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MENTAL HEALTH AND PSYCHOSOCIAL ASPECTS OF COVID-19 IN INDIA

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Abstract

Covid-19 has caused significant distress around the globe. Apart from the evident physical symptoms in infected cases, it has caused serious damage to public mental health. India, like other countries, implemented a nationwide lockdown to contain and curb the transmission of the virus. The aim of the article is to explore the impact of this unprecedented environment on mental health of individuals and communities in its current magnitude. It will discuss at length some emerging concepts of the causal pathways of mental distress/disorders and suggest strategies to prevent and promote mental health in individuals during this crisis. For the general population at large, the mental health effects of COVID-19 are as important to address as are the physical health effects. Further, in the current study, it is evident that depression was not reported for teachers and employees working in the corporate sector. Perhaps, for these professionals their security and financial stability helps them cognitively counter the adverse effects of the lockdown. On the contrary, for researchers and health professionals, depression was reportedly mild, indicative of the mental health ramifcations due to the rapid spread of the coronavirus. Despite the current situation, stress, anxiety, and depression were found to be in normal ranges for mental health professionals highlighting their capabilities to remain normal in times of distress. Policymakers and other authorities may take the assistance of mental health professionals to help overcome psychological issues related to Covid-19.

Keywords: Mental health, COVID-19, psychosocial stress, lockdown, Depression, Anxiety, Stress

INTRODUCTION

Covid-19, commonly known as the novel Coronavirus is believed to have originated from a wet market in Wuhan, China, and has spread all over the world, resulting in a large number of hospitalizations and deaths (Wang et al. 2020). As of April 18, there were approximately 23, 00,000 cases reported from across the globe. Presently, with no medicine or vaccine available for Covid-19 (Sanders et al. 2020) the situation has turned worrisome. More than a third of the world's population has been put under lockdown with restricted movements to contain the widespread of the virus (Kaplan et al. 2020). People have been strictly advised to maintain social distance, wear a mask, and sanitize their hands frequently India is no different from rest of the world, when it comes to the lockdown For Indians, challenges in the medical sector, further deepens the worries that heighten psychological distress. In times of an epidemic, people tend to experience fear of getting infected with the virus/disease resulting in anxiety, stress, and depression, etc. Stress can be explained as a feeling of emotional and physical tension which arises from any event that threatens our homeostasis. On the other hand, the fear of the unknown is termed as anxiety that is the body's natural response to stress. Depression is

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viewed as a state of disinterest in daily activities. It is surmised that people facing a pandemic with no vaccination would result in fear of the unknown (in this case, the coronavirus) making them anxious, stressed and depressed. Keeping in mind the concerns regarding psychological distress raised around the globe. All large-scale disasters have had significant negative impact on individuals ranging from depression, post-traumatic stress disorder, substance use disorder, behavioural disorders, domestic violence and child abuse. The current COVID-19 pandemic has given rise to similar situations where the population suffers the risk of anxiety and depression, substance use, loneliness and domestic violence; and with schools closed, there is a very real possibility of an epidemic of child abuse. At the present context, the outcome of the COVID-19 pandemic is impossible to predict but we can learn a great deal from the past pandemics in the history to determine our best courses of action, for example, the Spanish flu, the AIDS pandemic and more.

Constantly, most studies reported negative psychological effects including post-traumatic stress symptoms, confusion and anger. Stressors included longer quarantine duration, fears of infection, helplessness, frustration, boredom, inadequate supplies, inadequate information, financial loss and stigma. Some researchers even reported long-lasting psychosocial impacts during such public health emergencies. Such large-scale reporting of mental health sufferings would call for a concentrated mental health policy and programme to minimize psychological and emotional issues during the COVID-19 outbreak.

SITUATIONAL ANALYSIS OF COVID-19

Generally, COVID-19 pandemic continues to take considerable toll not just on healthcare needs, but also on numerous spheres of human life. A large proportion of Indian population have diverse and vulnerable life situations, such as elderly and poor with chronic or acute ailments, migrant laborers and people stranded in locations other than own home, senior citizens, quarantined individuals in their homes or public facility, and families of those suffering or quarantined. Such large number of individuals is vulnerable and may show signs and symptoms of mental distress and emotional problems.

Risks to mental health are an outcome of interaction of varied factors; both proximal and distal. While the proximal factors act directly to cause the disease, the distal causes act indirectly via many intermediary causes. The current situation of COVID-19 is exercising a strain on the individuals and the families who may be directly affected by the virus or hit indirectly due to fear of infection, social isolation, and financial crisis.

In the present situation of nationwide lockdown, continual social media news on COVID-19 are the cause of common over-reactive behavior among the general public. The news channels are replete of incidents and personal accounts of people of healthcare workers, patients, suspects and quarantined families who are facing stigma and discrimination by the communities. There is an upsurge of information on the virus coming from all sources. From morning till evening, we are reminded about the virus through news, mobile notifications, WhatsApp messages, social media updates and what not. The thoughts and fears could be overwhelming and all-consuming.

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MENTAL HEALTH CRISIS AT THE INDIVIDUAL LEVEL

A state of panic: The current state of panic is leading people to experience anxiety and stress, due to an inability to cope. The urge to consult doctors even in case of regular cold and cough, and the hoarding of hand sanitizers and face masks since the declaration of COVID-19 as a pandemic, are examples of this panic. The hoarding has led to a scarcity of hand sanitizers and face masks in the market and prices have risen multiple times, even as experts assure us that regular soap is sucient to maintain personal hygiene. The rush to consult doctors, while legitimate at times, has also been placing an unnecessary burden on the healthcare sector in this situation. People in isolation: People in isolation wards for treatment of COVID-19 face a high chance of a mental health crisis. This is because having to stay in the isolation wards may increase their fear and stress, and cause trauma.

