

Mental Health of Fishermen after the Ockhi Cyclone: A Social Work Intervention Study

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Abstract

Ockhi was Kerala's fourth exposure to a cyclone since 1891. Owing to its high frequency, the state of Kerala had no experience and remained ill-prepared in dealing with disasters of this nature and magnitude. The current study proposes applying CVS-a social work psycho-therapeutic approach to manage PTSD. CVS integrates Counselling, Visual-Kinesthetic Dissociation (VKD), and Spiritual therapeutic intervention. Counselling explores the dark side of the client's self (Mikaye, 2012). A considerable of literature demonstrates that VKD is effective for any persisting trauma (Mark Tyrrell, 2015). Spirituality expresses our desire to find meaning and purpose in our lives (Neck & Milliman, 1994). Trauma-focused treatments were more efficacious than non-trauma-focused intervention (Ehring et al., 2014). This paper highlights a detailed case study of a CVS - based intervention with a PTSD-affected victim of the Ockhi disaster. It establishes that the integrated method of CVS protocol reduces PTSD manifestations in trauma victims of the Ockhi cyclone and generates value and meaning for people living with PTSD.

Keywords: Ockhi, mental health, Counselling, Visual Kinesthetic Dissociation (VKD), CVS protocol

Date of Submission: 10-11-2022

Date of Acceptance: 23-11-2022

Personal Reflective Statements

Sunitha R. is a research scholar at Loyola College of Social Sciences, affiliated with the University of Kerala, India. She has been a practising Counsellor cum Psychotherapist for the past eight years among trauma victims and resolving problems of students, youth and families related to psychological distress. Also, actively engages with non-governmental organizations to fight injustice and vulnerability. During Cyclone Ockhi in 2017, she was actively involved in counselling and arranging basic requirements in association with AVE Social Centre, Thiruvananthapuram, and Cherureshmi Center, Poonthura, Kerala. A scheme designed for Ockhi sufferers, 'Kaithang', which means helping hands, 2017 has reached out to many Ockhi-affected families in Thiruvananthapuram and reported vulnerable cases to the Fisheries Department in Kerala. Dr. Sonny Jose, a Linneus-Palme Scholar, Head & Associate professor, department of Social Work, Loyola College of Social Sciences, affiliated to the University of Kerala, Thiruvananthapuram, India. Dr Sonny, a social scientist, has authored several books on social issues and mental health.

I. Introduction

The deep depression became a cyclonic storm on November 30, 2017 (Roshan, 2019). One year after the Ockhi cyclone, several fishermen from Kerala quit fishing out of fear (Ameerudheen TA, 2018). The evidence proves that the Ockhi affected at that time at sea had mental health issues. Besides, they were yet to return to the routine fishing activity, thus affecting their livelihood. Furthermore, the study findings of Sangeetha et al. (2019) emphasize that 65% of Ockhi victims suffer from PTSD (Sangeetha et al., 2019). Kerala has been rated number one in overall health performance among the larger states, according to the 4th Health Index by NitiAayog (Kerala Top State in Health Performance Uttar Pradesh Worst Niti Aayog 4th Health Index / India News – India TV, 2021). What a paradox! Mental health comprises emotional, psychological, social and

spiritual well-being. Untreated mental illness leads to the risks of mental health problems. It deprives the person of enjoying work productivity, coping with stress, realising the potential, and contributing to the family, society, and nation (*What Is Mental Health?* | *MentalHealth.Gov*, 2020). The research paper focused on a victim rescued from the sea during the Ockhi cyclone in November 2017. He was treated at the General Hospital and later sought help from Medical College in Thiruvananthapuram. He possessed the first-rank symptoms of Post-Traumatic Stress Disorder. This study aims to understand the mental health issues of the PTSD-affected victims of Ockhi and apply an appropriate social work therapeutic method to manage the trauma. The research findings demonstrate that an integrated method of CVS protocol effectively manages PTSD. CVS integrates three techniques: counselling, visual kinesthetic dissociation, and spiritual therapy intervention. The study is based on an interventional design/Single Subject design(Lal Das, 2008). The major research is on the process here that the researcher presents one case in-depth, assessing the impact of pre and post-interventional assessment.

