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THE PSYCHOLOGICAL EFFECT OF COVID-19

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Abstract: The aim of this research is to emphasize on how COVID-19 psychologically affected people all around the world. COVID-19 completely turned down the lives of people with its adverse effects. It drained people physically as well as mentally. The fear of becoming infectious and the lockdown measures have significantly changed people's daily routine. In the first year of the COVID-19 pandemic, global prevalence of anxiety and depression increased by a massive 25%. One major explanation for the increase is the unprecedented stress caused by the social isolation resulting from the pandemic. From loneliness to fear of infection, from suffering and deaths to the financial worries, we conclude that indeed COVID-19 had affected people psychologically across the world.

Keywords-Pandemic, prevalence, anxiety, infection, loneliness, stress.

I. INTRODUCTION

The COVID-19 pandemic has led to a complete pause over the lives of the people of the entire world. 2020 will always be a remarkable year in the world history due to the terrifying outburst of Corona virus. The novel virus was first reported in Wuhan, China, in December 2019. In a short time period of time, the COVID-19 pandemic has turned into a global emergency. As of 29th of July 2022, the pandemic had caused more than 574 million cases and 6.39 million confirmed deaths, making it one of the deadliest in history[1]. To tackle the rapid rise of cases in the world and to curb the community spread, "lockdown" was declared. All of a sudden there were travel restrictions, business restrictions, closures, workplace hazard controls, quarantines etc., which effected people's life to a great extent. The mode of education also got changed from offline to online. While lockdown can be an effective way to slowdown the rapid spread of the virus, at the same time it can have some degree of psychological impact on the people too. As we all know that quarantine was imposed to everyone in order to avoid COVID-19 virus to get effected, where people are restricted to get socialize, to have free movements which is making a person angry, depressive, frustrated and many more psychological disturbances were noticed among the people. Man being a social animal, such restrictions on free movements can lead to significant mental health problems ranging from anxiety, fear, sense of loneliness, sleep disturbances, etc. Moreover, there was a

fear among the people related to the scarcity of basic needs of day-to-day life like groceries, milk supplies and medicines. Elderly people who were previously taken care by other housemates were staying alone, everyone was making distance with each other in families in order to avoid getting effected. Effected families were also taking heavy measures to get cured by locking themselves within the floor walls of a room, no one was allowed to go out and have a normal life, this restriction of free movements, having a prevailing sense of being imprisoned in one's own house or "being in domiciliary arrest [2].

Being in isolation people cannot share their sorrows, happiness and many more with each other which making them suppress their feelings deep down into them only, which is resulting in depression, frustration and loneliness which is comparatively also harmful for a person's health. People often think that mental health should not steal much attention as it is not that important, it can get cured with time but in my opinion, it is not curable with time. If a person is into depression, he/she needs to be listened, needs to get embraced by whole heart, needs to be understood, these are the only medicines for a depressive person. But do you know, astonishingly, in this world finding a listener is getting more expensive than medicines. The lockdown had different consequences on different age groups. It was difficult to engage the children at home throughout the day. This was a reason of stress to parents as well as to children. Due to the vulnerability of elderly people for COVID-19 infections, others would avoid to meet the elderly, which were the major source of distress, both for the elderly and their family members. As per reports government's sudden prosecution of lockdown had created many hurdles to the economically weaker sections of our society. Many daily wage workers, migrant workers had lost their jobs and were penniless during that time, they were much worried about their families dying of starvation instead of getting infectious to COVID-19[3].

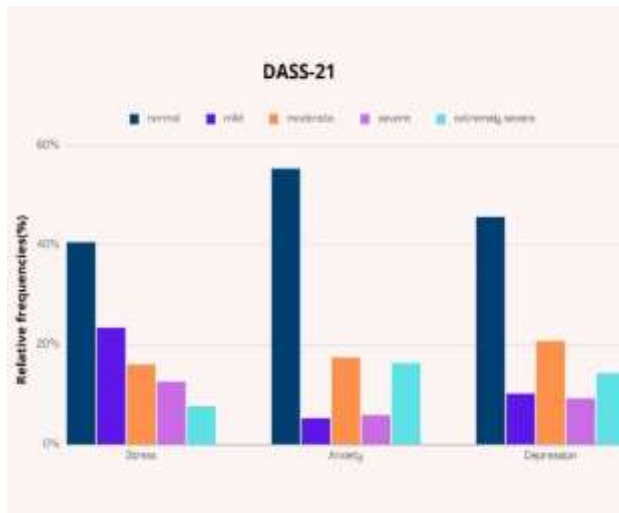


Fig. 1. The average time (hours per week

Considering the DASS 21 anxiety subscale in this figure, 892 subjects (55, 3%) obtain scores within the normal range, 84 (5, 2%) seem to report mild anxiety, 280 (17, 4%) suffer from moderate anxiety, 94 (5, 8%) severe anxiety, 262 (16, 3%) extremely severe anxiety.

