

## Psycho-Social and Mental Health Associated with the Pandemic

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### ABSTRACT

The pandemic has caused havoc in over 200 countries globally. The containment measures and lockdowns due to the pandemic have induced major changes in the day-to-day lives of individuals across the globe. Psychologists, counsellors and mental health professionals play a very important role to curb the consequences of the Pandemic on various psychosocial and mental health fronts. There is global fear, anxiety and distress associated with the Pandemic. The uncertainty, unpredictability & heightened stress have proliferated the number of psychologically disordered patients. However, the Pandemic being overstretched and of an extremely long period has given rise to increase in stress, anxiety, depression and feelings of uncertainty and panic in a large number of persons across the globe which in turn, has led to a number of Psychosocial and mental health issues. The other factors which impact the mental health include media coverage and environmental factors etc. The media coverage of COVID-19 has contributed to the already heightened anxiety. Further, those who stay alone and having poor support find themselves to be helpless and insecure in the current scenario. Fear of the unknown and uncertainty over daily living, contracting the virus, not having easy access to essential services has heightened the anxiety in the individuals. Social support and the experience of being involved in a social group, where people mutually support each other as well as providing the material and moral support by the family, friends and relatives leads to better mental health in the affected victims. Constructive peer-support, effective online health service and early screening and interventions are necessary to address mental health issues. The holistic approach through social organisations, care-givers, families, media and charities can minimize the negative impact of COVID-19. In view of the current health crisis, meaningful telephone conversation by the healthcare providers can ensure the physical, mental and social health requirements of the affected patients. Online or telephonic cognitive behaviour therapy, supportive sessions can reduce the loneliness, fear of illness, improvement of well-being, and mental health of the affected persons. The psychological impacts of the COVID-19 Pandemic will continue for an indefinite period. Hence, it is all the more important and relevant that psychologists and mental health professionals closely monitor all these areas to provide specialized intervention. Psychologists need to ensure that mental health awareness programmes are integrated with psychological intervention to help not only the infected but also their family and other vulnerable sections of the society.

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The Covid-19 Virus originated in Wuhan (China) (Munster et al, 2020). The pandemic has adversely impacted people in over 200 countries globally, which along with containment measures and lockdowns have induced major changes in the day-to-day lives of individuals across the globe. Psychologists, counsellors and mental health professionals play a very important role to reduce the consequences and adverse impact of the Pandemic on various psychosocial and mental health fronts. Corona Virus infection does not differentiate between geography, ethnicity, religion and gender. Therefore, it is considered as a global problem having various ramifications. There is global fear, anxiety and distress associated with the Pandemic. (COVID-19 Coronavirus pandemic, 2020).

The uncertainty, unpredictability & great stress have proliferated and has led to an increase in the number of psychologically disordered patients (Zandifar and Atefeh, 2020). The asymptomatic as well as the infected persons are going through a very critical phase in their lives due to the pandemic. The growth rate of infection, casualties and recovery is highly uncertain for this pandemic. Various government advisories / guidelines have been issued periodically highlighting the Covid protocols to be followed as well as for the safety and well-being of individuals. (Banerjee, 2020). However, the Pandemic being overstretched and of an extremely long period has given rise to increase in stress, anxiety, depression and feelings of uncertainty and panic in a large number of individuals across the globe. This in turn, has led to a number of Psychosocial and mental health issues. (Kaur and Sharma, 2019). The other factors which impact the mental health include media coverage and environmental factors etc. The media coverage of COVID-19 is contributing to the already heightened anxiety. Further, those living alone and having poor support find themselves to be helpless and insecure in the current scenario.

Anxiety of the unknown and uncertainty over daily living, contracting the virus, non-availability of essential services has heightened the stress in the individuals which has adversely affected the mental health of the affected persons. Many individuals have developed obsessive-compulsive symptoms such as washing hands repeatedly and frequently, washing veggies, fruits, using sanitizers more often and at frequent intervals to ward off COVID-19. The effects of quarantine have induced loneliness, grief, anxiety and chronic stress that can have long-standing psychological effects. Loneliness is a potent risk factor for depression and several cognitive disorders. This has adversely affected the mental health of individuals during the pandemic. For the better safety and effective treatment of the Covid patients, their mental health has to be regularly monitored. During the pandemic period, NIMHANS (National Institute of Mental Health and Neuro-Sciences) at Bengaluru, had hundreds of tele-consultations / counselling with the aggrieved families who were in need of support, counselling and advice.

