

Definitions

hazard	"something having potential to cause harm, damage or danger to people, property or envi."
disaster	"a sudden great misfortune, calamity" (oxford dictionary)
disaster management	"an event, natural or man-made, immediate or progressive, which impacts with such severity that the affected community has to respond by taking exceptional measures"

Disaster management cycle (MPDRR)

series of steps used to prepare, contain and mitigate unexpected events - lessen the impact of unexpected events and recover as many resources as possible

Steps	Description	Functions
mitigation/prevention	reduce impact 3 levels: primary - before disaster secondary - during disaster, to reduce severity tertiary - after disaster, to ensure it doesn't occur again prevent the disaster possible, and if not mitigate	risk assessment planning & policy development education, awareness
preparedness	building capacity to respond effectively when disaster occurs planning, training, developing resources steps taken to reduce expected damage	early warning systems logistics and supply chain management (distribution of supply & transport) security and law enforcement shelter continuity planning (process to ensure org functions during and after disaster - minimize downtime, maintain critical services, reduce disruption)
disaster response	unpredictable, sudden event immediate actions upon disaster rescue works, first aid etc	emergency communication rescue teams evacuation medical services



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Page 1 of 5.

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Disaster management cycle (MPDRR) (cont)

recovery	bringing population and place to pre-disaster stage rehabilitation (after disaster - decision making, to bring pop back) and reconstruction (after rehab - implementing decisions to return to pre disaster phase)	damage assessment resource coordination psychological support
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Classification of disasters

disasters can fall in multiple categories

common disasters in india are natural and man- made (flood, cyclones, droughts, earthquakes, landslides)

natural geological (earthquake, landslides)
hydrological (floods, avalanches - rapid flow of snow down slopes)
meterological (hurricane, cyclone - north is anti-cloc-kwise, blizzard)
climatological (wildlife dessertification)

man made industrial and transportation accidents
infrastructure failure
envi disasters caused by - toxic, oil spills,deforestation

health pandemic (global)
epidemic (regional)
biological (biological warfare (for war) and bioterrorism- using bacteria, virus etc with intent to kill/immobilism humans, accidental release of pathogens)

complex conflict related
emerge- humanitarian (famine - shortage of food, mass displa-
ncies cement of pop)

societal economic/financial
social (riots, protests)

General principles (C4MP GRIEF)

comprehensive every stage of the cycle is imp
approach

community partic- all should take resp + help other
ipation

capacity building skills/ learning experience of ppl (eg- firefi-
ghters, doctors etc)

continuous learning (from past disasters) and improvement

General principles (C4MP GRIEF) (cont)

multi-stakeholder in all stages - govt, ngos, private, commun-
collaboration ities, individuals

post disaster recovery following up and supprting victims even
after disaster

gender & vulnerability more support during disasters - women,
consideration children, elderly, PWD

risk reduction and prevention

information sharing accurate info with authorities +
management prevent info leaks to public

early warning signs to prevent/mitigate/evacuate

flexibility & adaptability diff strategies for diff disasters (or same
disaster in diff times)

Disaster threats

Tradit- present and experienced for a long time and still causes
ional drastic impact - we have not eliminated/contained them,
threats only somewhat modified their efforts
1. natural phenomenon - earthquakes, cyclones, tsunamis,
droughts etc
2. man-made - major accidents
inc in pop has lead to inc in % of death - more ppl living in
inhabitable areas, more areas modified and made more
vulnerable (eg: tin roofs in areas susceptible to cyclones -
lethal weapon)



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Page 3 of 5.

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Disaster threats (cont)

New threats	arise due to tech, climate change, changing societal dynamics
	1. cyberattacks
	2. climate change related events - heatwaves, prolonged droughts, extreme storms
	3. civil unrest - terrorism, hijacking, wars
	4. hazardous substances (bhopal gas tragedy - 1985)
	5. atomic & nuclear sources (chernobyl nuclear power plant - 1986)

Psychological effects of disaster

vary in intensity, duration

depends on the nature of the disaster, the level of exposure, individual resilience, and available support systems.