Taking into consideration the DASS 21 depression subscale 892 subjects (55, 3%) obtain scores within the normal range, 84 (5, 2%) seem to report mild anxiety, 280 (17, 4%) suffer from moderate anxiety, 94 (5, 8%) severe anxiety, 262 (16, 3%) extremely severe anxiety.

Taking into consideration the DASS 21 depression subscale, 735 subjects (45, 6%) obtain scores within the normal range, 165 (10, 2%) seem to report mild depression, 333 (20, 7%) suffer from moderate depression, 148 (9, 2%) severe depression, 231 (14, 3%) extremely severe depression (Akin-Odanye et al., 2021).

II. PSYCHOLOGICAL IMPACT ON DOCTORS AND HEALTH CARE WORKERS

When the world was battling with the COVID-19 pandemic, frontline health care workers (HCWs) and the doctors are among the most vulnerable groups at risk of mental health problems. As per research the health care workers and the doctors were at an increased risk of acquiring trauma or stress-related disorders, depression and anxiety due to the fear of the unknown or getting infected while working. Depression scores were higher among the women and in those who had reported having a chronic disease, whose workload increased after the outbreak, and who had physical contact with COVID-positive patients. The continuous increase in the number of cases due to the pandemic, and the lack of personal protective equipment (PPE) and drugs, are a psychological burden on health-care professionals. The COVID-19 pandemic has caused additional psychological difficulties and increased the workload of physicians. The psychological well-being of physicians is of vital

significance, not only for physicians themselves but also for the quality of health care they provide. During COVID-19, workers are experiencing guilt associated with watching patients dying alone and their need to break news to loved ones via technology rather than in person. This guilt may translate immediately or eventually into clinical anxiety or depression, which would be consistent with findings from previous outbreaks. Days after days they have to spend in hospitals to treat the patients. Some have to stay in hospitals and some reaches home at the middle of the night. The families of the doctors and the health care workers have also faced a lot of issues. It also seems to be depressing for them as they are constantly watching their family member fighting to save lives. Doctors and the health care workers had to isolate themselves in their own houses so as to protect their family [4].

These healthcare workers felt a loss of social connectedness and were adversely impacted by a perceived erosion of trust within and across their communities. Although physicians are trained extensively in the clinical aspects of their jobs, they have much less support learning how to cope with the emotional strain that many of them will feel. In the case of pandemics like COVID-19, physicians often struggle with seemingly irreconcilable motivations and are forced to make unanticipated choices. Researchers have suggested that, in addition to enhancing preparedness among physicians and other healthcare workers, we need psychological tools and perhaps healthcare professionals focused on the psychological impact of biologic threats to help healthcare workers cope with the stress and anxiety of facing pandemics. By minimizing the adverse psychological effects on physicians, we could protect these critical workers and the integrity of the healthcare system [5].

III. PSYCHOLOGICAL IMPACT ON LABOURERS

The COVID-19 pandemic has deeply altered social and working environments in several ways. Social distancing policies, mandatory lockdowns, isolation periods, and anxiety of getting sick, along with the suspension of productive activity, loss of income, and fear of the future, jointly influence the mental health of citizens and workers. One of the most vulnerable, but neglected, was the occupational community of internal migrant workers prone for development of psychological ill-effects due to double whammy impact of COVID-19 crisis and concomitant adverse occupational scenario. Due to unequal growth and urbanisation across the different states, inter-state migrants have move from less-developed areas to more-developed areas such as metropolitan cities in the hope of earning a better livelihood. Maharashtra accounts for one of the largest shares of migrants who have moved to the state for better employment opportunities with about 60 lakh migrants. Asian countries have faced the issue of the exponential growth of spread of transmission of Covid-19 in



