ISSN: 0975-3583, 0976-2833 VOL 12, ISSUE 03, 2021

THE CONSEQUENCES OF THE CORONAVIRUS (COVID-19) PANDEMIC ON MENTAL WELLBEING

Dr. Devraj Singh Chouhan¹, Ms. Betty Koshy², Ms. Aarohi John Fernandes³

 Associate Professor, Parul Institute of Nursing, Parul University, Vadodara, Gujarat, India
²Assistant Professor, Parul Institute of Nursing, Parul University, Vadodara, Gujarat, India
³Assistant Professor, Parul Institute of Nursing, Parul University, Vadodara, Gujarat, India Correspondence Email: devraj.chouhan19338@paruluniversity.ac.in ORCID - https://orcid.org/0000-0002-0720-7587

Abstract-

The general public is familiar with the physical manifestations of SARS-CoV-2 infection and takes the required precautions to minimize coronavirus exposure and manage COVID-19 symptoms if they develop. The pandemic's effects on mental health, on the other hand, has not been properly explored and grasped. The specific study attempts to accentuate on the epidemiology, clinical characteristics, transmission patterns, and management of the COVID-19 virus. There has been limited number of studies focusing on resultant mental health due to the impact of the virus. Currently, the situation necessitates public knowledge, which can aid in crisis response. This study intends to highlight the very aspect of people's mental health which has evidently been affected. Along with highlighting the narrative review of prior research on mental health symptoms and treatment associated with COVID-19, this study consolidates existing data on the COVID-19 outbreak and its repercussions on mental health.

Keywords-SARS-CoV-2 Epidemiology, Clinical Symptoms, and Transmission Patterns.

1. Introduction

A pandemic is more than just a medical event; it has an impact on people and society, producing disruption, anxiety, stress, stigma, and xenophobia. Individual behavior as a unit of society or a community has a considerable impact on the dynamics of a pandemic, including intensity, degree of flow, and aftereffects. Regional lockdowns were established to prevent the disease from spreading further due to the rapid human-to-human transmission of SARS-CoV-2. Isolation, social isolation, and the closure of educational institutions, jobs, and entertainment venues compelled people to stay at home in order to assist in breaking the transmission chain.

As more people are forced to remain at home in self-isolation to prevent the infection from spreading further in society, governments must take the necessary steps to provide mental health care as indicated by doctors. In his editorial, Professor Tiago Correia emphasized how health systems around the world are assembling only to confront the COVID-19 outbreak, which can have a substantial impact on the treatment of other diseases, including mental health, which frequently deteriorates during pandemics. 4 The psychological condition of an individual that contributes to community health varies from person to person and is impacted by his history, professional and social positions. Self-isolation and quarantine are both likely to be detrimental to one's mental health. Separation from loved ones, loss of independence, boredom, and uncertainty can all lead to a worsening in an individual's mental health, according to a study published in The Lancet. To solve this, both individual and societal measures are required. As a result of the current world situation, both children and adults are experiencing a wide spectrum of emotions. They could be placed in a new setting or situation that is potentially hazardous to their health.

Fear, worry, and anxiety are instilled among the general population and groups like the elderly, caregivers, and those with health difficulties in the wake of the coronavirus epidemic. Until date, the public mental health consequence has been increased stress or worry. Current or rising mental health issues and the mental health and well-being of frontline workers are issues in already affected populations, such as Lombardy in Italy. World Health Organization (WHO) cooperated with partners to create a collection of new resources on COVID-19's mental health and psychosocial support aspects as part of its public health response.

2. Literature addressing the general population's mental health impact of COVID-19

Several studies, including commentary and correspondence, evaluated the possible mental health outcomes of COVID-19 based on sickness outbreak literature or theoretical models. Because of China, Canada, Iran, Japan, India, Singapore, and Brazil, this essay collection was more geographically diverse.