Primary traumatization direct emotional and psychological impact experienced by individuals directly exposed (experiencing/witnessing) to the disaster
flashbacks, psych numbing, anxiety, fear, vulnerability

Secondary traumatization also known as vicarious traumatization/compassion fatigue
are indirectly exposed to the disaster through close contact with direct trauma victims
may internalize distress of affected individuals - more guilt, emo swings and fatigue
first responders, healthcare professionals, volunteers, family & friends

Psychological effects of disaster (cont)

Delayed effects sometimes referred to as "delayed onset PTSD"
some people may not immediately display severe reactions to the trauma but develop symptoms later on - after days, weeks, or months after the disaster; maybe triggered by reminders/stressors

Psychological Conditions PTSD (flashbacks, nightmares, hypervigilance, avoidance)
Anxiety and Fear (unsafe & lack of control, abt future disasters etc)
Depression (hopelessness, loss of activities)
Grief and Loss
Survivor's Guilt

Immediate Emotional Responses Psychological Shock (numb/detached from reality)
Sleep Disturbances (could be due to anxiety & fear)
Increased Aggression or Irritability

Cognitive Challenges Displacement and Disorientation (from their old homes - difficulty adapting)
Decreased Cognitive Functioning (attention, decision making)

Social Impact: Social Isolation (social networks might be disrupted after disaster)
Resilience and Post-Traumatic Growth (+ve psych changes and personal growth)



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Page 4 of 5.

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Psychological / emotional phases of disaster

pre-disaster	anxiety and fear occurs before actual disaster warning/threat increase preparedness, prevention/mitigation behavior
impact	shock, fear, confusion, overwhelm immediately following disaster
heroic	sense of unity survivors feel altruistic 2 days - 1 week after disaster help each other, volunteer, form rescue teams, provide food and first aid
honeymoon	sense of hope, relief 2-4 weeks after disaster support pours in from various sources (media, other states & countries etc) people not involved give their attention, time, money and services (food, clothing, shelter, funds) to take care of and help the victims & survivors
disillusionment	frustration, exhaustion, emotional fatigue,, impatient reality check of disaster's long-term impact people stop caring and providing resources survivors have to deal with their losses on their own
reconstruction	long-term recovery bring the population and place to pre disaster state can last for months, years, decades

Ethical principles (HEINA)

humanity	actions should prioritize saving lifes, protecting dignity and ensuring well-being of affected ppl
equal opportunities	to access relief, recovery and rehab services

Ethical principles (HEINA) (cont)

independence	disaster management should be free from political, economic and other influences
non-discrimination	in rescues, resources
autonomy	victims/survivors should be treated with dignity & respect

Risk and vulnerability analysis - HER V CR(I)MES

done to identify potential hazards, assess likelihood of occurrence & vulnerability of area and pop to it	
hazard identification	man-made/natural
exposure analysis	areas & pop most vulnerable
risk assessment	potential impact, severity, likelihood, frequency- through historic data, scientific modelling & expert judgement
vulnerability analysis	assess weakness & resilience of assets and communities - building quality, SES conditions, access to resources and community preparedness
capacity assessment	existing resources, preparedness, service availability - of local authorities, org, professionals
risk communication	inform public, authorities - to raise awareness, preparedness, mitigation & mobilise resources
risk Mapping	visual rep of hazard prone zones, exposure of assets and vulnerable communities
economic and social impact	potential loss of life, property damage, disruptions to livelihood etc
scenario building	hypothetical (eg: drills) - to better prepare, evacuate and understand consequences



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Page 5 of 5.

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Factors

Factors affecting vulnerability (reaction/response) of adverse psych effects

Nature (Inherent Factors):

- Pre-existing mental health conditions (anxiety, depression, PTSD)
- Genetic and biological predispositions
- Personality traits (self-esteem, neuroticism)

Nurture (Developmental and Environmental Factors):

- Traumatic experiences (past abuse, trauma, neglect)
- Social support (little to no)
- Resilience (ability to cope - tolerance level)
- Coping mechanisms (emotion - for short term & problem focused - for long term)
- Life circumstances (eg: financial diff, chronic illness etc)
- Stigma and discrimination (get lesser resources)
- Cumulative stress (effect of chronic stress - allostatic load)
- Cultural background (beliefs, values)

External (Societal and Access-Related Factors):

- Access to resources and healthcare
- Exposure to media (constant exposure leads to higher effects)



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