II. Literature Review

Integrative therapy is a treatment approach selecting techniques from different treatment orientations that are most appropriate for a client's specific problem (Cherry, 2021). Edward, N. (2012) cites Norcross, Bike, & Evans (2009) argument today, about one-fourth of mental health professionals identify themselves using a purely integrative approach(Edward, 2012). There is a complex of more than 400 varieties of effective psychotherapies for each mental disorder. It can be classified and defined according to various theoretical models(Simpson et al., 2016). Counselling is a process that helps individuals or a group of people understand themselves(Mikaye, 2012).Sunitha (2019) highlights an integrated method of CVF protocol and proves it's effectiveness among the trauma victims. A study of 43 teachers at an institution in Kerala, India, found that nine had trauma. Studies have shown that intense emotions such as fear, anger, and shame turn into positive emotions such as happiness, weightlessness, peace, and benevolence(Sunitha, 2019). A remarkable study by Edna Foa emphasises that exposure-based treatment can significantly improve quality of life (Foa et al., 2013).

Counselling deals with the client's present problems (NarayanaRao&Sahajpal, 2013) and explores the dark side of the client's self (Mikaye, 2012). According to the studies of D. John Antony (2005), it is crucial to understand the meaning of trauma and express anger, grief, guilt and other feelings associated with it (D John Antony, 2005). Keith Guy and Nicola Guy conducted a study among PTSD or people with partial PTSD entitled "The fast treatment for phobia and trauma: evidence that it works". After applying VKD, one client commented, "I can still remember the picture, but it is not emotionally punchy," while another said, "It's like magic."(Sunitha, 2019b).Lourel L. Hourani et al. (2012) conducted a study among military officers. The study findings elucidate that high spirituality appears to have some protective effect on depression and PTSD (Hourani et al., 2012). Spirituality expresses our desire to find meaning and purpose in our lives (Neck & Milliman, 1994). Ajala, E. M referencing Staude (2005) reflected that Spirituality is a transformational process through which the different aspects of life are integrated (physical, emotional, occupational, intellectual and rational)...it is strongly associated with creativity, play, love, forgiveness, compassion, trust, reverence, wisdom, faith and sense of oneness (Ajala, n.d.).

Therefore, the researcher found a logical and consecutive connection to using the CVS protocol to manage PTSD. The counselling technique is used to deal with current problems, identify the persisting trauma, and express toxic emotions. VKD helps to bring the trauma to the surface and desensitize it, and spiritual therapy finds meaning and integrates emotional, physical, intellectual, occupational, and rational aspects of life.

III. Methodology

The study used an interventional research design (Lal Das, 2008); it's a quasi-experimental research design. Lal Das, an Indian author, argues that such a single-subject design involves repeated measurements of the dependent variable before and after a particular intervention to see if a pattern of consistent change in the dependent variable begins shortly after the intervention begins. The study was conducted on a person affected by the Ockhi cyclone. The man at sea at the Ockhi disaster was rescued three days later by a Navy helicopter. Cherureshmi Centre, an NGO working for the empowerment of Women at Poonthura, Thiruvananthapuram, Kerala, was allocated a room for the in-depth data collection of the participant and to apply the treatment techniques. PSS-I-5 is a 24-item semi-structured interview (Edna. B. Foa, 2013) that was used to assess last month's PTSD symptoms based on DSM-5 criteria. The pre-test was performed in December 2020, the intervention was applied in January 2021, and three post-interventional assessments were performed on the research participant. The intervals after intervention were one month, four months, and eight months. Pre and post-intervention analysis is defined in a verbatim method.

Ethical Considerations

Edna B. Foa (2019), department of psychiatry, University of Pennsylvania Health System, Permission was granted to use the English and Malayalam translated version of the PSSI-5 in the study. PSSI-5 is a 24-

item semi-structured interview that evaluates last month's PTSD symptoms based on DSM-5 criteria. A voluntary consent letter was obtained from the participant stating that he had been informed of the study's purpose, follow-up, and nature.

Case study

Section 1

A case history

Background information

Stephen (58), not his original name, hails from a coastal village in Thiruvananthapuram district, Kerala, India. Stephen seems to be older than his age. He is illiterate and lives with his wife and a married daughter. Three days after Cyclone Ockhi, he was rescued by an Indian Navy helicopter, given first aid, and taken to a government hospital. He first sought treatment at the General Hospital, came to the Medical College due to his physical ailments, and was again shifted to the Jubilee Memorial Hospital in Thiruvananthapuram. From the interview with him and his married daughter with whom he was staying, during the post-Ockhi period, he neither consulted with any mental health experts nor participated in the mental-health-related orientation programs organized for Ockhi returns. His medical report proved that vision and hearing had been severely impaired since the Ockhi disaster. After the traumatic experience, he was not consistent in his job, and chewing tobacco and drinking alcohol were worsened. Once on a blue moon, he goes to work. However, he is confined at home most of the time, with no movement as before, no company, no fishing and no leisure time at the beach. In short, he lost interest in the activities he had previously done.

