

AFTER EFFECTS OF ARMY PUBLIC SCHOOL (APS) TERRORIST ATTACK ON FIRST RESPONDERS

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ABSTRACT: *This research study was conducted to know the after effects of Army Public School Terrorist on first responders in District Peshawar. Two types of first responder participated in the rescue and recovery process. First the trained emergency rescue service workers and 2nd the untrained bystanders. This is a comparative study in which the responses of both types of first responders on impact of event scale are compared. A sample of 40 graduate participants, age ranges from 25-40 was taken, they were all males. Twenty of them were trained rescuers of operational category from Emergency Rescue Service for rescue 1122 Peshawar and the remaining twenty were those bystanders who participated and helped the rescue agencies during rescue and recovery process. The results supported the hypothesis of the study and a little differently was found. Results of the study were significant on 0.01 levels. Mild range of pot-traumatic stress disorder on Impact of Event Scale was found. From the literature and the results of the study it was concluded that the trained emergency rescue workers will be less affected as compare to untrained local community personals. The results may be generalized by studying other agencies working in emergency situations.*

Keywords: Aftereffects, pot-traumatic stress disorder, Trained Rescuers, First responders.

INTRODUCTION

The after effects produced by these unexpected events are called traumatic disorder. In the acute cases it is called as acute stress disorders but when the symptoms stay for a long time it is called as post-traumatic stress disorder. It is an anxiety disorder which effects those individuals who himself experience or witness a violent or life threatening situation. Fear in these violent and life threatening situations is natural. This fear triggers many changes in the body within a second to prepare the body for fight or flight response. This is a healthy response and is necessary for the protection of humanbeing. Individuals with post-traumatic stress disorder (PTSD) may feel stressed and frightened even the incidence had gone (PTSD National Institute of Mental Health). The important traumatic events which may causes ASD and PTSD include war, flood, terrorist attacks and suicidal blasts, death of loved one, sexual and physical abuse, kidnapping, mental or physical torture by someone or witnessing of serious injuries in road traffic accidents etc. Post-traumatic stress disorder can be produced both in man-made situations or natural disasters. In these situations mostly the individuals have no control over hat is happening. Everyone feeling confused and angry [1]

In most cases these symptoms produced in the result of this event may be diminished with time, but in some cases it may be prolonged to months or years and lead to some other psychological disorders. Disasters are viewed as a collective experience. Sexual or physical abuse road traffic accidents may become disasters when a large number of people are affected [2].

Symptoms of post-traumatic stress disorder can be divided into three categories.

1. The Re-experiencing Symptoms.

Re-experiencing symptoms include bad dreams, nightmares or flashbacks and frightening thoughts.

2. The Avoidance Symptoms.

This category of symptoms include emotional numbness, angry, worry, feeling of guilty, loss of interest in

pleasurable activities and trouble to remember something about the event.

3. The Hyper arousal Symptoms.

In this category of symptoms, there is difficulty in sleeping, feeling tense, exaggerated startle response, and loss of appetite and lack of concentration [3]

Feeling of symptoms after these incidents is natural, but some of the people produce severe symptoms and some people not. There is also a difference in the symptoms of children and adults. Children are more vulnerable to post traumatic stress disorder and they are more affected (PTSD National Institute of Mental Health). Some of the affected people may develop symptoms of sever anxiety, dissociative symptoms, sleep disturbance and lack of concentration. But it is still unclear why some people are effected more seriously and the others not. According to the previous researches on post-traumatic stress disorder there prevalence rate varies from country to country or among population. Prevalence of PTSD varies from 0.3% in China to 6.1% in New Zealand and in general US population the prevalence of PTSD is round about 6.8% the rate increases to 19% to 75% among crime victims, the rate is higher up to 80% among rape victims. The prevalence rate of PTSD among search and rescue workers is 25% and 21% in fire fighters who had no prior training of facing disasters [1].

Post-traumatic stress disorder is related to some neurobiological abnormalities which may increase the vulnerability to chronic diseases by weakening the immune system. Research has also shown that people with two or more childhood traumas have elevated C-reactive protein. Hypertension has also associated with hyper arousal a diagnostic symptom of PTSD [4].

Frequent exposures of the rescuers to critical incidences are part of the job which is stressful for these rescuers. They are confronted to the devastating impacts of these horrific situations. The ambulance personals are it risks producing unwanted symptoms [5]. Emergency Rescue service helps the people in troubles therefore these workers are mostly exposed and they deal different events where innocent peoples are

crying for help. The rescuers are therefore vulnerable and they produce symptoms of acute and chronic stress disorder. Reaction to these events is a normal behavior and this is a part of their duty [6]. Mostly these emergency rescue workers produce the ability to cop these stressors because they are dealing with these situations on daily bases. This ability of human being is called as resilience. It is common and important human response to these traumatic events. Development of resiliency depends upon both individuals and environmental factors. The individual factors include self-related factors while environmental factors include the nature of severity of the event, number of victims and duration of exposure etc. [7].

Mostly in Pakistani culture at the time of any unexpected event two types of first responders participate. First the trained emergency rescue service workers. They rushed to the effected area when they receive any information. They have a complete system. On the other hand, untrained local communities also trying to help the effected community. Mostly they are eye witnesses of these events.

The objective of the study was to explore the aftereffects of Army Public School terrorist attack on first responders. The following hypotheses were formulated.

