خصوصیات بحران در اپیدمی ها

outbreak as a crisis

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disaster

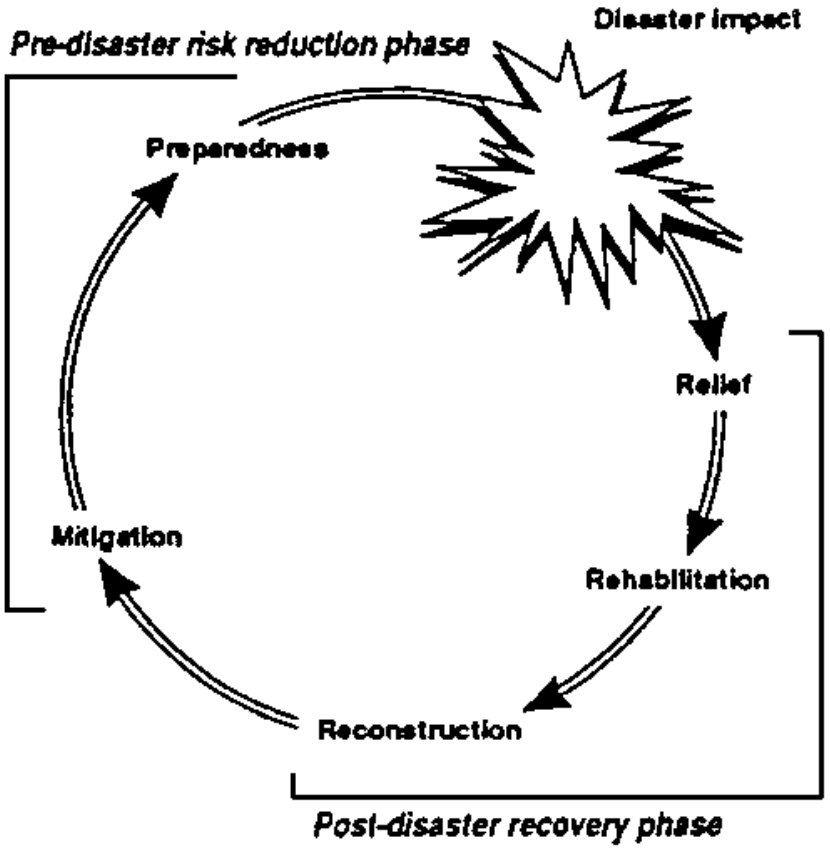
- A disaster is a sudden, calamitous event that seriously disrupts the functioning of a community or society and causes human, material, and economic or environmental losses that exceed the community's or society's ability to cope using its own resources.

- A disaster is an occurrence disrupting the normal conditions of existence and causing a level of suffering that exceeds the capacity of adjustment of the affected community.

