Gender Based Recovery Strategies of Post Flood Victims, Evaluative Survey in Kelantan, Malaysia 2015

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Abstract

December 2014, we saw our nation battling one of the largest catastrophes it has ever faced. With more than 25 million people rendered homeless, almost one thousand suffered and had left with a lot of damages. The magnitude of the disaster can be gauged from the fact that at one point, there was uncountable worst affect of Flood on the most areas of Perak, Pahang and Kelantan. Still these areas needed support, economically, socially, morally and psychologically for better recovery. Our Study was focused on evaluation of coping strategies adapted by flood victim for recovery from the anxiety, sadness and trauma after disaster. We investigated their emotional state and their coping strategies for better recovery and rehabilitation. For this Survey Research the City Kelantan was visited by clinical Psychologist, counselors and students of University of Pendidikan Sultan Idris. We selected randomly (N=40) affected people (Female=19), (Male=21) with different age level (30 -60 years) in the Main area of Kuala Krai (Feb 2015), after taken their personal consent, we administered Demographic characteristic form and COPE Scale (Carver, 1999), with 14 sub scale of coping response, with short interview related their current psychological state of mind. Results revealed that they have greater level of subjective stress and depression still after two months of disaster event. People have great level of fear and depression (75%) about their lost of home and belongingness. Coping scale indicate that there is still high need of emotional and social support. Female have high level of response on sub scale of seeking emotional support, religion, venting of emotions and behavioral disengagement. Man most respond on active planning, acceptance and suppression of competing activities. Response revealed denial, anger, mental disengagements, drug use and negative coping responses.

1. Introduction

Beginning on 14th December 2014 a series of monsoon rain was reported from Northeast Malaysia, to result destructive flood that caused more the 250,000 people suffered and were looking for help to rescue their life. (Armenpress 2014).

Flood has become a major disaster that affected a significant numbers of Malaysian’s life. Due to geographic location and the climate characteristics of Malaysia, it has accounted about 90% of natural disasters. Floods not only damage the property of people, it also has contributed many psychological issues like depression, anxiety, posttraumatic
Due to sudden flood in different parts of Malaysia there is reported shortage of food supplies, electricity, clean water, medicine, banking services and other transportation services. Even after the flood has receded still there is an irregular communication service, which is restraining the effort to approach the flood victims in those areas. Lack of banking services also has caused shortage of petrol supply so people still immobile to move to other places. People survived on donated food and relief items and in other areas where relief services are not available, victims stated to fight or steal food and valuable things from abandoned families. (Wikipedia 2015)

Functioning of life, health care, education, transport, economy and social condition all are affected Due to flood since Dec 2014 to Feb 2015.

According to news, among 21, five casualties were in the worst hit state of Kelantan, in the Northeastern part of the Malaysian Peninsula and there were fear that the death toll could increase as communities have been left stranded without food, emergency care, and medicine. (Aljazeera America Dec 2014).

This Disaster has impact hugely on normal living of the people in the flood area, there is still crying needs of emotional, social and support to live and recovery for normal life.

Many researchers have focused in the post evaluation of flood victims and reveals important aspects of recovery and rehabilitation for flood victims. The research confirmed according to Few and Roger (2003) social impacts of flooding are widespread, interconnected and may be long-lasting. Negative social impacts may be affected by characteristics of the flood, individual (for example, low income), and/or community. Often, the long-lasting effects of a flood may be caused or exacerbated by the stress of dealing with the aftermath of a flood or recovery period.

The key factors that affect response are similar to those that affect the social impacts. Damage depends on the extent of flood, condition of house and physical set up of the villages. As partially damaged houses are repaired and made livable. People with completely collapsed houses are forced to live in temporary provided places; people collect construction material like bamboo, rope, hay and wood. (Osti, Tanaka and Tokioka, 2008).