STRESS AMONG THE FRONTLINE HEALTH STAFF

Health professionals including medical and paramedical staff are working 24×7 to provide the best possible services to manage the pandemic. The work pressure, fear of infection, overtime workload, discrimination, lack of family and social interaction, and exhaustion may lead to mental health problems among them. The situation may cause stress, anxiety, depression, insomnia, anger, fear and denial. They are also facing a kind of social isolation due to their job parole. They are being denied houses on rent, and landlords are forcing them to vacate their houses as they are in direct and regular contact with people who have COVID-19. In this outbreak situation, it is imperative to maintain positive mental health of frontline health workers, only then do we have better chances of controlling this pandemic.

MENTAL HEALTH INFRASTRUCTURE AND CHALLENGES AHEAD

In India, 10 per cent of the population has common mental disorders and 1.9 per cent of the population suffers from severe mental disorders. Schizophrenia, bipolar affective disorder (BPAD), depression, anxiety disorders, psychoses, phobia, suicide, mood disorders, neurotic or stress related disorders, posttraumatic stress disorder, marital disharmony, sleep disorders, alcohol dependence and substance misuse and dementia are becoming common problems in the general population.

However, they noted that IEC activities were merely restricted to preparing posters and distributing pamphlets, rather than being population-centric, targeted toward local situation, uniform in coverage, highly visible and continuous over time. Due to lack of awareness, stigma is observed which results in poor utilization of the available services and problems continue to compound and persist. What is required is effective engagement of communities in preventing and promoting mental health of the populations. In context of the present COVID-19 situation where there is likelihood of grave mental health problems in communities, with the given challenges it is going to be an uphill task for the nation.

During lockdown, with the closure of universities and colleges, such physical and social interaction has been restricted resulting in stress. For learning, students and researchers have to utilize online platforms that they may not be used to or competent with. In addition, online learning may be disruptive due to technological issues and thereby, jeopardizing their future careers. Conversely, for health care professionals, many are not working in the manner that they did earlier (because of lockdown and government restrictions on OPDs), and those who are working are fatigued and stressed since they have to work in extremely challenging situations



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and for long hours. Notably, many frontline doctors and health care professionals have been infected with COVID-19.

All these measures in place, but still India is facing a crisis situation as the number of positive cases keep on rising. According to report of Business Today (06 April 2020) due to shortage of PPE equipment and facilities the healthcare professionals are at huge risk across the country, which has been turning into nightmare with the number of medical professionals including doctors and nurses are getting infected while treating the patients. Due to its tremendous infectious ability the disease has instilled a considerable degree of fear, worry and concern in the population at large and among certain groups in particular, such as older adults, care providers and people with underlying health conditions. In public mental health terms, the main psychological impact to date is elevated rates of stress or anxiety. But as new measures and impacts are introduced – especially quarantine and its effects on many people's usual activities, routines or livelihoods – levels of loneliness, depression, harmful alcohol and drug use, and self-harm or suicidal behavior are also expected to rise.

In this crisis situation of lockdown amid Covid-19 pandemic, health and mental health professionals face challenge due to very less information regarding the psychological impact and underlying mental health conditions of general public. There is a looming uncertainty due to outbreak of such unparalleled magnitude affecting individuals across the globe. Researchers are busy exploring the genomic characterization of the virus, identifying the epidemiology and clinical characteristics of infected patients and the challenges faced by healthcare authorities and functionaries. However less focus is being paid towards the impact of Covid-19 on mental health of individuals in India.

Clearly, people who did not have or were unable to get enough supplies of daily essentials were most affected by the lockdown. Even though levels of stress and depression were found to be moderate, severe anxiety issues which could be attributed to the current situation were evident. What is noteworthy however, is that people who were not sure about supplies and those who had enough supplies seem to be affected less. Perhaps, people who were not sure about their supplies were either thinking of shared consequences or relying on their sources for future use

CONCLUSION

Covid-19 pandemic has caused havoc worldwide. India is also going through a challenging situation as the number of infected/positive cases is increasing day by day. With strict preventive measures and restrictions by the Indian Government in the form of nationwide lockdown, the citizens are going through a range of psychological and emotion reactions, fear and uncertainty being one of them. Essentially, Indian mental health professionals are resilient enough to help people in distress. Clearly, the development of a medical protocol for affected sections of society (students and health professionals) is much needed, so as to enable them to remain resilient even during the worst conditions. In fact, it can be alluded that people with good or high socio-economic status may get enough supplies, thus, making them less prone to psychological distress. It is imperative that governments, NGOs and other agencies that are instrumental in distributing and delivering (daily essentials) focus more on people who do not have enough supplies. Lastly, policymakers also need to care for students and health professionals as the main stakeholders in the society. India is struggling with poor mental health care services due to the lack of integrated and comprehensive health care. The existing



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treatment gap is about 83%. However, there are indigenous practices that help to close this gap. The so-called unscented traditional healing practices like folk healing or temple healing are predominant choices among a large population in India due to their cultural ascendancy. People often prefer to consult religious gurus (a so-called baba) rather than consulting psychiatrists. Mental health is a major public health issue as it acts the human resource and productivity of the nation. Hence, necessary steps have to be taken to manage it. Limited availability of mental health services in the country including psychiatrists, clinical psychologists, and psychiatric social workers may not meet these emerging cases. How will we accommodate new and emerging demands for psychosocial support? Especially during the pandemic, online mental health services will be urgently required where people are restricted inside their homes. In addition, people should be encouraged to practice self-care, exercise, and take to other prescriptions, like art or writing as therapy.

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