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LESSONS AND POST-COVID RECOMMENDATIONS DRAWN FROM THE HEALTH CRISIS

Mr ELJERRARI Mohammed

Doctorant, Faculté de Langues, de Lettres, et des Arts

Université Ibn Tofail, Kénitra, Maroc

Mohammed.eljerrari@uit.ac.ma

Mme ELADLOUNI Wafaa

Enseignante chercheuse, Faculté de Langues, de Lettres, et des Arts

Université Ibn Tofail, Kénitra, Maroc

Abstract

The coronavirus disease 2019 (COVID-19) pandemic has caused major sanitary crisis world-wide. Half of the world has been placed in quarantine. The main question that arises in this contribution is the indication that we must take lessons from this pandemic so as to confront the futurs sanitary crisis. This brought us to collect some data through using a documentary research and litterature review.

Thus, the aim of this aticle is to make some recommandations post-covid which permit social actors to deal with the postcovid imapcts on differents sectors.

Key words : post-covid recommendations- sanitary crisis- postcovid imapcts

Introduction

The Coronavirus pandemic, which broke out suddenly in the city of Wuhan in China at the end of December 2019, is considered to be one of the most dangerous pandemics in Morocco such as famine, epidemics, plague, cholera, the Black Death, the Smallpox of the last centuries.

In fact, this major crisis has been classified by the World Health Organization (WHO) as a health emergency of international concern. In addition to its innumerable human damage, it has caused a dysfunction of all vital systems, in particular that of health.

The province or prefecture of Sidi Slimane Sanitaire has not experienced a disease as dangerous as this pandemic which has caused social, psychological and economic problems that affect not only the general population but also the medical and paramedical population.

Indeed, the health crisis has had adverse consequences on the health of health professionals who work in public and private health structures due to the workload, stressful and anxious conditions, lack of motivation and communication during the pandemic period.

In this context, two hypotheses could be made:

Hypothesis 1: The Coronavirus pandemic crisis could be a subject of teaching and learning for the various social and health actors;

Hypothesis 2: The proposed recommendations would better reduce the harmful post-covid consequences of the Coronavirus pandemic on the health of professionals working in the health sector.

To answer the two research questions, we used the qualitative descriptive study based on the documentation and the in-depth reading of official national and international data on the subject in question.

 Our article is divided into two parts: the first part will be devoted to the literature review in which we review the theoretical and conceptual apparatus relating to the notion of the crisis and its relationship with health and the second part will be reserved highlighting the various recommendations proposed to mitigate the consequences of the pandemic on the lives of health professionals in the post-covid period.

1. Literature review

1.1. The concept of a health crisis

Etymologically, the term "crisis" originates from the Greek word "krisis". It is a polysemous term that takes on several meanings: "risk", "threat", "danger", "critical situation", "judgment", "the action or the ability to decide or distinguish", etc. It is also the response to a particular situation. In medicine, a crisis is the critical phase of an illness.

For LAGADEC (1991: 81-103), the concept of the crisis relates to the uncertainty and the unknown which must be taken into consideration during this context: "The insufficiency of information and knowledge is a constant in all disturbances; but here, once again, we go beyond the usual limits. We have neither estimates, nor means of measurement, nor a basis for interpretation (physical, toxicological, epidemiology, etc.), whether in terms of causes, immediate effects, long-term effects, etc. We don't know how we could know. More than uncertainty, we come up against the unknown. ".

Also, LIBAERT (2015: 9) defines the crisis as being: "the final phase of a series of dysfunctions jeopardizing the reputation and the reputation and the stability of a company. ". He took up the definition proposed by Otto Lerbiner: "an unexpected event jeopardizing the reputation and functioning of an organization".

Likewise, he emphasizes that the crisis is characterized by the presence of actors who may be unusual (the press, local elected officials, public authorities, associations, justice, etc.), an unusual and oversized flow of information . This situation leads to a generalized energization due to the acceleration of time depending on the nature of the situation (increased urgency, etc.).