Mehar and Ayub (2010) conduct a study to find out that community often shows cohesion and cooperation during such disaster events. People stay in their neighbor or kin house for shelter or short stay until the houses is ready to live again. In the most of these conditions to manage warm clothes and other necessities for family members and to procure additional food to eat people take loan or get support of big landowner in exchange of providing their services during cultivation and sending their kids as domestic helps in future to them. People also receive relief fund and things from various organizations and humanitarian organization. For flood victim it has become challenge for them to manage temporary set up for children and elderly after evacuation centers. People cannot set up place for children and elderly to stay and sleep. This temporary set up become a support for time being until the house is constructed or repaired. It became psychological painful to have lack of medical faculties and others living skills at the needed time.

Most people affected by the floods are likely to experience distress, emotional pain, depression, the majority will recover using their existing coping strategies and social support, and many people suffer badly with poor psychological and physical health after traumatic experience. At the first couples of week stage, mostly survival first aid is recommended. Australian Center for posttraumatic Mental Health, 2007)

Instead of psychological first aid, an evidence informed approach to assisting people in the immediate after affects of disaster (Baymer et al, 2006) is now internationally recognized as the recommended intervention. Psychological first aid is based on five empirically supported principles to guide post disaster intervention like promoting sense of safety, promoting calming, promoting sense of self and community efficacy, promoting connectedness and installing hope. (Jeffrey, 2009).

People after flood disaster experience many types of psychological symptoms, sadness, sleep disorder, anger, social withdrawal, decreased ability to do routine chores, to do work. These issues are often exacerbated by practical problems arising from bereavement, destruction of property and other belongingness, feel depress and anger in relocation and rebuilding. For these type of intermediate difficulties, a formal intervention called for psychological recovery.
is gaining considerable international attention. (Berkowitz et al 2010).

Although many naturally experience reduced distress and return to normal functioning over the next weeks with available social support. A significant number of people will continue to experience more serious problems as post traumatic stress disorder and required formal assessment and interventions to get healthy recovery. Common mental health problems following disaster include depression, anxiety disorder such as posttraumatic stress disorder, generalized anxiety disorder, panic disorder, simple phobia, complicated grief and substance abuse. These issues may be newly develop in the aftermath of disaster or may represent exacerbation of existing or remitted mental health disorders. Guilt, anger, somatization, sleep disorder, may be exist along side or independently. (Australian Center of Posttraumatic Stress Disorder, 2007).

Fobes et al. (2010) suggested in a study that importantly these same elements are so often appropriate for other mental problems including cognitive therapy for trauma related depression and generalized anxiety disorder. In clinical practice trauma focused psychological treatment are embedded in treatment plan that initial stabilization and engagement, psychological education, arousal reduction and other symptoms management strategies and encouraging the resumption of key relationship and roles as soon as possible for healthy recovery and better coping strategies.

2. Objective of Study

1. Study assessed the coping strategies, and emotional state of the flood victims in area of Kelantan, Malaysia.
2. Study explored effective adaptive psychological strategies by flood victims and their routine life.
3. Study find out the comparison of male and female coping response to deal with the issues of flood.

3. Hypothesis

1. Effective adaptive psychological strategies help people to overcome the disasters such as floods.
2. Emotional and social support helps people to recover better from emotional loss.
3. There is significant difference in male and female coping response to overcome social and emotional problems.

4. Method and Procedure

The purpose of this study was to highlight the importance of coping responses and its effects on the process of Psychological recovery. To select the survey method was initial understanding of the coping responses and psychological recovery. The reason to select this method was, because this research was an early step to highlight the psychological health issues in flood victim area. Survey is easy and helpful sources to give us information about the need and issues related to flood victims of specific community. To conduct this study, a survey was done in the area of Kelantan, Malaysia Feb2015. At the first stage, a questionnaire was prepared in Malay language to make it possible for common people of Kelantan to understand the purpose of study. The form of questionnaire of COPE was translated in Malay language after measuring the reliability. The (N=40) people participated in the survey and recorded their answers on questionnaire. Participations were male and female, with various educational, social and cultural backgrounds. They were asked questions about their subjective emotional state and their dealing strategies during flood disaster, in form of questionnaire during the interview.

