Post Earthquake PTSD Among Haitian Survivors Living In Florida

Posted on September 22, 2018

Problem Statement

Research on post-traumatic stress disorder (PTSD) affecting the Haitian population in Orlando. The majority of the residents show symptoms of PTSD, proving that the effect is of a large scope, hence evidence of a public health problem that needs addressing. Studies show that individual responses to traumatic events differ, and their reactions are heterogeneous (Messiah, Vaiva, Gokalsing, and Jean, 2015). Positive and negative events in an individual's life affect his/her mental state (Jeronimus, Ormel, Aleman, &Riese, 2013). Ormel, Jeronimus, Kotov, and Oldehinkel (2013) also asserted that there is a complex amalgamation of factors that lead to the development of a mental disorder during an adverse event. It affects the development of the community negatively since, under some circumstances, people will not participate in community developments for fear of what they see or bad memories. However, these two studies and others do not provide sufficient information on the mental health of individuals after the occurrence of a disaster (Jeronimus, 2016). In this regard, there is a gap in the studies on PTSD that might occur after a scary incident or disaster (Jeronimus, 2016). Conducting the research will help to understand the relationship between subsequent traumatic events, such as natural disasters,s and the extent of PTSD over time through sampling, questionnaires, or comparing the number of people with traumatic stress with the whole society.

Sonnenberg, Deeg, Van Tilburg, and Beekman (2013) confirmed that females are more susceptible to a variety of mental problems, such as PTSD, especially after the occurrence of extreme natural disasters. As a result, numerous scholars have focused on the prevention of depressive and mental conditions in women (North & Pfefferbaum, 2013). Jeronimus, Kotov, Riese, and Ormel (2016) posited that mental conditions still occur due to other conditions, which may include a lack of finances; thus, there is a need for the exact relationship between PSTD and scaring or disastrous events. The implication here is that better therapeutic techniques need to be identified when dealing with mental disorders (Jeronimus et al., 2016). As such, it was imperative to determine the risk factors that occur before a disaster, during adversity, and after its occurrence to deal with psychopathological conditions (Jeronimus et al., 2016). The apparent lack of effective treatment methods emanates from the gap that exists in the understanding of the mental issues that take place after a disaster (Sonnenberg et al., 2013). The findings on causes of traumatic issues offer better psychopathological approaches through an understanding of the mental problems that take place in an individual after a disaster (Sonnenberg et al., 2013).

Purpose

The purpose of the present research is to understand the different methods to get a quantitative analysis of the relationship between successive traumatic incidences and the onset or progression of mental depression with time. I will use the Haitian population living in Orlando who survived the 2010 earthquake in Haiti to gather data. Haiti is vulnerable to earthquakes and other natural disasters. The succession of natural disasters, especially the multiplicity of floods, earthquakes, and cyclones, amplifies the psychological results of the earthquake that took place in the year 2010 (Jeronimus et al., 2016). Maschi, Viola, and Morgen (2014) ascertained that exposure to a sequence of significant adverse events produces extremely traumatic results as compared to a disaster that takes place singly.

In this case, the quantitative study would seek to identify the number of people who directly or indirectly develop mental health problems following a traumatic incident. Therefore, the dependent variable in this study is categorically disaster, specifically the earthquake that occurred in Haiti in 2010, while the independent variable is PTSD. The observed correlation between the variables helps to assess the null hypothesis that PTSD is linked to disasters.

Significance of the Study

Maschi, Viola, and Morgen's (2014) study affirmed a significant proportion of people who experience disasters for a considerable duration tend to develop mental problems. Cerda, Bordelois, Galea, and Koenen (2013) also revealed that most traumatic events arouse stressors that create mental issues. These studies point to the unique vulnerabilities of the individuals exposed to the trauma. However, most of the studies are based on theoretical findings concerning the causes and effects of trauma. Most importantly, no empirical study has been carried out in Haiti (Maschi, Viola, and Morgen, 2014). Therefore, this report could contribute to the existing studies by offering adequate empirical, up-to-date data related to the link between disasters or traumatic events and individual mental health.

The findings offer information that might be used to develop better approaches when dealing with mental health issues in the aftermath of disasters. The data could provide valuable background information for those interested in assessing the impact of disasters on people's mental health, also known as PTSD, through sampling and interviewing. Equally important, the findings on the extent and duration of exposure to traumatic events as a cause of PTSD would help health providers in understanding, intervening, and treating mental problems. In turn, cases of PTSD would decline in societies that often experience disasters.