On the other hand, the crisis is not always a danger, that is to say: a threat, it can be an opportunity, a chance. It sometimes leads to change, development and learning.

Steven Fink, who initiated the holistic approach to crisis management in 1986, defines crisis as "a fluid and dynamic state of affairs containing danger and opportunity. It's a tipping point for better or worse."

In addition, KROPP (2019: 26) gives the following definition of crisis: "By definition, a crisis is a non-compliant framework for which urgent solutions must be found, often innovative and requiring a significant commitment of both human and material resources. . Communicating in these conditions proves to be particularly difficult.

Thus, the crisis takes several forms depending on the origin of the cause or event that intervenes in its occurrence or appearance. These types are employed in a field of activity to anticipate any crises that may have arisen.

Similarly, the crisis can also be defined as a process that is difficult to assimilate and understand: "The health crisis is a complex process, difficult to understand, a priori difficult to control. The management of such crises requires media management first, then "technical" management, and finally global risk management. ". (VUIBERT., p: 6)
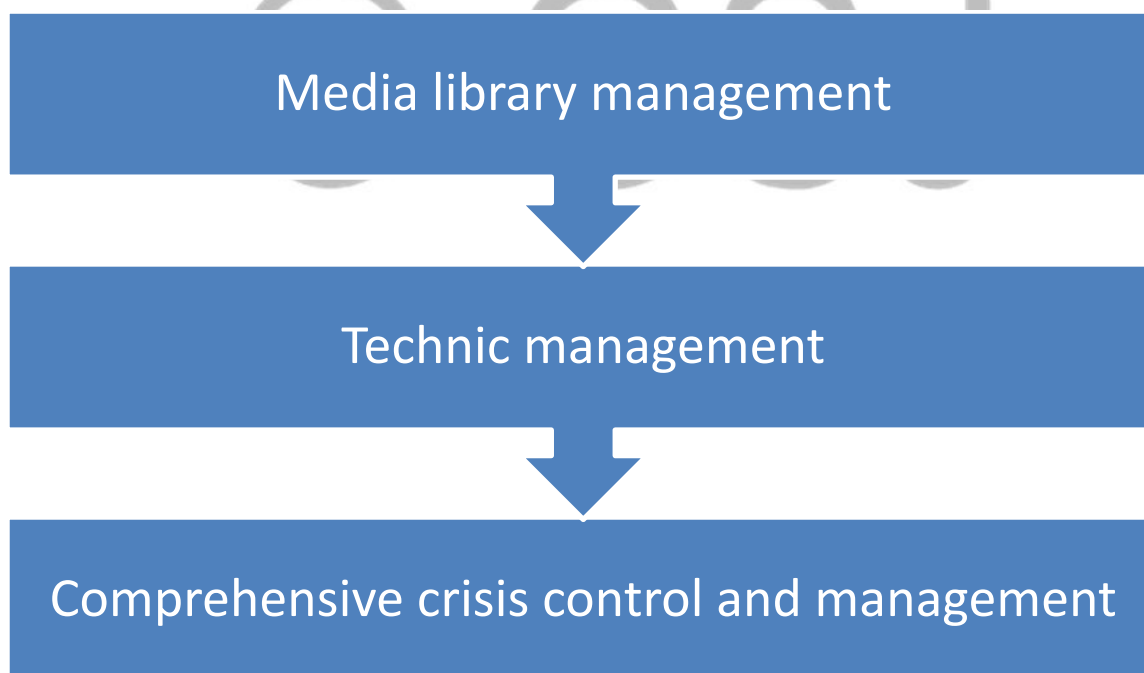
Table 1. The types of crisis

Type de crise	Nature
Social	strike, factory blockade, workplace suicide
Financcial	stock market crash, wild takeover
Technic	explosion, fire, crash, sinking
Commercial	failure in product quality
Environnemental	pollution
healthy	product-related food poisoning, pandemic, etc.
Regulatory	imposition of constraints on the activity of

	the company
Judicial	lawsuit for misuse of corporate assets
reputational	rumor, disinformation
Economic	collapse of economic activities following competitive innovation

According to the World Health Organization (WHO), a health crisis can be defined as follows: "an event, actually or potentially affecting a large number of people, affecting health, and possibly increasing the significant factor of mortality or excess mortality ".