After administration of questionnaire, the answers were analyzed with descriptive statistic to get results in numerical form.

5. Results and Discussion

The results were analyzed in descriptive statistic, to find out the coping response of flood victims among the population of Kelantan. The results revealed their subjective state; almost (75%) people still have fear of sudden flood. As Malaysia is known for its rainy seasons, and people are mostly adjusted with weather but sudden heavy rains can bring unpredicted flashes that lead to destruction for the people living in more rural areas. People still have fearful feeling about flood disaster as they reveled answering the subjective feelings questions.
Subjective description: How you describe your mood.

<table>
<thead>
<tr>
<th>Subjective Mood</th>
<th>Frequency</th>
<th>Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Depressed</td>
<td>22</td>
<td>55.0</td>
<td>55.0</td>
</tr>
<tr>
<td>Emotionally disturbed</td>
<td>5</td>
<td>12.5</td>
<td>67.5</td>
</tr>
<tr>
<td>Anxiety</td>
<td>5</td>
<td>12.5</td>
<td>80.0</td>
</tr>
<tr>
<td>Confused</td>
<td>2</td>
<td>5.0</td>
<td>85.0</td>
</tr>
<tr>
<td>Stressed</td>
<td>6</td>
<td>15.0</td>
<td>100.0</td>
</tr>
<tr>
<td>Total</td>
<td>40</td>
<td>100.0</td>
<td></td>
</tr>
</tbody>
</table>

According to the results mostly people relate their emotionally state as feeling depressed (55%), emotionally disturbed (12%), anxiety (12%), confused (5%) and stressed (15%). People who lost their belongingness and witnessed the destruction of their home still have sadness and feeling of helplessness to mange to continue life with all struggles. Family revealed sad and stressed while coping daily life functioning, they revealed for weeks they have no clothes to wear, no food to eat and having many medical issues, unable to sleep and talk with other family members, relative and friends. The most common psychological symptoms like flood trauma include feelings of anger, guilt, depression, anxiety and collection of many social, emotional and economical problems constitute the diagnostic category of post traumatic stress disorder. Flood victims also experience major depression, substance abuse, anxiety and adjustment issues. Many flood victims experience depression and anxiety for longer time as compare to others. (Vernberg, 1999)

**Table No – 2.** Coping response of Male and Female

<table>
<thead>
<tr>
<th>Report of COPE Response</th>
<th>Gender</th>
<th>Active coping response</th>
<th>Planning</th>
<th>suppression of competing activities</th>
<th>restraint coping</th>
<th>seeking social support</th>
<th>positive reinterpretation</th>
<th>negative reinterpretation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>19</td>
<td>19</td>
<td>19</td>
<td>19</td>
<td>19</td>
<td>19</td>
<td>19</td>
</tr>
<tr>
<td>Female % Sum</td>
<td>37.7%</td>
<td>35.0%</td>
<td>46.3%</td>
<td>46.2%</td>
<td>50.0%</td>
<td>51.7%</td>
<td>50.0%</td>
<td></td>
</tr>
<tr>
<td>Male % Sum</td>
<td>62.3%</td>
<td>65.0%</td>
<td>53.7%</td>
<td>53.8%</td>
<td>50.0%</td>
<td>48.3%</td>
<td>50.0%</td>
<td></td>
</tr>
</tbody>
</table>

**Table No – 3.** Coping response with both gender

<table>
<thead>
<tr>
<th>Report of COPE Response</th>
<th>Gender</th>
<th>Acceptance of emotions</th>
<th>Denial</th>
<th>mental disengagement</th>
<th>Alcohol &amp; drugs</th>
<th>turning religion</th>
<th>using humour</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Female</td>
<td>19</td>
<td>19</td>
<td>19</td>
<td>19</td>
<td>19</td>
<td>19</td>
</tr>
<tr>
<td>% sum</td>
<td>37.7%</td>
<td>52.8%</td>
<td>50.0%</td>
<td>49.1%</td>
<td>49.1%</td>
<td>47.6%</td>
<td>49.3%</td>
</tr>
<tr>
<td>Male % Sum</td>
<td>62.3%</td>
<td>47.2%</td>
<td>50.0%</td>
<td>50.9%</td>
<td>7.5%</td>
<td>52.4%</td>
<td>50.7%</td>
</tr>
</tbody>
</table>