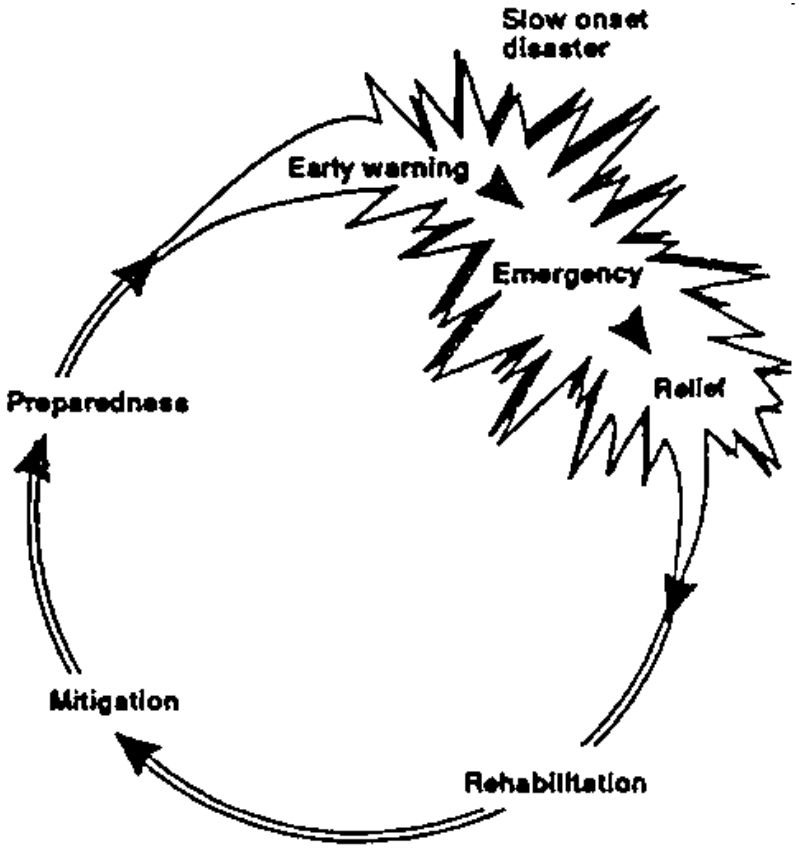
disaster

- **A disaster occurs when a hazard impacts on vulnerable people.**
- The combination of hazards, vulnerability and inability to reduce the potential negative consequences of risk results in disaster.
- Disasters are routinely divided into natural or human-made, although complex disasters, where there is no single root cause, are more common in developing countries.
- A specific disaster may spawn a secondary disaster that increases the impact.
- A classic example is an earthquake that causes a tsunami, resulting in coastal flooding. Some manufactured disasters have been ascribed to nature.

Rapid onset disaster



Slow onset disaster



outbreak

- **A disease outbreak is the occurrence of disease cases in excess of normal expectancy.**
- **The number of cases varies according to the disease-causing agent, and the size and type of previous and existing exposure to the agent.**
- Disease outbreaks are usually caused by an infection, transmitted through person-to-person contact, animal-to-person contact, or from the environment or other media.
- Outbreaks may also occur following exposure to chemicals or to radioactive materials.

pandemic

- A pandemic is an epidemic of disease that often spreads quickly across far-reaching areas, affecting many people.
- Few pandemics have affected as many communities around the world as the coronavirus disease 2019 (COVID-19) pandemic.
- Pandemics and other disasters involve physical danger and also stress that can overwhelm survivors' usual coping strategies, both during and after the disaster.
- After a pandemic or other disaster, people often notice changes in how they feel, think, and act, and they may not realize that these changes are reactions to the disaster.

- When people experience a disaster, they may experience a variety of reactions, many of which are natural responses to difficult situations.
- Most people show resilience after a disaster.
- Resilience is the ability to bounce back, cope with adversity, and endure during difficult situations.
- Thankfully, resilience in disaster recovery is ordinary, not extraordinary, and people regularly demonstrate this ability.
- Using supportive resources to address stress and other hardships is a critical component of resilience.

Acute stress

- Also known as the fight-or-flight response, acute stress is your body's immediate reaction to a perceived threat, challenge or scare.
- The acute-stress response is immediate and intense, and in certain circumstances it can be thrilling.
- A single episode of acute stress generally doesn't cause problems for healthy people.
- However, severe acute stress can cause mental health problems — such as post-traumatic stress disorder.
- It can also cause physical difficulties such as tension headaches, stomach problems or serious health issues — such as a heart attack.

Chronic stress

Mild acute stress can actually be beneficial — it can spur you into action, motivate and energize you.

The problem occurs when stressors pile up and stick around.

This persistent stress can lead to health problems, such as headaches and insomnia.

The chronic-stress response is more subtle than is the acute-stress response, but the effects may be longer lasting and more problematic.

Effective stress management involves identifying and managing both acute and chronic stress.

- Chronic stress is a prolonged and constant feeling of stress that can negatively affect your health if it goes untreated .
- It can be caused by the everyday pressures of family and work or by traumatic situations.
- the body remains in a constant state of physiological arousal.
- This affects virtually every system in the body, either directly or indirectly .
- People were built to handle acute stress, which is short-lived, but not chronic stress, which is steady over a long period of time .

- Survivors may be at higher risk of intense reactions if they live in communities where many people got sick; they had the disease themselves; or they had health, mental health, or substance use conditions before and during the pandemic.
- Pandemics, unlike other types of disasters do not have a clear beginning and ending, sometimes leading to increased uncertainty and distress.
- This tip sheet describes common reactions after pandemics and other disasters and suggests ways to cope.
- It also covers financial stress and signs of the urgent need for mental health assistance and lists sources of help and support.

