

Coping Behaviors and Social Panic on Epidemic

EXTENDED ABSTRACT

Introduction

Social panic is one of the social consequences of epidemic, which exerts great impact on individuals' physical and mental health, as well as epidemic control in general. It is believed that study on social panic in crisis is helpful for the individuals to cope with crises suitably, and for the policy-makers to control the epidemic effectively. Review on the related researches indicates that:

- Studies on psychological impact of epidemic mainly focus on individual level other than social level.
- Only retrospective studies on social panic in crisis were available, there was no real-time survey throughout a crisis process.
- Only comparison between crisis and non-crisis situations was made, there was no comparison between different crisis stages. There were evidences that social panic aroused to some extent in China when SARS (severe acute respiratory syndrome) erupted in Spring, 2003. Three round of surveys were conducted during SARS period in China, to investigate the coping behaviors of the residents, which provided the opportunity to analyze the dynamic characteristics of social panic in epidemic.

Survey objectives:

To investigate the coping behaviors of the residents on SARS;

To explore the linkage between social panic and epidemic situations;

To provide suggestions for the individuals and policy makers to cope with crisis effectively.

Survey Procedure

The survey went through different epidemic stage:

- May 6-13: a period with large amount of newly diagnosed cases (69-158 cases reported per day).
- May 23-27: a period with less newly diagnosed cases (9-20 diagnosed cases reported per day).

- June 5-12: A period with few newly diagnosed cases (less than one cases reported per day).

The survey Covered cities with different epidemic situations.

- Beijing : large amount of accumulated cases, and many the newly diagnosed when the survey started.
- Guangzhou: large amount of accumulated cases, but the newly diagnosed declining rapidly when the survey started.
- Lanzhou: only a few diagnosed cases founded at the beginning, and there was no newly diagnosed when the survey started.
- Guiyang: there was no diagnosed case.

Participants

- 1550 residents from 4 cities were interviewed, 56.3 percent were male, and 43.7 percent were female.
- The interviewees were randomly sampled in hospitals, bus stations and airports, communities, and shopping centers.
- Sampling sites were kept unchanged as possible as could in three rounds.

Methods

- A behavioral checklist including 19 individual preventive measures on SARS was developed;
- Agreement to these behaviors were measured with a 5-point scale (5 for totally agree, 1 for totally disagree)
- Cluster analysis was employed with the 19 variables

Main findings

- Two kinds of the individual behaviors were discriminated by experts:
 - Suitable behaviors:** effective both for individuals and for the public, e.g. not visit the infected areas.
 - Unsuitable behaviors:** non-effective either for the individual or for the public, e.g. flee the infected areas.
- The respondents were classified into three groups through cluster analysis:
 - Suitable coping:** scored high on the suitable behaviors while scored low on the unsuitable behaviors.

Over coping: scored high both on the suitable and unsuitable behaviors.

Under coping: scored low on the suitable behaviors as well as the unsuitable behaviors.

•Coping styles vary significantly in phases and cities with different epidemic situation

Discussion

(1) Social consequence of epidemic was discussed on a psychological viewpoint, while most of the related researches focus on individual levels.

(2) Social panic aroused both in effected and uninfected cities, which indicated:

- Impact of epidemic could last for a long time.
- Social panic was diffusing with the epidemic information and attributed partly to the exaggerated epidemic.

(3) Individual interests could conflict with that of the public in epidemic emergency.

- It's important for the government to make epidemic-control policies balancing interests between the individual and public.

(4) Social panic and epidemic situation

- Gravity of panic was inconsistent with the amount of the newly diagnosed, while it's related more to the amount of accumulative cases.
- Explanation to epidemic information is as important as its release.