Results shows in Table No-2 and Table No-3, Male score on Active coping response is 62% and female has 37%, it indicate that male were more in active oriented task to cope up their psychological, emotional issues. On the subscales of planning response, (female) 35%, and (male) 65%, shows that female are not so planning oriented as compare to male in their task and emotional managements. On the subscale of suppression of competing activities shows 46% (female) and 53% (male), male are more oriented to task accomplishment as compare to female and they reveal that they put other activities on side in order to concentrate their task. In subscale of restraint coping female score (46%), male score (53%) shows male are more restraint in their coping response as compared to female.

Social support has vital effect on human mental and physical health. Being with other in critical in traumatic situation could be a cause of hope and strengths. Both gender reveal same score on the subscale of social support and agreed that being with other family members, friends, relatives in sadness and critical situation help them to stand again for life. On subscale of Positive interpretation score, female 51% and male 48% shows no big difference in coping response. To handle any sudden, traumatic situation with social support, positive interpretation and active coping is very helpful and healthy coping response.
Negative interpretation subscale reveals that mostly they do negative interpretation and there is no difference with their gender based factors. Many researchers revealed that fear, anxiety, depression and anger are some of the common reaction of flood victims. (Vernberg, 1999).

Acceptance of any disaster of trauma is challenging in both genders, people usually take more time to accept the things and acceptance has different phases during the recovery period. Female (37%) have less score as compared to male (62%), that shows male seems more able to adjust and accept the lost as compared to females. Venting out emotion is mostly used coping response on sudden and unbearable loss; female (52%) has greater response as compared to male (47%) on this subscale. According to world mental health survey women is more like to be depress and anxious, she is more emotionally vulnerable and more likely to perceive a situation threatening, that rate events as significantly more stressful and endorse more loss of personal control. Women are more likely than man to experience psychological and physical response to traumatic event that include intense fear, avoidance, intrusive thoughts, horror, helplessness, panic and anxiety. (Olff et al 2007)

Denial subscale reveal that both gender equally used that coping response to handle depression and anxiety related their issues in managing and progressing for normal routine of life. Mental disengagement shows that both gender mentally doing effort to occupied their mind with other task and to divert the attention from stressful situation to different situation. On the subscale of Alcohol and drugs it reveals that only (7%) male revealed that they tend to use drugs to handle their stress and other all participations reveal no on this subscale.

To be more intended toward prayers and spirituality help people to recover more than the non believer of spirituality. And results reveals that both gender used effectively the coping response to turn toward religious activities and they reveal prayer help them with mental peace. Religious coping is very is very correlated with a number of positive outcomes, including good physical health, social and emotional health. People revealed more relaxed state using religious strategies. (Harris at el 1995). Use of humour is also being used by both genders to handle stress and depression and increase social support.

Flood victim revealed many psychological, social and physical health issues and need psychological help and support to continue better and healthy recovery.

6. Recommendation

People always reveal feeling of sadness, stress and anxiety after flood trauma. To deal with disasters and trauma effectively is challenging and affected people need emotional and psychological help for their healthy psychological recovery.

This research revealed that people needs psychological, emotional, social interventions to deal their stress, social and emotional issues. We need to work on the coping strategies and interventions of flood victims to make their better and healthy recovery for healthy life.

We need to propose healthy intervention for recovery strategies, good planning and interventions for better, effective and healthy recovery of flood victims.

References

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Malaysia Kini (Dec, 2014) Malaysian News. 30th December 2014