Background

1. Every disaster retains an imprint on an affected population, as it allows a collision between physical and psychological consequences (North &Pfefferbaum, 2013). The selected studies that confirm this fact are described.
2. Curtis, Aten, Smith, and Cuthbert (2017) assessed the mental health impacts of the Upper Big Branch disaster that occurred in Raleigh County, West Virginia, in 2010. The authors concluded that the event led to cases of mental health among those directly or indirectly affected by the incident. The study used empirical data, thus offering valuable data that supports the hypothesis that disasters lead to mental health issues. Fergusson, Horwood, Boden, and Mulder (2014) assessed the impact of broken relationships on the mental health of young people in Canada. The study involved 250 respondents, and data was collected using questionnaires distributed to focus groups. The authors analyzed the data through the descriptive approach and concluded that unstable relationships cause mental disturbances among affected individuals.
3. Jeronimus et al. (2013) studied the impacts of traumatic incidents on individual psychological well-being. The research affirmed the role of both psychological and physical factors, showing that their amalgamation synergizes and leaves indelible marks on the psychological well-being of the affected individuals. Messiah, Vaiva, Gokalsing, and Acuna (2016) described the interaction and impacts of these forces prior to, during, and after the 2010 Haiti earthquake. The study found a considerable linkage between the severity of PTSD symptoms and traumatic events. According to Messiah et al. (2016), such incidences worsen the symptoms, thereby making the victims mentally incapacitated.
4. Sonnenberg et al. (2012) further revealed that women are more vulnerable to the development of mental conditions after such an occurrence. However, the researchers noted the need for further studies since some of the people involved in the study might have intentionally offered misleading information to gain sympathy from the interviewees.
5. Despite the concern raised by Sonnenberg et al. (2012), the studies indicate a linkage between traumatic incidences and mental disorders. Nonetheless, comprehensive empirical studies are needed to ascertain precisely the correlation between the variables.

Framework

The theoretical framework for this study would entail a comprehensive study of both behavioral and social theories of a population that has been affected by a natural disaster. One theory to support this study is social support and social network theory. With PTSD coming prior to a disaster, the Haitian population may feel socially marginalized living in one centralized environment. This theory seeks to socially support the disadvantaged psychologically and mentally; hence, it would come in handy to ease the effects of PTSD.

Research Questions

The research questions are the following:

What is the estimated number of people with PTSD in the Haitian population in Orlando?

How many people with PTSD symptoms were directly or indirectly affected by the earthquakes in Haiti?

The extent of effect within the different age brackets (children, youths, and the elderly), adversely affected by the earthquake hence developing PTSD.

The average time it takes to develop PTSD among survivors of a disaster.

Nature of the Study

The study is quantitative in nature and uses a causal-comparative approach. Levi-Belz (2015) suggests the use of this strategy in quantitative studies to identify a relationship between variables. The author used the approach in his study to delineate stress-related growth. The approach helps in getting knowledge about the cause of differences in mental health status that exist among those exposed to traumatic incidences and those who have not undergone such situations.

Possible Sources of Data

I will use secondary data from various sources. These include peer-reviewed scholarly journals related to the area of study. The journals were obtained from Google Scholar using keywords such as *Impact of Traumatic Incidences on Mental Health* and *Causes of PTSD*. The other sources of data include government reports and information from various disaster mitigation programs in relation to victims' development of mental depression.

References

Cerda, M., Bordelois, P. M., Galea, S., Norris, F., Tracy, M., &Koenen, K. C. (2013). The course of posttraumatic stress symptoms and functional impairment following a disaster: what is the lasting influence of acute versus ongoing traumatic events and stressors? *Social Psychiatry and Psychiatric Epidemiology*, *48*(3), 385-95.

Curtis, J. B., Aten, J. D., Smith, W., Davis, E. B., Hook, J. N., Davis, D. E.,& Cuthbert, A. D. (2017). Collaboration between clergy and mental health professionals in post-disaster contexts: Lessons from the Upper Big Branch Mine disaster. *Spirituality in Clinical Practice, 4*(3), *193.*

Fergusson, D. M., Horwood, L. J., Boden, J. M., & Mulder, R. T. (2014). Impact of a major disaster on the mental health of a well-studied cohort. *JAMA Psychiatrie,71*(9), 1025-1031.

Jeronimus, B. F., Kotov, R., Riese, H., &Ormel, J. (2016). Neuroticism's prospective association with mental disorders halves after adjustment for baseline symptoms and psychiatric history, but the adjusted association hardly decays with time: a meta-analysis on 59 longitudinal/prospective studies with 443 participants.*PsychologicalMedicine, 46,* 1–24.

Jeronimus, B. F., Ormel, J., Aleman, A., Penninx, B. W. J. H., &Riese, H. (2013). Negative and positive life events are associated with small but lasting changes in neuroticism. *Psychological Medicine, 43*(11), 2403–2415.

Levi-Belz, Y. (2015). Stress-Related Growth among Suicide Survivors: The role of interpersonal and cognitive factors.*Archives of Suicide Research, 19*(3), 305-320.

Maschi, T., Viola, D., &Morgen, K. (2014). Unraveling trauma and stress, coping resources, and mental well-being among older adults in prison: empirical evidence linking theory and practice. *Gerontologist, 54*(5), 857-867.

Messiah, A., Vaiva, G., Gokalsing, E., Tempier, R., Jean, N., & Acuna, J. M. (2016). Mental health symptoms in post-earthquake Miami Haitians: Cumulative effect of disaster-related stressful events. *International Journal of Mental Health & Psychiatry, 1*(3),1-56.

Ormel, J., Jeronimus, B. F., Kotov, R., Riese, H., Bos, E. H.; Hankin, B., Rosmalen, J. G.M.; Oldehinkel, A. J. (2013). Neuroticism and common mental disorders: Meaning and utility of a complex relationship. *Clinical Psychology Review, 33*(5), 686–697.

Sonnenberg, C. M., Deeg, D. J. H., Van Tilburg, T. G., Vink, D., Stek, M. L., & Beekman, A. T. F. (2013). Gender differences in the relation between depression and social support in later life. *International Psychogeriatrics, 25*(1), 61-70.