Although healthcare professionals as well as Police Personnel are meticulously working around the clock for effective safeguards and protection from the catastrophic event yet many related issues need to be addressed. In order to ameliorate the fear, anxiety of the suspected / affected victims, their families and caregivers for the mental health and Psychosocial adaptation and well-being there needs to be a holistic approach by several stakeholders. The hybrid use of Artificial Intelligence, Infrastructural support of Rehabilitation Centers, Social Internet of Things (SIoT), Fog computing, soft computing (Fuzzy logic, Nature-inspired computing and Deep learning) techniques can be of great help so as to assess and assist the affected patients, analyse the consequences and provide the necessary inputs for the help, support, care and well-being of the affected families during the

pandemic. This would ensure lesser instances of serious cases and help in human survival and adaptation during the Pandemic.

Social isolation due to the pandemic is a “serious public health concern” and increases the risks of various mental health concerns (Geret-Emerson and Jayawardhana, 2015). The available data suggests that social disconnectedness puts the older people at a greater risk of feeling low, lonely and anxious (Santini et al., 2020; Kavoor, 2020; Rajkumar, 2020). The (WHO, 2020) has labeled the COVID-19 epidemic as Public Health Emergency of International concern. People’s daily lives have been adversely impacted, which has threatened their physical and mental health and has significantly affected the social & economic development. (Ma et al, 2020). Resilience in individuals is the most potent attribute to enable individuals to bounce back, deal with significant adversities and to quickly recover from the ill-effects caused due to the pandemic (Fletcher and Sarkar, 2013). Various studies have highlighted that psychological resilience can protect individuals against various types of traumas and adversities (Perlman et al., 2017, Hu et al., 2015).

Social support and the experience of being involved in a social group, where people mutually support each other (Cao et al., 2018), as well as providing the material and spiritual support by the family, friends and relatives have shown to increase better mental health in the affected victims (Rothon et al., 2012). Studies have shown that the prevalence of psychiatric symptoms were linked to younger age and less family support (Su et al., 2007). Lack of social support leads to much more mental health setbacks and anxiety especially in working conditions associated with high- risk (Plaisier et al., 2007). Constructive peer-support (Banerjee, 2020), effective online mental health service (Yao et al., 2020) and early screening and interventions (Zandifar and Badrfan, 2020) are necessary to address mental health issues.

### ***Challenges within the Family***

Although the pandemic and the associated lockdowns provided opportunities for families to strengthen family bonds, yet many studies revealed that during this period there was an upsurge of domestic violence cases (Bardbury- Jones and Isham, 2020), lack of personal space in the family and boredom (Wang et al., 2020). The stress associated with the loss of one’s job, insecurity for some and online activities (both office / corporate work / as well as online classes for school children (Primary and Secondary) led to physical inactivity and delay in milestones (Glynn et al., 2016). The pressures of domestic work led to sharing of the same among family members which undoubtedly strengthened family bonds and relationship. It also led to more shared activities in cooking, gardening, board games etc. This also enhanced the skill-sets of many in diverse areas of home management.

### ***Time Management problems***

Many individuals used their leisure more productively in picking up new skill-sets during the lockdowns, in terms of self-care, hobbies and acquiring new skills. On the contrary, many individuals wasted their time and had unhealthy sleeping habits, extended screen time, uncalled for and avoidable daily routines and lack of self-efficacy activities. Not utilizing the time fruitfully and effectively led to over-thinking, ruminating and losing hope. According to WHO, 2020, these unhealthy cognitions could turn into habits which might be carried forward even after the containment of the virus. It is advised by WHO to prepare a timetable for scheduling time for exercise, sleep, online socializing and relaxation.

### *Stigma and Anxiety*

As the virus spread and acquired newer mutations with potent and highly transmissible ones being Delta Plus and Omicron, the anxiety, fear, stigma also proliferated and rose to meteoric proportions. Psychologists are exploring various ways to address these issues so that individuals effectively adapt to these stressful situations. Some effects of long-term lockdown during the pandemic are anxiety, insomnia, fear, irritability (Johan, 2009). Further, misinformation and fake news shared in social media during the pandemic have heightened the anxiety, fear, helplessness and stigma among individuals. The uncertainties, insecurities, loss of hope and initiative also added fuel to the fire caused due to the Pandemic. People who had Covid hesitated to disclose or seek help fearing stigma from the society. (Logie and Turan, 2020). Many individuals with substance-use disorder (SUD) experienced withdrawal symptoms during the lockdowns. (Kar et al., 2020).