In addition, VUIBERT underlines that health crises are characterized by "the very significant echo they have in public opinion and by the numerous repercussions they have both in the political world and in the medical and health world. ".

Figure1: The health crisis management process

Source : La gestion des crises sanitaires. Thèmes d'actualités économiques, politiques et. sociaux-Vuibert

Thus, this author evokes that the health crisis is characterized by five bridges:

• The Health Crises Unit

Collective food toxico-infections, toxic clouds, water pollution, toxic discharges, epidemics...: each health crisis is specific.

But the management of health crises obeys common rules. It requires tools to be developed by local authorities: behavior guide, reflex sheets, memento for dealing with the crisis, collective learning, etc.

• The responsibility of public authorities

Lack of health control, technological failure, misuse of rules, succession of events, weak monitoring, risky behavior... each health crisis has its specific causes.

But, in all cases, it is the responsibility of the representatives of the State that is called into question. Their behavior must therefore be irreproachable.

•   The complexity

New diseases, traceability, distribution channels, intertwining of interests and issues, technical expertise... health crises arise from phenomena that are sometimes difficult to grasp, identify and control.

In all cases, crisis management requires the ability to organize pool efforts, involve and control private interests, perceive priority action and give an essential place to communication.

•   The integration

Environmental pollution, natural disaster, food production, industrial process, large gathering, rumour, etc. The health crisis is rarely an isolated event.

The health crisis is integrated with other events, other risks. It can be the consequence, it can be the cause.

• The multiplicity of risk analysis criteria

The scale of the health crisis is not proportional to the number of real or supposed victims.

 It does not necessarily respond to the seriousness of the threat.

It is not resolved by the deployment of substantial means, but can be nourished by their weakness or their inadequacy.

It feeds on media dramatization and the silence of public authorities.

1.2. The phases of the crisis:

According to the researcher Steven FINK (1986, p: 22-25), the crisis develops in four main phases, namely:

¬ The pre-crisis phase: The warning signs, the first signals of a crisis.

¬ The acute phase: The eruption of the crisis in one or more spheres (economic, health, political, etc.).

¬ The chronic phase: A period of doubt, questioning, self-analysis in order to fight and face the crisis experienced.

¬ The resolution phase: It corresponds to the resorption of the crisis which is accompanied by a return to normal. It is a period of restructuring, of repair but also of the evaluation of the situation which can be done in particular via feedback.

According to Didier HEIDRICH (2018), the evolution of a crisis goes through four main phases:

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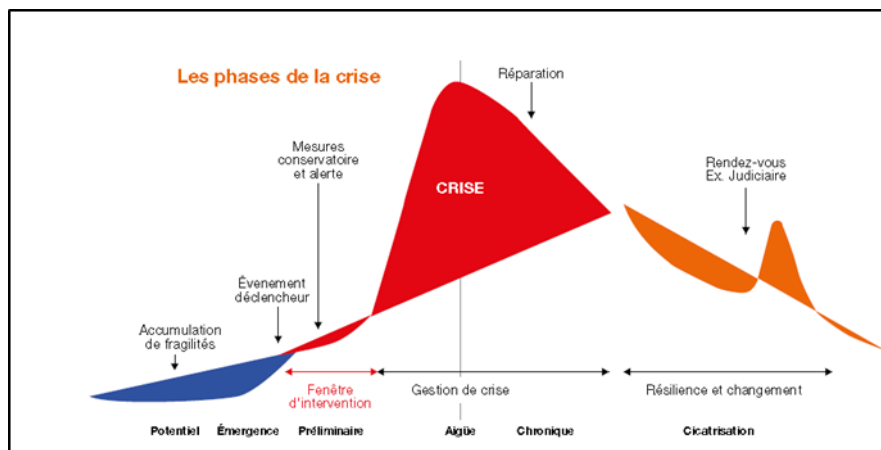It feeds on media dramatization and the silence of public authorities.