overcrowded residences of internal migrants in slum areas of urban cities like Dharavi in Mumbai, underprivileged localities of metro cities like Delhi etc. Also, in Singapore there was a rapid growth of transmission of infections in its migrant worker dormitories, which happened after the initial success in the epidemic containment. During the lockdown period of India, nationwide sudden bans on travel, lack of work led to no financial means to take care of daily food expenses and quarantine rules, all have resulted in high levels of anxiety, which in turn induced socially irresponsible behaviour and panic attacks among internal migrant workers. They were much worried about their families dying of starvation instead of getting infected. They have made desperate attempts to go back to their homes during the pandemic, the scenarios are still clear in front of the whole world, that how the chunks of migrant workers have rushed to bus stops and railways to go back. This made them to violate the preventive measures of covid-19. Anxiety levels are indeed building in these migrant workers so hard, which forces them to travel several thousands of kilometres on foot to reach their native places without any provision of food or shelter in the transit. They had experienced extreme conditions like chronic malnutrition, absence of family support, health issues, poor living conditions etc. And still there were no effective laws made for them to support. Even if they suffer from anxiety, depression, there were financial barriers for them to access those psychiatric help [6].

IV. PSYCHOLOGICAL IMPACT ON STUDENTS

The Covid-19 pandemic has created a new 'normal' that was unthinkable till a year and a half ago. The pandemic has not just been a public health crisis but also led to a new psychosocial experience which are termed as 'lockdown' and 'social distancing', which have become a part of daily discourse. 2020 has been a rough year for everyone, but children and young adults were among those who were hit hardest by mental health concerns.

As countries introduced measures to restrict movement as part of efforts to reduce the number of people infected with COVID-19, more and more of us were making huge changes to our daily routines. People got exposed to work from home, home schooling, and the worst was unemployment. Specially, there was a drastic change in the life of children, the school and college students. They experienced boredom, disappointment, and irritability under the isolation measures. Researches show that extended period of loneliness can worsen mental and physical health outcomes over time, leading to depression. In March 2020 almost all of the schools across the world were forced to shut down abruptly to control the spread of the deadly virus which led to a huge day-to-day adjustment for students. Children were prevented to go out to or meet their friends. As a result, with the passing days they were getting bored,

irritated and started feeling alone. Closure of parks and playgrounds affected their physical health. There was a great uncertainty about the reopening of schools and colleges. They were completely clueless about the year ahead. The online classes were introduced within few months. It was a bit tough and took time for the lower age group students to get familiar to it. For children and adolescents with mental health needs, such closures mean a lack of access to the resources they usually have through schools. In a survey by the mental health charity, which included 2111 participants up to age 25 years with a mental illness history in the UK, 83% said the pandemic had made their conditions worse. 26% said they were unable to access mental health support. Peer support groups and face-to-face services have been cancelled, and support by phone or online can be challenging for some young people. School routines are important coping mechanisms for young people with mental health issues. When schools were closed, they lost an anchor in life and things grew worse. Due to the closing of schools, some lock themselves up inside their rooms for weeks, refuse to take showers, eat, or leave their beds. For some children with depression, there will be considerable difficulties adjusting back to normal life when school resumes. Children with special education needs, such as those with autism spectrum disorder, were also at risk. They became frustrated and short-tempered when their daily routines were disrupted, as per the psychiatrist [7].

Depression and anxiety were common mental health problems experienced by university students. Being in higher education is associated with many stressors and transitional events, and students fall within the age range when common mental health problems are at their developmental peak. Depression and anxiety can impair students' academic performance and social functioning, cause significant burden at university, and potentially affect their future career opportunities [8]. Students in higher institutions of learning were exposed to internal and external pressure to perform well academically and succeed despite increased academic and course workload requiring self-directed learning with effective time management skills. Students who had part-time or full-time jobs while completing their studies were predisposed to psychological stress due to the exigencies of balancing the demands of school and work. For the students that do not have gainful employment, the financial strain leads them to psychological stress impacting their studies. For those who thrive on social interactions with peers, when restrictions are made on engaging socially, psychological distress can also arise in them [9].

V. CONCLUSION

Curing mental health is as important as the physical one, as sometimes it can make them impulsive and can bring them suicidal thoughts. Community-based strategies should be



made in order to support psychologically vulnerable peoples. Families should give time to each other. Be an attentive listener to the person whose going through a lot, try to understand them, keep checking on them to make them feel important and inspire them to live their life happily. COVID-19 virus has affected our lives to a great extent, psychologically as well as physically too. But now everyone is trying hard to get over that phase and have a balance over this new normal world.

VI. REFERENCE

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