In its acute form, stress may be a necessary adaptive mechanism for survival and with only transient changes in the brain.

prolonged stress causes overactivation and dysre-gulation of the HPA axis thus induces detrimental changes in the brain structure and function.

Therefore, chronic stress is often considered a negative modulator of the cognitive functions including the learning and memory processes.

Exposure to long-lasting stress reduces health and increases vulnerability to mental disorders.

Burn-out

- Burn-out is included in the 11th Revision of the International Classification of Diseases (ICD-11) as an occupational phenomenon. It is **not** classified as a medical condition.
- Burn-out is defined in ICD-11 as follows:
- "Burn-out is a syndrome conceptualized as resulting from chronic workplace stress that has not been successfully managed.
- It is characterized by three dimensions:
  - feelings of energy depletion or exhaustion;
  - increased mental distance from one's job, or feelings of negativism or cynicism related to one's job; and
  - reduced professional efficacy.

Behavioral Modification

Trying to adhere to anything extra is always a challenge.

You can add extra steps to your routine for a few days, but sustained behavior change is hard.

Especially when no one around you is sick, and you just don’t feel like wearing a mask or saying no to things you like to do. But the fact is, the precautions work.

Health system perplexity

New scientific insights about the virus that causes COVID-19 change experts' recommendations day by day, which causes confusion.

You might be asking yourself: Do I still need to disinfect my groceries? Do I need to wear a mask in my car? Is my child safe playing in our yard?

It's hard — but important — to keep up. Sticking with reliable, trustworthy information is essential.

New facts are emerging as we learn more and more about this virus. In the meantime, it makes sense to use the understanding we have.

secondary epidemic

According to Elke Van Hoof, the multiple stresses people are currently experiencing due to the COVID-19 pandemic will result in a secondary epidemic of burnout and stress-related absenteeism in the latter half of 2020.

Craig and Sprang (2010, p. 320) suggest a rough differentiation between STS/CF and VT, delimiting STS/CF as ‘socioemotional symptoms’ and VT as ‘changes in cognitive schemata’.

secondary traumatic stress (STS)

Another consequence of the COVID-19 outbreak may be represented by pathologic secondary traumatic stress (STS).

Figley defined STS as:

the stress deriving from helping others who are suffering or who have been traumatized.

Some authors use the term STS or compassion fatigue or vicarious traumatization interchangeably.

In ordinary situations, because of the implications of their professional sector, HCWs may be at higher risk of developing pathological secondary traumatization and this is particularly true now more than before, considering the present emergency situation.

Secondary traumatic stress was positively associated with the amount of time spent with COVID-19 patients, with the exposure to COVID-19 patients' deaths and with the severity of symptoms of family members or friends infected by COVID-19.

STS describes symptoms identical to PTSD (intrusive symptoms, avoidance, and hyperarousal), also including depressive and anxiety symptoms.

These symptoms are seen as natural and consequential to the first responders' work environment.

compassion fatigue

Compassion stress is defined as a normal reaction to helping and working with trauma survivors. It enfolds the feeling of helplessness, confusion, isolation, and symptoms of STS.

An enduring or cumulative exposure to compassion stress may lead to CF, a ‘state of exhaustion and dysfunction, biologically, and emotionally.

Individuals are no longer able to feel and express sincere understanding, empathy, and support for others (Hofmann, 2009).

Vicarious traumatization (VT)

Vicarious traumatization (VT) was described by Pearlman and Saakvitne (1995) as permanent and cumulative changes of schemas based on empathetic work with trauma survivors.

Schemas are cognitive structures used to integrate and interpret new experiences (Piaget, 1971).

If new experiences are no longer compatible with existing schemas, individuals may develop their schemas to an unrealistic, negative view of the world, e.g. 'Most people are trustworthy' might change into 'No one is trustworthy, I am on my own'.

This in turn leads to depression, cynicism, and pessimism.

These changes are not regarded as pathological, but are understood as a normal, inevitable reaction following contact with traumatized people.

Infodemia

The Coronavirus disease (COVID-19) is the first pandemic in history in which technology and social media are being used on a massive scale to keep people safe, informed, productive and connected.

At the same time, the technology we rely on to keep connected and informed is enabling and amplifying an infodemic that continues to undermine the global response and jeopardizes measures to control the pandemic.

An infodemic is an overabundance of information, both online and offline.