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Figure3. The four phases of the crisis:

Source: HEIDERICH (2018, p: 18)

- **The preliminary phase:**

The crisis is still embryonic; it only exists as weak signals, such as an increase in complaints from consumers, a comparable accident at a similar company, suspicious odors or smoke in warehouses, a few very critical tweets. At this stage, nothing is final and the crisis may never appear if corrective measures are taken quickly. This preliminary phase is only a possibility of crisis.

The many works on risk mapping aim to better detect these risk possibilities, in order to better curb the emergence of a crisis. This indicates both the importance of an anticipatory watch, but also the limits since the weak signal only makes sense retrospectively, once the crisis has broken out. This also raises the question of unpredictability, which was perfectly formulated in 2003 by a philosopher of science, Jean-Pierre Dupuy (2003): "The possible event, avoidable thanks to an effective action: such is the pattern of thought to which it have to give up. ".

This media frenzy also affects online media. The Malaysia Airlines plane crash and disappearance crisis in 2014 generated more than 30 million tweets. The abrupt expulsion of a passenger from a United Airlines flight in April 2017 generated more than a million views on YouTube within hours, and nearly two million tweets were posted.

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[1] Didier HEIDRICH is a consultant and creator of the site http://www.communication-sensible.com/portail/
and president of the International Observatory of Crises (OIC).

- **The chronic phase**

This takes place a few days after the acute phase. It is explained by the effect of media saturation where, after some time, the feeling that everything has already been said about the crisis sets in. The subject continues to be in the news, but it no longer makes the headlines or the opening of the television news. This phase depends a lot on the context. Thus, the emergence of another major crisis will tend to reduce the media intensity of a previous crisis more quickly. Conversely, a context with low news will tend to keep a crisis longer in major media coverage.

- **The acute phase:**

It is the most intense phase of the crisis and most often takes place immediately after a situation of no apparent problems. It can be the explosion of a factory, the sinking of a ship, the crash of a plane, the discovery of fraudulent maneuvers, significant food poisoning. In a very short period of a few hours, the organization concerned finds itself in the media spotlight and from a predominantly negative angle.

- **The healing phase:**

It forms the period when the crisis no longer makes the news in the media; however, it can reappear for four reasons:

• Commemoration: Regularly, on the anniversary dates of accidents, reports can be made. Thus, the French nuclear industry knows that every April 26, articles will be written on the Chernobyl disaster, which took place in 1986. For journalists, this is an opportunity to recall the information disseminated at the time or the perception that remained: "The radioactive cloud stopped at our borders. An air crash will give rise during the following years to commemorations of the families of the victims.

• Technical: Several years later, the consequences of the disaster can still be felt, especially for health disasters (Bhopal, 1984).

• Legal: Each crisis gives rise to numerous lawsuits. The possibilities offered to the victims (trial, appeal, cassation) and the length of the delays make possible the presence of the crisis more than fifteen years after its appearance.

• IT: Because the crisis is heavily covered in the media and on social networks, its traces last a long time on the Web. A simple request relating to the name of the company automatically generates all the negative elements relating to the crisis. And if we associate the name of the company or the brand with the word crisis, the results are often surprising.

In summary, a health crisis is a sudden, unpredictable and uncertain event with serious consequences on all state systems and especially the health system. We can take as an

example the Coronavirus pandemic which has exposed the fragility and failure of the health system despite the efforts made to deal with it.

In other words, the Covid-19 health crisis is transformed first into a human crisis caused by a high number of deaths and then into a social, psychological and economic crisis which continues to grow to the present day.

2. Post-pandemic recommendations

2.1. Lessons learned from the health crisis:

Like all the epidemics experienced by Morocco in previous centuries, the Coronavirus pandemic is a health exception given its serious repercussions which affect all professional categories in the different sectors. But health is the most influenced sector according to several surveys, in particular the one we did on the impacts of the Coronavirus on the psychological and professional health of personnel working in the sector, the case of the province of Sidi Slimane.