1. Description of the presenting problems

Stephen said, *"I'm afraid of the boat because I often think it's going to crash. I have less vision and hearing than before. Sleep does not embrace me. I often have nightmares and get up and walk in the night. So others become overly vigilant".* In the dream, I would say: *"I will kill you ... Get out of me ... Give me a knife let me kill them ... We have come to take you away ..."* He spoke with complete helplessness, The dead at sea during Ockhi disaster will come in my dream, to my right and says *"come and let's go"*. So I feel like I am a vegetable in all of these issues. *"He would take a knife out of the kitchen and run after us to kill us,"* his daughter recalls. He continued, *"If there are dark clouds when it rains heavily as I board the boat, I remember all the horrible events that come to my mind. Whenever I re-experience the trauma, I ask my friends to return to shore, so they get angry and make fun of me. Now, I lost interest in fishing. Loneliness is the status quo!*

2. Assessment

A focused group discussion was organized by the researcher at Cherureshmi Centre, Poonthura, for the victims of Ockhi. Respondent's Posttraumatic Stress and its severity were determined with the support of the Posttraumatic Stress Diagnostic – Self-Report Version for DSM-5 (PSSI-5) rating scale. The research tool has received copyright from Edna Fabio, the University of Pennsylvania, Philadelphia. During the pre-assessment test, the client's score of 69 (very serious) was shown on the rating scale. After CVS intervention, three post-intervention assessments were performed. As a result, it was revealed on a rating scale of 35, 31 and 26, respectively. In addition, the researcher visited his family, discussed with his siblings, and assessed the respondents' reaction to the treatment, result, and pre and post-mental health status (social, physical, emotional and spiritual).

3. The root cause of the problem

On the day of the Ockhi cyclone, Stephen went fishing with four other fishermen on a boat. His boat capsized when the wind turned into a hurricane, and the sea swallowed one in five. They witnessed the death of a colleague as helpless. It was a shocking experience for him. At the same time, his mind lost strength. As a result of the strong wind, lightning, and continuous rain, his friend Selva (not his original name) became exhausted, and the boat swayed back and forth. They were hit by a boat and sustained multiple injuries. After all, there was no food or drink to boost their stamina. There was only saltwater around them. As Selva was resting on his shoulder, a big ship came from nowhere to save them. Unfortunately, their happiness was very short. It hit their small boat, and Selva fell into the sea. His fellow fishermen tried to rescue him, but he died in the whirlpool. That was another trauma to him; he lost hope of survival.

Nevertheless, they prayed loudly and gave mental strength to one another. Twenty minutes later, the same boat returned, and they threw jackets and ropes for them. After a long fight, they went inside the big ship. The sailors provided first aid and food; soon, they conveyed the message to the Indian Navy. The Navy came in a helicopter and gave them a rope, and the fellow passenger came in first. When the Navy grabbed Stephen's hand to board the aircraft, he slipped and fell into the deep sea. That fall was horrible from the sky to the sea! What a series of trauma he went through! That was the root cause of the problem.

Section 2

Treatment Plan

Many leaders in the field of psychotherapy suggested an integrated approach to psychotherapy, which has been gaining widespread acceptance since the 1990s (Simpson et al., 2016). The researcher used an integrated social work therapeutic approach to manage PTSD (Post-traumatic Stress Disorder) affected victims of Ockhi. CVS protocol (Counselling, Visual Kinaesthetic Dissociation, and Spiritual Therapy) combines three techniques of emotional management and stabilization.

Here, counselling involves building a professional relationship with the client, exploring the issues in depth, and exploring alternative solutions with the client's support. (Zastrow, 1999, p.95). The counselling helped him understand his distress and listen without blaming or judging the individual (*Basic Counselling Skills*, 2010). This process created a comfortable space for him to be heard, while re-telling the story catharsis was done, with the support of the client counsellor brought out the emotional trauma and toxic emotions of fear, guilt, anger, resentment, and disappointment to a surface level and the counsellor identified the root cause of the problem. The identified root cause of the problem was desensitized through a technique called Visual Kinaesthetic Dissociation. Then the researcher moved on to spiritual therapeutic intervention. Hawley (1993) observes that spirituality is often challenging to describe, and it must be experienced since viewed as being beyond one's physical senses, feelings and mind (Hawley, 1993). "Spirituality is expressing our desire to find meaning and purpose in our lives" (Neck & Milliman, 1994). The researcher put the client in a trance and stimulated VAKOG (Visual, auditory, kinaesthetic, olfactory and gustatory). Accompanied by musical instruments, he led a conversation with an inner self. At this juncture, the client was silent, the counsellor speaking. The counsellor constantly evaluated the client's feelings after each technique was applied. Furthermore, before leaving the institution, the counsellor conducted an impact assessment asking how you feel after using the CVS protocol?