ISSN: 0975-3583, 0976-2833 VOL 12, ISSUE 03, 2021

Two of these studies looked into the potential effects of the COVID-19 pandemic on specific countries. One of them, from Iran, emphasized the importance of stress and mental morbidity in uncertainty, ambiguity, disease severity, disinformation, and social isolation. To mitigate the outbreak's negative psychological effects, the authors emphasized the importance of mental health care, particularly for vulnerable individuals, as well as social capital building. By focusing on the economic effects of COVID-19 and eliciting anxiety in the general population, Shigemura et al. (2020) argue that high levels of fear and panic are more likely, as are resource hoarding and stockpiling. COVID is an acronym for COVID. This study identified 19 patients and their families, people with pre-existing medical or psychological issues, and healthcare personnel as additional risk groups for poor mental health outcomes.

3. Literature regarding COVID-19's mental health effects on healthcare professionals Healthcare practitioners, are subjected to significant risk of mental health outcomes during the COVID-19 outbreak. Long working hours, the risk of disease, and a lack of safety equipment, loneliness, physical exhaustion, and family isolation are all factors (Kang et al., 2020).

With the exception of observational research, three studies have addressed this issue, all from Chinese institutes. One of them clearly demonstrates the misalignment between planned services at a certain hospital and real healthcare personnel demands (Chen et al., 2020). This center addressed its employees' mental health in three ways: it formed an intervention team to offer online resources, it established a psychological aid hotline, and it arranged group stress-reduction exercises. Healthcare workers, on the other hand, were opposed to participation in this system. Following direct worker involvement, the program was expanded to include a rest area, basic physical needs such as food, COVID-19 patient care training, protective measures information, recreational activities, and counselor visits to the rest area as needed. This boosted worker satisfaction by emphasizing the importance of constant input and program modification if they are unacceptably restrictive to the workforce. Liu et al. (2020b) proposed that mental health professionals collaborate closely with those working in critical care units to reduce stress levels and the risk of depression, whereas Kang et al. (2020) emphasized the positive impact of telephone helplines for healthcare workers to specifically address mental health problems. At the moment, there is no information on foreign healthcare workers.

4. Pandemics can generate social and individual disruptions; the impact on vulnerable people can be exacerbated

• Anxiety and Stress Conditions

Global climate change, greater travel, and international exchange have aided the spread of infectious pandemics and species across countries and continents. COVID-19, an infection caused by a novel coronavirus discovered in December 2019, is currently infecting over 27 nations, causing substantial concern and anxiety among individuals who are exposed to the virus's (actual or perceived) threat. Importantly, all infections, including the flu and other agents, have the same challenges, and the same universal protocols are necessary and recommended for safety and preventing future transmission. However, media attention has raised COVID-19 to the status of a distinct hazard rather than a component of a bigger threat, heightening fear, stress, and the possibility of panic. Chronic disease, particularly chronic infectious diseases like tuberculosis and HIV, is linked to a higher prevalence of mental health disorders than the general population. According to research, depression rates typically rise in the aftermath of diseases. While the coronavirus's effects on mental health have not been properly researched, recent public reactions indicate that COVID-19 will have far-reaching consequences. Psychiatrists are especially suited to assist patients, families, and society in dealing with this contemporary threat by educating both their patients and the general public about the virus's potential implications.

• Stigma, medical skepticism, and conspiracy theories

Epidemics result in stigmatization of affected individuals, government officials, and health care providers; unfortunately, this trend has been found across a broad spectrum of countries and infectious agents. The process unfolds due to inadequate knowledge, fast and unidimensional judgments, and a defensive formulaic response, as with most stigma-laden exchanges. All health care providers, particularly psychiatrists, must serve as a voice of reason and aid in the distribution of accurate, evidence-based information. A lack of trust in medical treatments and discoveries is referred to as "medical mistrust." It leads to inefficient use of medical resources and ineffective health-care administration. Furthermore, physician mistrust has been used to explain some of the disparities in health care between races and ethnic groups. Although a very different disease, the impact of Covid-19 on mental health has similarly been linked with other diseases like cancer, autism, and HIV.

ISSN: 0975-3583, 0976-2833 VOL 12, ISSUE 03, 2021

Medical skepticism has been connected to conspiracy ideas during infectious pandemics. In the United States, a survey discovered that up to half of respondents believed in at least one health-related conspiracy theory. When pursued to its logical conclusion, medical skepticism can result in movements such as antivaccine organizations, which have been linked to measles epidemics.

