Paper Title

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Discussion Research

Natural disasters like flood and earthquake impose significant symptoms of emotional distress. When such disasters strike, health and other emergency departments have to deal with multiple problems. Homes are damaged and the survivors have to experience not only physical injuries but also their mental health is affected. Two most common and widely studied mental health distresses are depression and post-traumatic stress disorder also known as PTSD. A recent data suggested that the estimate of depression in natural disaster survivor is 5-50%. It is also proved that adolescents have higher depression rates than any other age groups. These findings are important to design effective depression screening tools resulting from a natural disaster (Harville, Jacobs, & Boynton-Jarrett, 2015). The experience during natural disasters like getting trapped can be more indicative of PTSD than depression. Property damage and loss of basic resources are also some of the aftermaths of natural disasters that leads to depression. The public health is now paying attention to both physical and mental conditions of such populations. Therefore, nurses are trained in such a way that they deal with utmost delicacy while treating such patients so that they can come back to normal life (Korteweg, van Bokhoven, Yzermans, & Grievink, 2010).

Dealing with PTSD and depression in patients is a public health goal now, especially in a vulnerable population. Extensive research has suggested that both adults and adolescents suffer from depression and other health issues as a result of natural disaster. Trauma history and social support emerged as an important indicator of depression in adolescents. While property damage and losing social status was causative depression agent in adults.

PTSD is associated with facets of an actual disaster like being trapped in a building as a result of the flood. Depression is aftermath of disaster, like in case of relocation when one's social life gets disturbed then most adults feel useless and become depressed. While making policies for such individuals, the public health strategists suggest that nurses should be humble and they should keep in mind the history of the patients while treating them. Most nurses ask questions about their past and try to assess their past traumatic experiences. They also ask queries about the calamity's events and associated stressors to understand the degree of emotional stress. They focus on psychological factors such as social support that can be effective while assessing such populations (Cohen et al., 2016).

As community health nursing (CHN) relies heavily on the organized process of designing and providing health facilities to improve the health of masses. Therefore, the suggestions and findings in this article can be of great help. Because the amount of stress one pass through as a result of a natural disaster is huge. When the victims are relocated they also struggle with other traumas so it is better that the nurses ask them deep questions related to previous traumatic encounters, by doing this, they can assess the amount of stress they are going through and they can treat such patients more effectively.

References

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