IV. Findings And Discussions

A PTSD-affected victim of Ockhi from the Thiruvananthapuram coastal community, Kerala, was selected for the study. The participant's pre-assessment score was 69 (very severe) out of 80 on the PSSI- 5 rating scale.

"I'm scared boat now though I see it from my childhood. As a result, I watch Television continuously no matter what happens. The dreams I saw were terrifying and horrible. I see the dead people who died at the Ockhi cyclone come to me and persuade me to go along with them. Every night they come and invite me to die. I'm disturbed. I'm getting mad. My family also disturbed because of me. Nobody knows what I go through. Whenever I share the traumatic experience tears rolls up in my eyes. I drink a fair amount of liquor to get a sound sleep".

After patiently listening to what he said, the researcher applied the CVS protocol. Immediately after the therapeutic intervention, he slept in the office for about half an hour. Then, he opened his eyes with a broad smile, sat a while on a mat, drank the water kept in a commonplace and profoundly joined his hands as a symbol of gratitude and walked away joyfully. After the CVS intervention, three post-interventional assessments were performed after one month, four month and eight month of interval. Post assessment revealed the severity of trauma on a rating scale of 35, 31 and 26, respectively. In short, there is a transition from very severe to moderate.

Nowadays, I'm getting sound sleep. Before the intervention, I often see grass, trees, floating dead bodies, plastics going inside my mouth, my body bound with ropes etc in my dreams. Now no fear related to sea and boat. Now twice a week, I go fishing. His daughter recalls, "Before coming to meet you, he used to call all the abusive words under the planet aggressive and brutally beat my mother. Therefore the neighbourhood doesn't have a good opinion of him. Now there is a positive change in his behaviour and attitude".

In addition, the researcher visited his families, discussed with his siblings, and assessed the respondents' reaction to the treatment, result, and pre and post-mental health status (social, physical, emotional and spiritual). The comments were satisfactory.

From the interventional study, we could comprehend that counselling is vital to understand the specific trauma and pinpoint the root cause of the trauma. The current study proved that the effects of trauma could not be erased through counselling. With reference to the works of D. John Antony (D John Antony, 2005), the current study would also agree up to the point that telling the story helps the clients to ventilate feelings like anger, confusion, tension, guilt, etc. associated with stress. By felicitating counselling, the effect of trauma cannot be erased by simply rethinking of story. Additionally, the study demonstrates that secondary wounds make them powerless and worthless, and they find it difficult to accept their vulnerability. In this case, the impact assessment reveals that the technique of VKD is highly effective in desensitizing trauma. Through spiritual therapy, the client had an opportunity to make an inward journey and find a connection with the outer dimension of the self and nature. In complete silence, the client makes a voyage to his inner self and becomes

aware of the beauty that lies within, and that awareness enables him to tap the source and re-affirm himself that life is not over and hope for the best. Spirituality enables him to reconcile with the self and situation and have peace and harmony between body, mind, and soul. And, spirituality activates positivity and generates hope and meaning in their existence. This empirical evidence proves that CVS is a potentially effective treatment.

V. Conclusion

With reference to Kurian's (1985) work, AartiKelker-Khambete (2012) points out those fishermen in Kerala are known for their fishing skills, knowledge of fish, fishing habits, waves, currents, and stars. And this knowledge is extremely valuable (AartiKelkar - Khambete, 2012). Unfortunately, even as Kerala advances in health and technology, the traditional fishermen are neglected, ill-treated and marginalized. Studies pre and post-intervention of Ockhi victims show that they have severe psychological problems associated with the traumatic experience they experienced. The study found that an integrated approach - the CVS protocol-effectively managed PTSD. There is a transition from very severe to moderate. The study's limitations illustrate that the findings are insufficient to generalize and challenging to validate. The CVS protocol has ample scope for future study and analysis among PTSD-affected and trauma survivors.

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Sunitha. R, et. al. "Mental Health of Fishermen after the Ockhi Cyclone: A Social Work Intervention Study." *International Journal of Humanities and Social Science Invention (IJHSSI)*, vol. 11(11), 2022, pp 97-101. Journal DOI- 10.35629/7722