

PSYCHOLOGICAL DISTRESS DUE TO COVID -19

Pushpa Rani*

Assistant Professor, Department of Community Health Nursing, University College of Nursing, Baba Farid University of Health Sciences, Faridkot, Punjab.

Received date: 29 September 2021

Revised date: 20 October 2021

Accepted date: 10 November 2021

*Corresponding Author: Pushpa Rani

Assistant Professor, Department of Community Health Nursing, University College of Nursing, Baba Farid University of Health Sciences, Faridkot, Punjab.

ABSTRACT

Corona virus infection is highly contagious diseases and transmitted transmission of COVID 19 viruses are from person-to-person and similar to seasonal influenza and may cause the same symptoms. The psychological impact of COVID-19 pandemic was prevalent among people. Depression and anxiety was more common among general population and healthcare workers. The recent Covid-19 pandemic has had significant psychological and social effects on the population. Research has highlighted the impact on psychological well-being of the most exposed groups, including children, college students, and health workers, who are more likely to develop post-traumatic stress disorder, anxiety, depression, and other symptoms of distress. People have huge impact of the pandemic on their mental health and it also affects the physical health. For better dealing with these psychosocial issues of different strata of the society, psychosocial crisis prevention and intervention models should be urgently developed by the government, health care personnel and other stakeholders.

KEYWORDS: Pandemic, Psychological, Distress, Population, COVID -19.

INTRODUCTION

The World Health Organization (WHO) used the term novel corona virus 2019 for the virus that affects lower respiratory tract of patients with pneumonia. Corona virus infection is highly contagious diseases and transmitted transmission of COVID 19 viruses are from person-to-person and similar to seasonal influenza and may cause the same symptoms. The incubation period of COVID-19 is approximately 2-14 days. Bats are considered as natural hosts of these viruses yet several other species of animals are also known to be a source such as camels and civet cats.^[1-2] There is no vaccine and no specific treatment for this virus so far and because it is a new virus, nobody has prior immunity which in theory means that the entire human population is potentially susceptible to COVID-19 infection. There is not enough epidemiological at this time to determine how easily and sustainably this virus spreads between people, but it is currently estimated that, on average, one infected person will infect many persons.^[3] Depression is now the leading cause of disability worldwide, and globally more than 300 million people of all ages suffer from depression. Depression, despite its major health consequences, frequently goes unnoticed among university students, since their lives are often filled with

symptoms normally associated with depression (e.g., loss of sleep, low energy, anxiety, and sadness).^[4] The covid-19 pandemic has heavily burdened, and in many cases overwhelmed, healthcare systems including healthcare workers. The WHO has emphasized the extremely high burden on healthcare workers, and called for action to address the immediate needs and measures needed to save lives and prevent a serious impact on physical and mental health of healthcare workers.^[5-6] The previous viral outbreaks have shown that frontline and non-frontline healthcare workers are at increased risk of infection and other adverse physical health outcomes.^[7] Depression, anxiety and stress among Indian population during the lockdown were prevalent. Along with other measures to contain the spread of COVID-19, mental health of citizens needs the urgent attention of the Indian government and mental health experts. Further large-scale studies should be conducted on different professions and communities such as health care professionals and migrant workers and incorporate other mental health indicators.^[8] The recent Covid-19 pandemic has had significant psychological and social effects on the population. Research has highlighted the impact on psychological well-being of the most exposed groups, including children, college students, and health

workers, who are more likely to develop post-traumatic stress disorder, anxiety, depression, and other symptoms of distress. The social distance and the security measures have affected the relationship among people and their perception of empathy toward others.^[9] A study was conducted by Rehman U et. al among 403 participants. The mean age of the participants was 28.95. For males, the mean values of stress, anxiety and depression were found to be 12.65, 9.91 and 10.81 respectively, with standard deviations of 9.26, 8.78 and 9.99. For females, with 9.72, 8.77 and 9.76 as their respective standard deviations, the mean values for stress, anxiety, and depression were found to be 13.44, 10.57 and 10.96. The mean values were found to be higher for females than for males. The study results suggested that because of their greater psychological distress, students and health professionals require special care.^[10]