It includes deliberate attempts to disseminate wrong information to undermine the public health response and advance alternative agendas of groups or individuals.

Mis- and disinformation can be harmful to people's physical and mental health; increase stigmatization; threaten precious health gains; and lead to poor observance of public health measures, thus reducing their effectiveness and endangering countries' ability to stop the pandemic.

Information is what we call things that are accurate to the best of our current knowledge. For instance, COVID-19 stands for coronavirus disease 2019 and is caused by the SARS-CoV-2 virus. One of the difficulties with any new pathogen, like this coronavirus, is that information changes over time as we learn more about the science.

Misinformation, on the other hand, is false information. Importantly, it is false information that was not created with the intention of hurting others. Everyone believes they are sharing good information – but unfortunately, they are not. And depending on what is being shared, the misinformation can turn out to be quite harmful.

At the other end of the spectrum is **disinformation**. Unlike misinformation, this is false information created with the intention of profiting from it or causing harm.

Misinformation costs lives. Without the appropriate trust and correct information, diagnostic tests go unused, immunization campaigns (or campaigns to promote effective vaccines) will not meet their targets, and the virus will continue to thrive.

What is the infodemic?

As stated by the WHO:

An overabundance of information – some accurate and some not – that makes it hard for people to find trustworthy sources and reliable guidance when they need it.

Infodemic refers to a large increase in the volume of information associated with a specific topic and whose growth can occur exponentially in a short period of time due to a specific incident, such as the current pandemic.

In the information age, this phenomenon is amplified through social networks, spreading farther and faster like a virus.

What is misinformation

Misinformation is false or inaccurate information deliberately intended to deceive. In the context of the current pandemic, it can greatly affect all aspects of life, especifically people's mental health, since searching for COVID-19 updates on the Internet has jumped 50%–70% across all generations.

Misinformation in a pandemic can negatively affect human health. Many false or misleading stories are fabricated and shared without any background or quality checking.

Much of this misinformation is based on conspiracy theories, some introducing elements of these into seemingly mainstream discourse.

Inaccurate and false information has been circulating about all aspects of the disease: how the virus originated, its cause, its treatment, and its mechanism of spread.

Misinformation can circulate and be absorbed very quickly, changing people's behavior, and potentially leading them to take greater risks.

All this makes the pandemic much more severe, harming more people and jeopardizing the reach and sustainability of the global health system.

Why can the infodemic make the pandemic worse?

Makes it hard for people, decision makers, and health workers to find trustworthy sources and reliable guidance when they need it.

People may feel anxiety, depression, overwhelmed, emotionally drained, and unable to meet important demands

It can affect decision-making processes when immediate answers are expected and not enough time is allotted to deeply analyze the evidence

No quality control on what's published, and sometimes, on what's used to take action and make decisions

Anybody can write or publish anything on the web (podcasts, articles, etc.), in particular on social media channels (individual and institutional accounts)

361,000,000 videos were uploaded on YouTube in the last 30 days under the “COVID-19” and “COVID 19” classification

about 19,200 articles have been published in Google Scholar since the pandemic started.

In the month of March, around 550 million tweets included the terms coronavirus, corona virus, covid19, covid-19, covid_19, or pandemic.

Access to the right information, at the right time, in the right format IS CRITICAL! Access to the right information, at the right time, in the right format IS CRITICAL!

But just as we can protect against COVID-19 with hand washing, physical distancing and masks, we can slow down the spread of misinformation and disinformation by practising some information hygiene. Before sharing something, ask yourself these questions:

How does this make me feel?

Why am I sharing this?

How do I know if it's true?

Where did it come from?

Whose agenda might I be supporting by sharing it?

How to navigate misinformation and disinformation

It helps to think of misinformation and disinformation spreading in the same way as viruses. One person might share fake news with their friends and family, and then a handful of them share it with more of their friends and family, and before you know it, potentially harmful or dangerous information is taking over everyone's newsfeed.

مناطق جغرافیایی بیشتر	بحث پیشگیری در اپیدمی ها
مشکل در ارتباط با دیگران و محیط	اغلب ناشناخته است.
اعتماد به نظام سلامت	زمان می برد
تداخل پزشکی نوین و طب سنتی	استرس تقریبا مزمن
انطباق با شرایط تازه	فرسودگی شغلی
	مراقبت های تخصصی