	Depression	Insomnia	Aggression	PTSD
	134(44%)	110(37%)	30(10%)	26(9%)

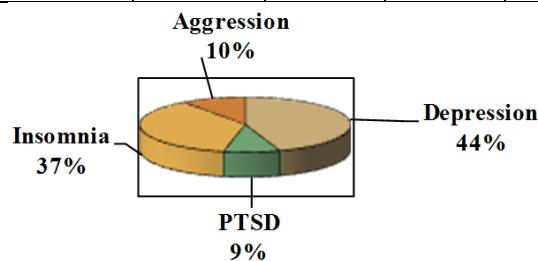


Figure No.1: Percentage of psychological illness

DISCUSSION

Pakistan has suffered a huge loss due to disasters in last few years. The impact of July 2010 floods was felt from north to south of Pakistan. The behavior of displaced population changes which has harmful impact on health conditions and the level of mental stress increases during displacement.⁷ Less attention has been given to post disaster psychological impact. There is need for the mental health assessment plan during and after the disasters to assess the mental health and to help in rehabilitation.⁸ We assessed 300 flood survivors for post traumatic stress disorder depression, insomnia and

aggression after one month of flood. The percentage of depression and post traumatic stress disorder was high. Despite high prevalence of stress disorders and depression in flooded populations, the mental health has not been given priority during relief.⁹ In our study 44% of participants met the diagnostic criteria of depression. In a study conducted on flood affected households of UK around 35.1% depression was found positive.¹⁰ It is evident from the research that the risk of Depression and post traumatic stress disorder in displaced population due to disaster is more.¹¹

CONCLUSION

We observed that the population residing in flood affected areas is exposed to great risk of illnesses and the survivors require more attention towards health. Besides higher risk of morbidity, injuries and communicable diseases, the magnitude of psychological problems such as anxiety, depression, stress, sleeplessness, PTSD increases. There is need for training and social mobilization for future planning in communities which suffer from frequent disasters. Our experience shows that mental health during and after disasters has been neglected issue. There is need for long term research to classify behavioral and psychological effects of flood on individuals of all ages. Such kind of studies will help the government and the policy makers to understand and make guidelines for the better care for health of population living in high risk areas.

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