Hypotheses

1. Untrained first responders (local community personals) were more affected by Army Public School terrorist attack as compare to trained first responders (Rescuers).
2. There is a significant difference between the aftereffects of Army Public School terrorist attack on trained and untrained first responders.

METHODS

Sample

The sample consists of 40 adults. Their age ranges from 25 to 40 years. Out of 40, 20 were taken from emergency rescue service 1122 Peshawar. They were taken from basic pay scale 11 of operational category. They were Emergency medical technicians and Firefighters. Those rescuers were taken who participated in the rescue operation of the Army Public school. Prior permission was taken from Station House Incharges of the concerned station to allow the rescuers to participate in the study. The rescuers were taken from two stations Charsada road and Tariq road Peshawar saddar which are nearest to Army Public school. Impact of event scale was used.

The other 20 were taken from the local community. Those were selected who participated in the rescue and recovery process or they the eye witnesses of this incidence. They were all male and were from district Peshawar. They were all graduates. Due to unwillingness and poor response from the local community purposive sampling technique was used. This poor response was due to security problems.

Instruments

1. Personal data sheet.

Personal data sheet was used to obtain demographic information including age, gender, marital status, qualification and status of employment etc.

2. Impact of Event Scale Revised (IES-R Horowitz, 1979)

The impact of event scale was developed by Mardi Horowitz, Nancy Wilner and Wiliam Alvarez in 1979. The scale was revised by adding hyper arousal items. This scale measures subjective distress related to unexpected event. The most common responses to these events fell under two major categories intrusion and avoidance. The scale consist of 15 items 7 of them measure intrusive symptoms while the remaining 8 measure avoidance symptoms. The rating of the scale is done on 1 to 4 point scale 1 for not at all, 2 for rarely, 3 for sometimes and 4 for often. Now the author made the scale easier rarely is designated as 1, sometimes as 3 and often as 5.

The intrusion subscale include items 1,4,5,6,10,11,14 and the avoidance subscale include items 2,3,7,8,9,12,13,15.

The cutoff points for the global (Intrusion plus Avoidance scores) IES is

Low = below 8.5

Medium = in between low and high

High = 19 or more.

Note: (written permission was taken from the author of the scale through mail).

Procedure

All of the participants were approached personally and development of rapport to some extent, they were ensured about the purpose of the study and confidentiality of the results. They were also given an option to write down their names and contact number on the questionnaire or not. They were instructed to read out the questionnaire carefully and attempt all the questions. If they feel any problem immediately report to the researcher. Three participants reported that they need an explanation of some questions.

After completion of data collection from local community data from rescuers was started. Verbal permission was taken from concerned Station House Incharges to allow the rescuers to participate in this research study. Instructions to the rescuers were given in groups due to their duty in the same shift. Some the officers from these stations also requested to provide questionnaire. Questionnaires were provided to them but their score and results were not included in the final results of the study due to their higher rank and change duty schedule. The study was completed positively. All of the rescuers and the station officers were very cooperative.

RESULTS

The results of the study indicated the difference in the aftereffects between trained rescuers and local community personals and both the hypotheses of the study were verified.

Table 1: Mean, Median and Standard Deviation

	Local community personals	Trained rescuers
N Valid	20	20
Missing	0	0
Mean	15.20	13.05
Median	15.50	13.00
Standard Deviation	2.41	2.64

Table 2: Results of one-Sample Test analyzed through SPSS version 16.0

	Test Value = 0					
	t	df	Sig. (2-tailed)	Mean Difference	95% Confidence Interval of the Difference	
					Lower	Upper
affects of APS attack on eye witnesses from local community	28.098	19	.000	15.20000	14.0678	16.3322
affects of APS attack on trained rescuers	22.063	19	.000	13.05000	11.8120	14.2880

** the results are significant on 0.001 level.

DISCUSSION

The results of the study demonstrate that the both untrained local community personals and trained rescuers had a mean score of 15.20 and 13.05 on Impact of Event Scale which shows a mild level of post-traumatic stress disorder in both groups. However, there is a difference between the mean score of untrained local community personals and trained rescuers. The low level of post-traumatic stress disorder among emergency rescuers, may be due to their advance training and dealing of such types on events on routine basis. There is severe insecurity in the province of Khyber Pakhtunkhwa especially, district Peshawar is badly targeted by the terrorists and a lot of innocent people have lost their lives in these incidences. Hundreds of children were died and hundreds were injured in this terrorist attack on Army Public School Peshawar. This was not the first attack hundreds of attacks and the most horrible suicidal blast had also demolished the beauty of Peshawar city.

Due to the above mentioned circumstances Government of Khyber Pakhtunkhwa had decided to expand the Emergency rescue service to all divisional districts of the province furthermore expansion of the service to Dera Ismail Khan, Abbottabad and Swat is in progress. Emergency Rescue Service Rescue1122 is the first modern and trained rescue service in Pakistan and as an Example for SARC countries.

CONCLUSION

The present study revealed that the untrained local community personals are more easily affected by horrific events or stressors, as compare to trained rescuers. This may be due less coping strategies or resiliency. On the other hand trained rescuers are also affected by these unexpected events to some extent and this is may be due to dealing of these events on a daily basis. Therefore, we can say that the local community personal can only help the rescuers when it is needed and must try not to become hurdles for these trained rescuers in emergency situations.

Further research is needed to explore the effects of these unexpected events on other agencies related to emergencies like Armed Forces, Police, Civil defense and Media groups to generalize the results and the sample was also very limited due to poor response from the local community.

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