Psychologists and mental health professionals need to take adequate steps so that the awareness programmes are integrated with psychological intervention and counseling. This would provide support and help not only to those infected with the virus but also to their family members and other vulnerable sections of the society. The heightened uncertainty and fear of the pandemic have adversely affected the minds of the aged, due to their vulnerability. The fear, loss, grief after losing a loved one has heightened the existential anxiety, feelings of being alone, depression and maladjustment. Further, the information overload has made the pandemic counter-productive especially for those living alone, have increased health-anxiety, somatization, apprehension and fear. Preliminary research has shown increased incidence of depression disorders, complex post-traumatic stress (PTSD) and maladjustments in the older patients (Banerjee, 2020). Furthermore, increased suicides, suicidality risk in the elderly is an added problem. In a recent study done in the elderly, it was seen that psychiatric symptoms have been under-reported (Armitage and Nellums, 2020), which leads to under-detection of symptoms, faulty treatment and increased prevalence of being asymptomatic.

In the Indian context, data of January 2022 showed that in the case of the Omicron variant, 92% patients tested RT-PCR negative within a week, 5% on the eight day, and 3% by the ninth day. It was observed by the Doctors that only patients with co-morbidities, such as diabetes, hypertension or TB took longer to recover from the infection. In a study conducted in Hong Kong, scientists discovered that, the Omicron variant replicated about 70 times higher in the bronchus than the original SARS-COV2 and the Delta variant. However, the Omicron variant makes the virus stay longer in the throat which makes it more transmissible, but because of its capacity to replicate in the lungs is less, it is not as lethal as the Delta variant. The higher transmissibility of the Omicron variant has spurred fresh fear of lockdowns and uncertainties in the population. This has also adversely affected the mental health of the people in society.

### *The Way Forward*

A holistic approach involved in the caring of the affected victims by their kith and kin, caregivers coupled with increased sensitivity to their mental health is the need of the hour. The Knowledge-Attitude-Practice (KAP) gap associated with the mental health-care during the pandemic requires the collective efforts by the stakeholders and policymakers at all levels. A few measures that need to be undertaken in this regard are as under:

1. Care needs to be taken so as to ensure adequate three-pronged precautionary measures as suggested by WHO (social distancing, hand and respiratory hygiene) are followed by all, in letter and spirit.

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2. Social connectedness of the affected persons with their loved ones is essential.
3. Providing adequate emotional support is vital to those living alone. Ensuring their basic needs, safety and dignity will help them to stay free from stress and get over from feelings of loneliness, more so in lockdown situations which is the need of the hour. Various doubts need to be addressed periodically to allay the fear, insecurity and pandemic-related stress. Public-private partnerships can help increasing the access of the affected families to the basic requirements during the pandemic.
4. Tele-facilities for health care consultations are better rather than physical access during the pandemic. This decreases the physical health risks and reduces fear. All elective surgeries are best avoided during the pandemic.
5. Reduction of Digital screen time to prevent misinformation and panic is needed. Unverifiable data and statistics are better avoided as they only compound fear, anxiety and stress.
6. Those in day-care or old-age homes need special care. Preventing overcrowding, encouraging physical activity, enhancing family support and ensuring nutrition are vital for their overall well-being.
7. Self-medication can be dangerous and needs to be avoided at all costs. Professional advice from doctors to avoid any complication is mandatory.
8. Various elderly-friendly helplines exist specific to various countries both for telephonic counseling as well as food or essential deliveries at home. People need to be made aware of the same and seek mental health care, when needed, which should be actively encouraged. The families and caregivers need to be sensitive to the increased needs of those with pre-existing disorders like dementia, depression and other neurological disorders. Suicide prevention using 'gate keeper awareness' approach should be the top priority.
9. Autonomy, respect and dignity needs to be preserved for the geriatric population, especially during the quarantine period.
10. According to the WHO, this is just the starting phase of the crisis. It is expected that in the post- pandemic months, there will be a surge in various mental-health issues, and a significant proportion of them might be the elderly. Preparedness to deal with this is necessary so as to integrate their adjustment and adaptation in the post-pandemic period.

## CONCLUSION

An integrated approach through social organisations, caregivers, doctors, families, media and charities can minimize the negative impact of COVID-19. In the current health crisis, meaningful tele-communication by the healthcare providers, caregivers can also take care of the physical, mental and social health requirements of the affected patients. Online or telephonic cognitive behaviour therapy as well as supportive approach by various stakeholders and significant others can decrease the loneliness, fear of illness and improvement of well-being (Kall et al., 2020). The psychological impacts of the COVID-19 Pandemic will continue for an indefinite period. Hence, it is all the more important and relevant that psychologists and mental health professionals closely monitor all these areas to provide specialized intervention. Psychologists needs to ensure that awareness programmes are integrated with psychological intervention to help not only the infected but also their family and other vulnerable sections of the society.

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