Whereas, Kumar K et al executed a cross-sectional analysis in North India, in the Chandigarh Territory of the Union among the employees of migrants listed by the Government of India who lived in shelter houses or approved government buildings were recruited. During the 5th week of lockdown, the data collection was conducted with respect to social distance criteria and

other steps of infection control. Around three fourths of the participants 73.5% were found to be PHQ-2 depression-positive screen and about half of the participants 50% were found to be GAD-2 anxiety-positive screen. The mean score on the PSS was 7.1 on the PSS-4.^[11] Another study confirmed the high prevalence of distress experienced by Indians at the time of COVID-19 and provides pragmatic implications for psychological health at macro and micro levels during an epidemiological crisis.^[12] A meta-analysis was conducted by Liu, X. et al assessed the prevalence of each mental problem differed depending on the measurement tools used. The study revealed that the prevalence of mental problems during the COVID-19 pandemic by using a fairly large-scale sample and further clarified that the heterogeneous results for these mental health problems may be due to the non-standardized use of psychometric tools.^[13] Moreover the COVID-19 pandemic was associated with mild psychological impact while it also encouraged some positive impact on family support and mental health awareness among adults in the MENA region. Clinical interventions targeted towards vulnerable groups such as females and younger adults are needed.^[14]

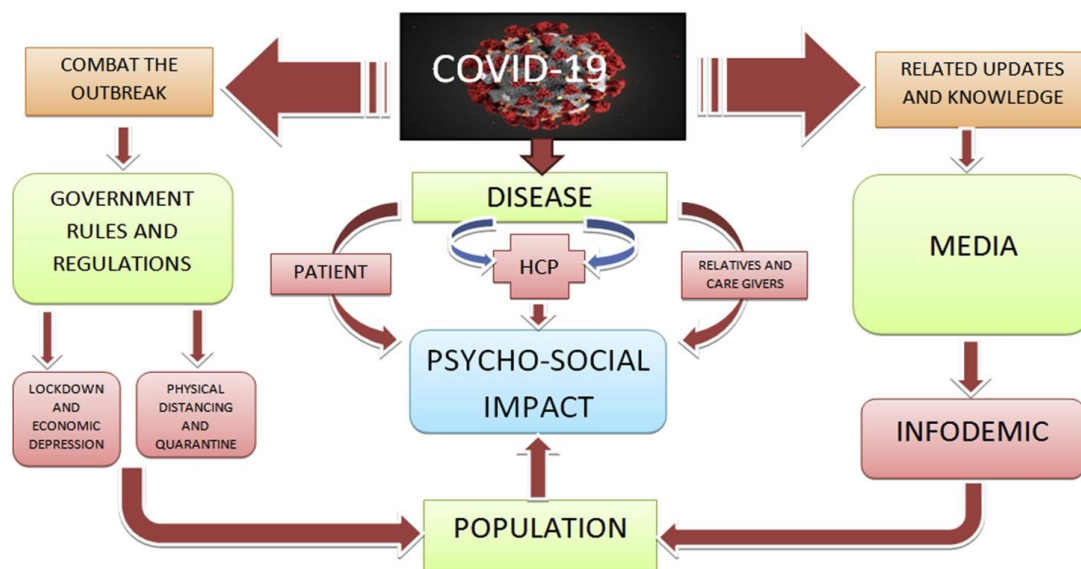


Figure 1: Psychosocial impact of COVID-19.^[15]

DISCUSSION

The psychological impact of COVID-19 pandemic was prevalent among people. Depression and anxiety was more common among general population and healthcare workers. Various tools were used by researchers to assess the mental health problems among people. For better dealing with these psychosocial issues of different strata of the society, psychosocial crisis prevention and intervention models should be urgently developed by the government, health care personnel and other stakeholders. Apt application of internet services, technology and social media to curb both pandemic and infodemic needs to be instigated. Psychosocial

preparedness by setting up mental organizations specific for future pandemics is certainly necessary.^[15] People have huge impact of the pandemic on their mental health and it also affects the physical health. It is necessary to maintain the physical and mental health of the population.

