

Health Psychology International

Psychological Impact and challenges of the Tsunami disaster: A Report from an EHPS member in Indonesia and a Volunteer Psychologist in the Field

Recently in Indonesia a massive catastrophe shacked and shocked the area, and the "impact waves" of grief and solidarity overcame geographical barriers, since many thousands of people, from all around the planet, were affected by the Tsunami. This tragic event brought to light old new reflections, and required the help of health experts to asses, intervene and bring life back to a "normal process" in the affected areas. Psychologists were called to the area. In the piece that follows we will read about what happened in Indonesia and what is going on in terms of the adaptation to a new life of the most affected populations. The hardship and challenges for the people will be discussed using the invaluable experience of a volunteer psychologist on the field. Our thanks go to Margaretha, EHPS member from Indonesia, who made this piece possible and also to Kuriake, who brought the knowledge of the field to this reflection.



The main aim of this piece is to reflect upon how the tsunami disaster affected people in some of the destroyed Indonesian areas. Figures on the number of victims brought up by the Tsunami are not clear, but the impact is obvious. According to *Research and Documentation of Acehkita* the number of people dead was 173,981 (www.tokohindonesia.com/berita/berita/2005/tsunami/index.shtml); the *Bulletin no. 39. Bakornas* estimates the number of deaths as 108,110, and the number of missing people as 127,749.

In face of these data some questions are unavoidable: Where are the missing people? What happen to them? The answer is as fuzzy as the figures: they might be dead or dislocated from Aceh in refugee camps. The uncertainty associated with the different "bits and pieces" of information circulating around the area increases difficulties in the effort to reunite families. Especially poignant is the reunion of parents and their children. Most of the children have great difficulties in finding their parents because there is no valid data about the identity of the ones missing.

The impact of this natural disaster on the Health Care System is not only impressive through the figures concerning death and dislocated people but also through the burden on the different health institutions. Data from the Ministry of Health (from 26th January 2005), revealed that 3,296 wounded people were being cared for at the hospital and 56,381 were being cared for in a day-care system (www.acehkita.com). Based on mass media reports, some Tsunami victims are also located in Mental Health Hospitals due to psychological problems, but no official figures about the prevalence of such cases are available. From our own observations in the field, we see numerous psychological problems in the tsunami victims. These problems range from mild depression to post-traumatic stress disorder. Psychological problems are also found amongst people injured during the event, making the recovery process longer and more difficult, hence increasing health care costs. Motivational levels to heal are sometimes too low, bereavement is very common and to recover means, in many cases, to face a new life - a life without their loved ones! The psychological problems encountered can also be associated with the attributions people make. Most of Aceh people think that the disaster was caused by their own sins (internal attribution). They believe they have sinned in almost all aspects of their life (global attribution), and almost every time (stable attribution). These attributions increase their feelings of helplessness. For psychologists intervening in the impacted area, the intervention process uses the tool of cognitive restructuring, emotional coping and also God as a co-therapist. People pray to God in a continuous way (Moslem people call it Dzikir, it is similar to litany in Rome Catholic religion).

A problem that the refugees will soon be facing will be the move from the camps established immediately after the Tsunami to new places being prepared by the



Indonesian government. Many refugees don't want to leave the camps because they realize that they will live alone. They will not be going back to live with their family anymore.

The vast majority of them come from extended families. In the camp, the feeling of belonging to a wider group seems to protect them from facing the hard reality of the new life that will unfold. Although the Indonesian government tries to group people based on their last community, this is a very hard and strenuous task, and sometimes not very successful since most of the people are spread across many different areas.

Another topic of uncertainty is economic survival; people affected by this catastrophe saw their places of work destroyed. These refugees need self-empowering strategies before moving to the new places provided. Almost all family, social and economic structures, either formal or informal, were destroyed. Consequently after moving to these new places provided by the Government, they need to be supported especially for basic needs such as food, clothes, and education, until they achieve an autonomous life. The question is when can they be autonomous? And what can the Government and experts do to foster this autonomy?

Lately, many of the volunteers that dedicated their expertise to the areas most impacted by the Tsunami (physicians, psychologists, educators, etc.) are returning to their place of origin due to the fact that their finances and energy levels have reached their limits, and also to resume their own jobs. Furthermore, the Indonesian Government decided to impose a restriction on the presence of foreign volunteers. They must leave Aceh by the end of March this year.



The problem is becoming more difficult because of the socio-political condition. Rumours about the safety of refugees and the volunteers increase the feelings of uncertainty on the future. There are some rumours that people from Freedom of Aceh Movement (GAM), attack both volunteers and refugees, and that non-Moslem volunteers are forbidden to help Aceh people. However, according to Kuriake (volunteer in the field) these rumours have no foundations in reality and seem to take place outside Aceh.

The conditions of Nanggroe Aceh Darussalam and North Sumatera Province influenced people from other provinces. Most of the volunteers return home in traumatic states because they faced extreme conditions in Aceh and North Sumatera. Nowadays, there is a long unbroken wave of psychological problems in Indonesia. It steams from disaster areas and spreads into other areas. We hope that Indonesian psychologists can help them optimally.

Semarang, 19th February 2005

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