

# [Stages in responding to disasters: floods](https://assignbuster.com/stages-in-responding-to-disasters-floods/)

Responding to Disaster: Floods

Effects of Natural and human made disasters are devastating and this calls for competent mental health professionals to provide for disaster relief services to the victims. Victims of flood disasters respond differently depending on their personal experience. In our case, people are warned about the impending danger of flood disaster but some fail to respond at all. Even after the flood disaster, others return to reconstruct their houses and belongings. This means that the type of intervention to be applied should be culture based. The following intervention strategies, marked with stages, would be applied to the victims of the flood disaster.

* Impact

Immediately after the flood strikes, the survivors panic, are confused and cannot think at that moment (Gilliland, & James, 2013). Adults are desperately searching everywhere, looking for their missing family members. Victims are exposed to horrors of the aftermath and they are surrounded by death and devastation. It is indeed a time of agony. At this stage, an appropriate intervention would be an emotionally driven Psychological intervention strategy. This strategy helps the individual to recollect themselves and to start focusing on the way forward.

* Emergence/acute heroic stage

After the aftermath, survivors start saving and collecting what they can. It is a “ counting the loss” phase. At this stage, I would recommend for physiological responses as the intervention is focused on physical damage such as loss of property, injuries, geographical displacement, and anger due to the aftermath loss incurred (Gilliland, & James, 2013). I will engage in emotionally driven talk with the victims in order to help relief their anxieties surrounding their crisis. I will also provide emotional help on how individuals can recover their property and probably their beloved family members.

* Inventory stage

This is the recovery phase. In this stage, survivors are slowly accepting the realities of life. I will engage in method in which individuals can utilize their abilities in seeking for employment for survival. I will engage in cognitive-behavioral intervention skills and try to convince the survivor on danger of living such vulnerable places (Benedek, Fullerton, & Ursano, 2007). The idea to change their perception about the place and make them understand the Government’s warning about the place.

* Honeymoon stage

At this stage, the victims are worried about their financial recovery. This come after one to three months post the flooding disaster. It is a stage of rebuilding. I recommend for cognitive coping strategies in order to help the survivors see the sense of moving from the vulnerable to other places. Coping skills are helpful in enabling the victim change their environment to move on with their normal lives.

* Avoidance phase

At this phase, I will recommend for psycho-social intervention skills. The aftermath effects are coupled with loses, causing psychological disturbance and sometimes lead to Posttraumatic stress disorder (PTSD). With Psycho-social intervention skills a victim can slowly forget about the disaster and start focusing on other things through social life.

* Adaptation phase

Adaptive phase depends on the victim’s resiliency. Resilient people tend to recover faster. In that regard, I will recommend for cognitive-behavioral responses in order strengthen the victims by making them recognize how strong they are. Positive behavioral skills can also influence positive change and hence influence adaptive skills; that the victims can do without their lost ones.

* Disillusionment phase

Disillusion can prevent victims from adapting to their environment. Anything attached to the previously experienced flooding disaster will likely arouse the traumatic experience. To help victims recover from this problem, I will use cognitive coping skills. These skills helps a victim accept the reality, forget about the past and focus on the present.

* Pathogenic to salutogenic shift

At this phase, the victim has not yet fully recovered from the post traumatic stress disorder even after one year after the disaster. It is a critical condition and the victim is always struggling to let go the stress. This may happened to mothers who saw their children drawn by water. Resiliency itself cannot draw the stress away from the victim. A suitable intervention strategy would be the use of the victim’s coherence to overcome the stress. This involves integrating cognitive-behavioral coping skills to enable the victim understand that their problem is manageable. It requires the use of emotional-psychological strategies to convince the victim (Gelbach, 2008).

* Restabilization/reconstruction

This involves the rebuilding of the victim’s emotional and social self. The best way to respond to victims at this stage is by use of psycho-social strategies (Bartley, 2007). This involves encouraging the victim to make new friends and interact with people. Social life interactions allows victims to forget about their past easily and focus on their future.

Ethical/ Cultural Consideration

Some cultural considerations involve various elements; One, awareness of your world view, two, an understanding of the client’s worldview, and finally, a better understanding of the appropriate intervention to apply on a client depending on the crisis and situation (Goodman, & West-Olatunji, 2009). In our case, there is the need for a culture centered disaster response. Bearing that the people were warned about the impending flood disaster and didn’t do anything about it gives us the indication of social cultural factors among the community. Therefore, understanding the existence of social cultural factors among the victims facilitates the conceptualization of the needs of the people, especially in low income communities (Goodman, & West-Olatunji, 2009). This also helps in determining the kind of intervention model applicable to a victim.

## References

Bartley, A. G. (2007). Confronting the realities of volunteering for a national disaster. Journal of Mental Health Counseling , 29 (1), 4-16.

Benedek, D. M., Fullerton, C., & Ursano, R. J. (2007). First Responders: Mental Health Consequences of Natural and Human-Made Disasters for Public Health and Public Safety Workers\*. Annu. Rev. Public Health , 28 , 55-68.

Gelbach, R. A. (2008). Trauma, research, and EMDR: A disaster responder’s wish list. Journal of EMDR Practice & Research , 2 (2), 146–155. doi: http://dx. doi. org/10. 1891/1933-3196. 2. 2. 146

Gilliland, B. E., & James, R. K. (2013). Crisis intervention strategies .

Goodman, R. D., & West-Olatunji, C. A. (2009). Applying critical consciousness: Culturally competent disaster response outcomes. Journal of Counseling & Development , 87 (4), 458–465. doi: 10. 1002/j. 1556-6678. 2009. tb00130. x