Distrust in medical institutions can lead to stigma and perceived prejudice, which leads to poor adherence to health-related recommendations. According to the COVID-19, medical practitioners must advise in a scientific, fact-based, and impartial manner, highlighting the significance of comprehensive infection control methods....

5. Anxiety and obsessive-compulsive disorders are two examples of mental illnesses

- The covid19's impact on mental health can very well be anticipated in terms of deep rooted fear and anxiety it can potentially implicate amongst the people... Concerns are heightened by the lack of a definitive coronavirus treatment. These anxiety symptoms do not always meet the DSM-5 diagnostic criteria; yet, individuals will benefit from reassurance and education.
- Contamination obsessions, or unwelcome, intrusive thoughts that one is dirty and needs to be washed, cleaned, or sterilized, are extremely frequent in OCD patients. Perceptual experiences, understandably, amplify obsessions Sensory have been reported in up to 75% of OCD patients. Biased information processing has been connected to OCD patients' overestimation of threat. This may make patients more vulnerable to the terror associated with pandemic dangers, further upsetting them and impairing their ability to function.
- Excessive use of hazardous cleaning materials might result in inhalational injury as well as contact and atopic dermatitis. Fear of contracting a new, sensationalized illness may enhance undesirable behavior. People with OCD are easily paranoid by this hazardous situation.

Psychotic disorders: the pinnacle of medical skepticism?

Individuals suffering from psychotic illness are the most prominent manifestations of medical conspiracy ideas, according to anecdotal evidence. Delusions are frequently produced by repeated media exposure to a distressing fact, as well as distrust of institutions and government, as well as clinical symptom misattribution. Discussions in the mainstream media regarding infectious epidemic conspiracy theories such as HIV and Ebola give fuel to the flames. Therefore, lack of acknowledgement and understanding of endemics and its reorecussions on the surrounding can have adverse effects on the population. Adequate redressal mechanism channeling informed behavior of the people needs to be established.

Delusional parasitosis develops when psychosis and obsessive behavior meet. Additionally, this condition is referred regarded as "monosymptomatic hypochondrial psychosis", "Ekbom syndrome", and "delusory infestation". In essence, the patient believes he is afflicted with an infection caused by a virus that is impervious to discovery and treatment, hence causing him to suffer endlessly. In 1636, Sir Thomas Browne coined the phrase "Morgellons illness" to characterize this condition. The prevalence of delusional infestation in multiple family members is a concerning clinical feature (e.g., folie a deux).

There has been no study on the development of delusional infestations in the context of pandemics. However the prevalence of ignorance and infatuated opinions have consolidated DP in context of the pandemic. Thus, the medical authorities are burdened with the responsibility to propagate adequate diagnosis, treatment and awareness about the disease amongst the masses.

5. People With Disabilities And Elders Are At Risk

Many have succumbed to the threating disease of Covid-19, however the magnitude of elderly or people of above 65 falling victim to the disease is gravely overwhelming. Due to weak immunity, the elderly are seemingly susceptible to the symptoms of COVID-19 pandemic. Apart from the alleviated physical challenges, it is even more challenging for the elderly to get mentally accustomed social and clinical isolation. Having to stay isolated from the family and social surroundings adversely affects their mental stability. WHO advises the elderly people be well protected and looked after by the younger members of the family. Although it is difficult to ensure the support from cloxe proximity, it is imperative that the elderly are assured a sense of security and contact with family (even through virtual platform). This may help exacerbate anxiety, concern, and depression in elderly people who already have mental health concerns. Some of the symptoms that needs to look out for or are indication of degrading mental health may include the following:

- Irritatation in behaviour;
- Sleep and eating routines changes; and
- Emotional outbursts.

ISSN: 0975-3583, 0976-2833 VOL 12, ISSUE 03, 2021

Family members need to be vigilant and reactive of these changing behaviour in a sensitive manner.