In this perspective, we have drawn so many lessons and learnings that we will detail in the following lines.

At the provincial and national level, civil society has a role in the rigorous application of the instructions of the Ministry of Health and Social Protection concerning preventive and restrictive measures. Thus, we are witnessing the birth of collective consciousness and social solidarity at the level of the general population. This orientation has contributed to the slowing down of the spread of the virus and consequently, the gradual reduction of contagiousness and mortality rates.

Moreover, the crisis has veiled the vulnerability and fragility of the country's economic situation marked by the decline in the production of activities and services following the state of health emergency which restrict the mobility of people as well as goods and services. Hence the need to develop the national economy in order to face future challenges.

On the nutritional level, we are witnessing the modification of dietary habits characterized by the use of organic food and those which strengthen the body's immunity against infectious and viral diseases such as the Coronavirus.

In terms of entertainment, we see that some people indulge in hobbies and arts especially in the period of pandemic crisis and confinement such as sports, reading, painting, drawing, etc.

In terms of communication, the official media plays a key role in this period in informing and raising awareness of citizens on a daily basis and therefore reducing the rate of attack and death.

During this crisis, we are also witnessing the spread of false information and rumors about the new virus and the number of deaths by influencers such as social networks, namely: YouTube, Instagram, Facebook, Tweeter, etc.

In terms of health, the Covid-19 pandemic has shown the world the importance of non-material capital in the field of health, in particular front-line personnel, namely doctors and nurses.

On the other hand, the health crisis has highlighted the role of vaccination and mass screening of the general population in preventing complications from the virus and its spread nationally and internationally.

In addition to vaccination, a new field of treatment called: virotherapy (treatment with the help of the virus) which develops new ways of treating chronic diseases such as cancer. "These viruses replicate in cancer cells but not in healthy cells, so this treatment is not as toxic as conventional cancer therapies," said Teri Shors, professor of biology at the University of Wisconsin Oshkosh.

3. Post-pandemic recommendations

In terms of literature, the various health crises have allowed the emergence or even the flowering of artistic and literary writing which affects the various aspects of human life suffering from the psychological, social and emotional consequences of the spread of deadly viruses and devastating.

Consequently, a so-called "epidemic" or "pandemic" literature opens up new avenues of reflection on the condition of man and his relationship with the social and the temporal. Thus, she allowed the emergence of a social and cultural discourse mentioned in her works. In addition, this type of literature has also allowed the dissemination of medical knowledge and the appearance of new literary genres relating to the medical field.

Economically, the State must strengthen the country's economy by encouraging investments to be resilient in the face of possible crises.

On the social level, it must help people in situations of vulnerability and poverty through the generalization of access to care and universal health coverage.

In terms of communication, the pandemic crisis has demonstrated the importance of new information and communication technologies in raising public awareness, particularly at the critical moment of the crisis. Thus, it emphasizes the need for the total digitalization of the health system in order to be able to face future unpredictable crises.

Therefore, the battle against the health crisis requires experienced and capable communication professionals; "Dealing with crises obviously requires communication skills." (William Dab, 2017)

Thus, in France for example, an action plan has been put in place following the results of studies carried out in this direction, in particular the psychological support of people at a distance with the aim of "mitigating or eliminating the consequences of this crisis. on the moral health of employees, so as to minimize psychosocial risks in the future" (I. Ernault).

In terms of health, health authorities must provide psychological and material motivation for their health personnel, including doctors and nurses, since they have made a remarkable effort during the pandemic.

According to our survey, 56.80% chose the psychological motivation against 52.3% who opted for the material one.

In addition, enhancing the role of telemedicine and occupational medicine would make it possible to mitigate the effects of the pandemic crisis on the health of personnel working in the healthcare world.

In addition, they must encourage scientific research in the field of health and particularly that relating to psychological medicine, surveillance and epidemiological monitoring,

Also, they must provide public and private health structures with medical and nursing health professionals and sufficient infrastructure that is distributed equitably in all regions and provinces in terms of equipment and logistics to be efficient and resilient to any future crisis.

