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Editorial

Dealing with Uncertainty: Lessons Learned from COVID-19



The COVID pandemic turned our world upside down and altered routines and priorities. We took many things for granted and now suddenly faced a new situation that changed how we performed customary activities such as going to the grocery store, going to work, keeping scheduled doctors' visits, going to the dentist, and socializing with family, colleagues, and friends. Framed within this new set of circumstances have been increased stress and anxieties, and, for some, loss of family, friends, income, and home. We are also required to social distance at least 6 feet, wear masks in most settings, and consistently wash hands for at least 20 seconds. On the other hand, several positives have emerged, such as the expanded use of telemedicine and many of us becoming more adept in using technology to participate in online school activities, church services, work-related and civic meetings, and family events.

As a result of social isolation, altered connectivity, and disruption of normalcy, we now have greater insights into how the lives and circumstances of individuals with chronic or acute pain may be temporarily or permanently altered. Even in normal circumstances, chronic pain management affects over 116 million US adults (IOM, 2011), is the most frequent reason individuals seek healthcare, and is challenging to treat even in the best of circumstances (Daubresse et al., 2013). Although there are many factors to consider as we provide care during disaster or emergency situations, several critical elements must remain in the forefront of our thinking:

- In large-scale disasters or emergency situations, whether natural (e.g., pandemic, hurricanes), environmental (e.g., Deepwater Horizon oil spill), or traumatic (e.g., mass shootings, World Trade Center attack), there are increases in depression, loneliness, anxiety, post-traumatic stress disorders, and substance abuse, along with behavioral disorders such as child abuse and domestic violence (Nerie, Nandi, & Galea, 2008; Galea, Merchany, & Lurie, 2020). Unfortunately, the impact of these events often affects mental health in the short term and general quality of life in the long term (Galea, Merchany, & Lurie, 2020). As a result, mechanisms must be put in place to address the signs and symptoms of mental health disorders while monitoring the successes of our interventions.
- During the COVID pandemic, numerous individuals experienced difficulties obtaining the necessary resources to survive, such as prescribed and over-the-counter medications, supplies, and food. For those with limited transportation, economic hardships, and reduced social support systems, there were even greater difficulties obtaining basic necessities. These sudden new challenges contributed to the deterioration of the physical, mental, and pain status of individuals experiencing pain.

- Another stressor exhibited by many was fear of seeking professional care and, if admitted to a facility, of being isolated from family and friends. As we look to the future, how can we creatively address these concerns?
- Research further indicates that community-dwelling adults
 with more severe or poorly managed pain often have impaired
 attention capacity, diminished decision-making capabilities,
 and memory impairment (Nadar, Jasem, & Manee, 2016; van der
 Leeuw, Eggermont, Shi, Millerg, Gross et al., 2016). In conditions
 such as a pandemic or other disaster or emergency situations,
 consistently monitoring these individuals and finding ways to
 provide care are critical.

What have we learned that will help clients experiencing pain survive pandemics or other disaster or emergency situations? It is evident that planning for potential disaster and emergency situations is essential. Moreover, planning is critical for persons with chronic and disabling conditions, including pain, mobility, sensory, or cognitive issues (Barth, 2020; Al-Rousan, Rubenstein, & Wallace, 2014; Owens, Stidham, & Owens, 2013; FEMA, 2004).

When we are preparing for any disaster or emergency, whether COVID, flooding, tornadoes, hurricanes, or chemical spills, three steps are central to preparedness (FEMA, 2004, 2019, 2020; US Office of Homeland Security, 2020; American Red Cross, 2020).

Make a Disaster Kit of Emergency Supplies

Information to prepare this kit should be based on information obtained from US Department of Homeland Security, American Red Cross, or FEMA (FEMA, 2004, 2019, 2020). This kit may need to be prepared for clients who cannot do it for themselves. Disaster and emergency supplies must be ready and in one place prior to an actual disaster or emergency. Supplies should last at least 3 days and be placed in easy-to-carry containers (e.g., backpack) with ID tags displaying name and contact information. Label all equipment, such as wheelchairs, canes, and walkers, with the client's name, address, phone number, and significant other names and contact information. Make sure the disaster kit is up to date, and review contents every 6 months.

Make a Plan

It is vital that individuals have disaster or emergency plans, escape routes, and designated meeting places. In addition, it is important to keep in the forefront how vision, hearing, mobility, and cognitive or emotional impairments may affect preparation and outcomes. Families should have their own communication

plans, carry information in their wallets, and list out-of-town contact persons as a main contact, and these out-of-town contact persons must be aware of these plans. Keep emergency contact numbers near the telephone or in phone number listings and make plans for those with disabilities, as well as for pets or service animals. Know what the community warning system is for disaster or emergencies and what services are offered. Determine if SMART911 is available in your community and sign up so emergency responders are aware of the clients' locations and specific needs.

Be Informed

For more information about the types of disaster or emergencies (e.g., hurricanes, earthquakes, tornadoes, floods, chemical spills) possible in your community, visit www.ready.gov, or call 1800-BE-READY. Once this information is obtained, it is essential to adapt it to an individual's personal circumstances and make every effort to follow instructions given by local authorities. Adults with disabilities should know the community warning system and how residents are to be notified of a potential disaster or emergency situation.

Disaster or emergencies situations are never-ending. By June 2020, FEMA had already made 181 disaster declarations (FEMA, 2020). Even though, we presently are dealing with a pandemic, it is imperative that we be prepared for the next disaster and work with our clients to take action now.

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