• Healthcare Employees At Risk

Medical workers like doctors, nurses, and paramedics may be among those most affected. Practical difficulties they may encounter in their work include their fear of contracting a disease, the lengthy "working hours, a lack of protective gear and supplies, a high patient load, a lack of effective COVID-19 medication, the death of a colleague after exposure to COVID-19, social distancing and isolation from family and friends, and the dire situation of their patients may all have a negative impact on their mental health." The spread of the pandemic may result in a steady decline in the output of health staff. Employees in the healthcare profession should take brief breaks between shifts to maintain a calm and relaxed demeanor.

6Conclusion

People all around the country are feeling the effects of the current COVID-19 outbreak. Notably, individuals with the disorder will be vulnerable to suffering from anxiety and mental health issues as well as experiencing mental troubles that aren't particular to them. In cases where mental distress is suspected, a low index of suspicion might be advantageous, allowing earlier detection and treatment, resulting in less suffering for the patient. Although very limitedly studied so far, the impact of COVID on mental health cannot be underestimated, and adequate awareness needs to be generated to mitigate the problem before more people succumb to its dreadful impact. The growing numbers of patients affected by this pandemic is likely to present both a challenge and an opportunity for the psychiatric profession, especially in Asian countries. One significant challenge the profession faces is to confront the various obstacles and limitations that were mentioned in the prior literature. However, the other side of the coin is that, because of this pandemic, several possibilities and options are now possible that weren't previously feasible. According to research conducted by the COVID19 study, individuals who are enduring long-term mental health issues may take weeks or months to reveal their full extent, and addressing this impact requires a collaborative effort that includes the health care system as a whole (Maunder, 2009). More research, particularly pilot and early-stage research, is needed to determine the impact of COVID on mental health especially in countries with less developed infrastructure ("Duan and Zhu, 2020"). To be specific, there is a great deal of demand for culturally sensitive, time-limited mental health interventions to be designed, particularly for healthcare providers and volunteers. When such remedies are created, they should be rigorously examined in order that helpful knowledge regarding effective therapy techniques can be distributed to as many individuals working in this field as possible.

References

- 1) van den Heuvel L, Chishinga N, Kinyanda E, et al. Frequency and correlates of anxiety and mood disorders among TB- and HIV-infected Zambians. AIDS Care. 2013;25:1527-1535.
- Kuan V, Denaxas S, Gonzalez-Izquierdo A, et al. A chronological map of 308 physical and mental health conditions from 4 million individuals in the English National Health Service. Lancet Digital Health. 2019;1:e63-e77.
- 3) Gale SD, Berrett AN, Erickson LD, et al. Association between virus exposure and depression in US adults. Psychiatry Res. 2018;261:73-79.
- 4) Mason BW, Lyons RA. Acute psychological effects of suspected bioterrorism. J Epidemiol Comm Health. 2003;57:353-354.
- 5) Shigemura J, Ursano RJ, Morganstein JC, et al. Public responses to the novel 2019 coronavirus (2019-nCoV) in Japan: mental health consequences and target populations. Psychiatry Clin Neurosci. February 2020; Epub ahead of print.
- 6) Jaiswal J, Halkitis PN. Towards a more inclusive and dynamic understanding of medical mistrust informed by science. Behav Med. 2019;45:79-85.
- 7) Oliver JE, Wood T. Medical conspiracy theories and health behaviors in the United States. JAMA Intern Med. 2014;174:817-818.
- 8) Gaillat J. Vaccine hesitancy: how to lift the brake? [in French]. Rev Malad Respir. 2019;36:962-970.
- 9) Moritz S, Purdon C, Jelinek L, et al. If it is absurd, then why do you do it? The richer the obsessional experience, the more compelling the compulsion. Clin Psychol Psychother. 2018;25:210-216.
- 10) Ferrao YA, Shavitt RG, Prado H, et al. Sensory phenomena associated with repetitive behaviors in obsessive-compulsive disorder: an exploratory study of 1001 patients. Psychiatry Res. 2012;197(3):253-258.