On the other hand, health education must be advocated and generalized from an early age and especially in preschools.

Finally, special emphasis should be placed on medical and nursing executives residing abroad and benefiting from their experiences in the field. That said, the supervisory authorities should fight against the massive migration of Moroccan executives abroad and encourage them to settle in Morocco.

To conclude, the epidemics, in particular that of covid-19, have shown the fragility of several vital systems such as the health system, which needs upgrading and restructuring in order to meet future challenges and consequently reduce their social impacts, psychological and professional on those who work in the world of health because they are the first contacts of such a health crisis.

Conclusion

By way of conclusion, the Coronavirus health crisis is considered one of the most deadly pandemic crises that the world has experienced in recent years. Known for its rapid

contagiousness and high mortality rate, it has brought about a radical change in all corners of economic, social, psychological, family and professional life.

Also, all the States of the world have united and established drastic measures to deal with this crisis by mobilizing all human and material resources to stop the spread of the virus both globally and nationally.

With this in mind, we can confirm the two hypotheses put forward at the beginning of the article since the pandemic crisis has allowed us to draw several lessons and highlight various proposals that can mitigate the effects of the pandemic on the health of personnel working in the health field.

Bibliography

AIT ALI.A and All. (2021), Morocco's strategy against covid-19, Policy Paper, Policy Center For The New South. Rabat, Morocco.

VUIBERT. (2016), The management of health crises. Current economic, political and social themes. Retrieved from: https://www.vuibert.fr/system/files/ressources/fichier/2016/1021/9782711715886-gestion-crise-sanitaire-themes-actu-sanitaire.pdf consulted on 10.11.2022

BELYAGOU, Y., & MELLOUKI, A. (2022). Access to care in Morocco tested by the Coronavirus pandemic at COVID 19: The path to equity. International Journal of Accounting, Finance, Auditing, Management and Economics, 3(2-1), 205-220. https://doi.org/10.5281/zenodo.6385616.

HAFNAOUI.A & RHAZI.Z. (2021), "Actions taken by Morocco in terms of innovation to deal with the health crisis of COVID-19", Revue International du Chercheur, Volume2: Number: 2, pp: 749-765.

High Commission for Planning, 2020, Covid-19 pandemic in the national context, Situation and scenarios, Ahmed LAHLIMI ALAMI, Morocco.

KROPP.P. (2019), Crisis communication and operational actors, Lirec n°56 – March 2019.

LEMSAGED. F. (2022) "Health and social networks: what digital maturity for hospitals. The experience of Morocco", French Review of Economics and Management "Volume 3: Number 6" pp: 468-481.

LAGADEC. P. (1991). Crisis management. Reflection tools for decision-makers, Ed. Science International, Paris.

LIBAERT.T(2015), Crisis communication, 4th edition, Paris, Dunod.

Ministry of Health, The National Plan for Monitoring and Response to Coronavirus 2019-nCoV infection, version January 27, 2020.

Ministry of Health, Covid-19 and SARS-CoV-2 infection, Monitoring and response procedures manual, January 2021 version.

Ministry of Health, National Plan for Preparedness and Response to Infection by the Middle East Respiratory Syndrome Coronavirus (MERS-CoV), Version of 06/16/2015.

Ministry of Social Affairs and Health and Women's Rights, Ministry of Labour, Employment and Vocational Training (2015), Guide to help with prevention: professional exhaustion syndrome or burnout, better understand to act better, DGT, NACT, INRS, éd.N°15-045, France.

NACHOUI. M. (2020), History of the world's epidemics: Lessons and experiences. Ben Msik Faculty of Letters and Human Sciences, Hassan II Casablanca University, Revue Espace Géographique et Société Marocaine, n°40.

FINK.S. (1986), "Crisis Management: Planning for the Inevitable", New York (N.Y.): AMACOM.

webography

http://www.covidmaroc.ma/Pages/Accueilfr.aspx

https://www.maroc.ma/fr/services-electroniques/portail-officiel-du-coronavirus-au-maroc

https://www.sante.gov.ma/Pages/Dossiers.aspx