CONCLUSION

There is a need of setting up mental health organizations specific for future pandemics with branches in many nations and in individual healthcare institutions for research, mental healthcare delivery and arranging awareness program at both personal and community

levels is desperately needed. Structured websites and toll free helpline numbers may be launched for alleviating psychological distress among the general public regarding this ongoing pandemic. Social media is to be used in good sense, to educate people on transmission dynamics, symptoms of disease, and time when exact medical consultations are needed.

ACKNOWLEDGEMENT: Nil.

Funding: Nil.

REFERENCES

1. Pareek S, Kaushik NK, Verma D, Pareek A, Ramawat Y, Kumawat N, et al. Assessment of knowledge and practices of urban population regarding COVID-19: a cross-sectional study in Bikaner, Rajasthan. *Int J Comm Med Public Health*, 2020; 7: 3095-9.
2. Kaur H, Kaur S, Pushpa, Pareek S. Awareness Assessment regarding COVID-19 among Population - A Cross-Sectional Online Study. *Int J Nurs Midwif Res.*, 2020; 7(2): 16-20.
3. Sunil Kumar Poonia, Megha Sharma, Mohammad Toseef, Shatrughan Pareek. Nurses self reported behavior and barriers to infection control practices following COVID – 19 pandemic. *Int J Multidisciplinary Edu Res.*, 2020; 12(5): 5-13.
4. Sawhney M, Kunen S, Gupta A. Depressive Symptoms and Coping Strategies Among Indian University Students. *Psychological Reports*, 2020; 123(2): 266-280.
5. Armocida B., Formenti B., Ussai S. The Italian health system and the COVID-19 challenge. *Lancet Public Health*, 2020; 5(5). doi: 10.1016/s2468-2667(20)30074-8.
6. Xie J., Tong Z., Guan X. Critical care crisis and some recommendations during the COVID-19 epidemic in China. *Intensive Care Med.*, 2020; 46(5): 837–840. doi: 10.1007/s00134-020-05979-7.
7. Rajkumar RP. COVID-19 and mental health: A review of the existing literature. *Asian J Psychiatry*, 2020; 52: 102066. <https://doi.org/10.1016/j.ajp.2020.102066>
8. Verma S, Mishra A. Depression, anxiety, and stress and socio-demographic correlates among general Indian public during COVID-19. *Int J Social Psychiatry*, 2020; 66(8): 756-762.
9. Saladino V, Algeri D and Auriemma V. The Psychological and Social Impact of Covid-19: New Perspectives of Well-Being. *Front. Psychol*, 2020; 11: 577684. doi: 10.3389/fpsyg.2020.577684
10. Rehman U, Shahnawaz MG, Khan NH, Kharshiing KD, Khursheed M, Gupta K, Kashyap D, Uniyal R. Depression, Anxiety and Stress Among Indians in Times of Covid-19 Lockdown. *Community Ment Health J.*, 2021; 57(1): 42-48.
11. Kumar, K., Mehra, A., Sahoo, S., Nehra, R., & Grover, S. The psychological impact of COVID-19 pandemic and lockdown on the migrant workers: A cross-sectional survey. *Asian J Psychiatry*, 2020; 53: 102252. Advance online publication. <https://doi.org/10.1016/j.ajp.2020.102252>
12. Anand V, Verma L, Aggarwal A, Nanjundappa P, Rai H. COVID-19 and psychological distress: Lessons for India. *PLoS ONE*, 2021; 16(8): e0255683.
13. Liu, X., Zhu, M., Zhang, R. et al. Public mental health problems during COVID-19 pandemic: a large-scale meta-analysis of the evidence. *Transl Psychiatry*, 2021; 11: 384.
14. Al Dhaheer AS, Bataineh MF, Mohamad MN, Ajab A, Al Marzouqi A, Jarrar AH, et al. Impact of COVID-19 on mental health and quality of life: Is there any effect? A cross-sectional study of the MENA region. *PLoS ONE*, 2021; 16(3): e0249107. <https://doi.org/10.1371/journal.pone.0249107>
15. Dubey S, Biswas P, Ghosh R, Chatterjee S, Dubey MJ, Chatterjee S, et al. Psychosocial impact of COVID-19. *Diab Metabolic Syndrome: Clin Res Reviews*, 2020; 14(5): 779-788.