ISSN: 0975-3583, 0976-2833 VOL 12, ISSUE 03, 2021

- Exner C, Zetsche U, Lincoln TM, Rief W. Imminent danger? Probabilistic classification learning of threat-related information in obsessive-compulsive disorder. Behav Ther. 2014;45(2):157-167.
- 12) Gupta MA, Gupta AK. Self-induced dermatoses: A great imitator. Clin Dermatol. 2019;37(3):268-277.
- 13) Gieler U, Consoli SG, Tomas-Aragones L, et al. Self-inflicted lesions in dermatology: terminology and classification--a position paper from the European Society for Dermatology and Psychiatry (ESDaP). Acta Derm Venereol. 2013;93(1):4-12.
- 14) Kamara S, Walder A, Duncan J, et al. Mental health care during the Ebola virus disease outbreak in Sierra Leone. Bull WHO. 2017;95:842-847.
- 15) Heller J. Rumors and realities:m sense of HIV/AIDS conspiracy narratives and contemporary legends. Am J Pub Health. 2015;105:e43-e50.
- 16) Jeppsson A. How East Germany fabricated the myth of HIV being man-made. J Int Assoc Provid AIDS Care. 2017;16:519-522.
- 17) Kellett C. Sir Thomas Browne and the disease called the Morgellons. Ann Med Hist. 1935;7:467-479.
- 18) Maunder, R.G., 2009. Was SARS a mental health catastrophe? Gen. Hosp. Psychiatry 31
- 19) (2009), 316–317.
- 20) Duan, L., Zhu, G., 2020. Psychological interventions for people affected by the COVID-19
- 21) epidemic. Lancet Psychiatry 7 (4), 300–302.
- 22) Kang, L., Li, Y., Hu, S., 2020. The mental health of medical workers in Wuhan, China dealing with the 2019 novel coronavirus. Lancet Psychiatry 7 (3), e14.
- 23) Liu, Y., Li, J., Feng, Y., 2020b. Critical care response to a hospital outbreak of the 2019- nCoV infection in Shenzhen. China. Crit. Care 24 (1), 56. Maunder, R.G., 2009. Was SARS a mental health catastrophe? Gen. Hosp. Psychiatry 31 (2009), 316–317.
- 24) Yao, H., Chen, J.H., Xu, Y.F., 2020b. Rethinking online mental health services in China during the COVID-19 epidemic. Asian J. Psychiatr. 51, 102015 [Epub ahead of print].
- 25) Shigemura, J., Ursano, R.J., Morganstein, J.C., Kurosawa, M., Benedek, D.M., 2020. Public responses to the novel 2019 coronavirus (2019 nCoV): mental health consequences and target populations. Psychiatry Clin. Neurosci.(February). https://doi.org/10.1111/pcn.12988. [Epub ahead of print]
- 26) Dowben JS, Kowalski PC, Keltner NL. Formication, tactile hallucinations, delusional parasitosis, and Morgellons: Enough to make your skin crawl. Perspect Psychiatr Care. 2017;53(4):220-221.
- 27) Moukaddam N, Shah A. Psychiatrists beware! The impact of COVID-19 and pandemics on mental health. Psychiatric Times. 2020. https://www.psychiatrictimes.com/psychiatrists-beware-impact-coronavirus-pandemics-mental-health. Accessed May 29, 2020.
- 28) Javed B, Sarwer A, Soto EB, Mashwani Z-R. Is Pakistan's response to coronavirus (SARS-CoV-2) adequate to prevent an outbreak? Front Med. 2020;7:1-4. https://doi.org/10.3389/fmed.2020.00158. Accessed May 29, 2020.
- 29) WHO warning on lockdown mental health. Euobserver. 2020. https://euobserver.com/coronavirus/147903. Accessed May 03, 2020. 4. Correia T. SARS-CoV-2 pandemics: the lack of critical reflection addressing short- and long-term challenges. Int J Health Plann Manage. 2020;35:1-4. https://doi.org/10.1002/hpm.2977. Accessed May 30, 2021.
- 30) Mental health and coping during COVID-19. Centers for Disease Control and Prevention. 2020. https://www.cdc.gov/ coronavirus/2019-ncov/about/coping.html. Accessed May 30, 2020.