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Impact of Covid 19 on Mental Health: Whether India is prepared to handle the crisis?

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Abstract:

The COVID-19 is clearly having a major impact on mental health by affecting our day to day functioning with increasing unemployment, separating families and various other changes. There is a worldwide fear, depression and panic because of this pandemic. The frequently updating of the worst case scenarios by the media can fuel fear and worry. The uncertainty and Isolation can lead to difficulty in sleeping or concentrating. Therefore, the objective of this study is to address the several issues related to mental health because of COVID-19 pandemic. Besides, it also identifies high risk populations of adverse mental health outcomes. Finally, we discuss whether India, the second-largest populous country in the world and enormous cultural diversity, is prepared to face the challenges that may arise in future. The study concludes by stating that, there is a need for real-time monitoring of mental health issues, across the population at-risk groups and also the frontline workers including healthcare professionals. Marginalized sections of the society including the elderly, undocumented migrants, homeless persons and those with mental illness should be given priority and extra effort should be made to obstruct from their deteriorated mental health conditions due to this pandemic.

Keywords: Covid 19; Mental Health; Depression; Anxiety; India.

Introduction

The entire world has witnessed the hidden and powerful enemy of humanity in the form of Coronavirus or COVID-19. The novel Corona Virus surfaced first in Wuhan city of China in December 2019, swept across the globe and become a pandemic. Thus, social distancing, quarantines, travel restrictions, and cancellations of schools and large gatherings became the global policies to decrease the viral spread. Maintaining distance, removing potential sources

of contamination and obsessive hand washing are the various preventive cares for this pandemic. With the first reported case of corona positive in India on 30 January, 2020 the cases rose close to 1,00,000 with nearly 3,000 deaths by the mid of May 2020. There is a nation-wide lockdown in India, from March 24 to May 31, 2020. Many people got worried to stock up on essential things, when the lockdown was announced. The country's size and population of around 1380 million is making the task of the planners and health professionals much harder. The COVID-19 pandemic is a challenge to all of us in many ways, but most prominent among them are health and economy. There is a continual debate on what is essential; human lives or economy? As both elements have a shared space, either conflict or cohesion or at times a co-existence of these two elements is a natural outcome of this strife. How best to address these two issues depends on what kind of short-term and long-term goals we set for ourselves and others. The COVID-19 that has affected everyone becomes a significant stressor, even a person who is not directly affected by this pandemic.

In the last decade, the Severe Acute Respiratory Syndrome (SARS) outbreak in 2003, was associated with increased rates of anxiety, increased rates of depression, stress, and psychological distress in patients and clinicians, there were also increased rates of suicide (Davis, 2020). After the SARS outbreak, symptom of post-traumatic stress disorder (PTSD) was also exhibited among both healthcare workers and people who were self-quarantined (Lee et al., 2007). Similarly, the COVID-19 is clearly having a major impact on mental health by affecting our day to day functioning with increasing unemployment, separating families and various other changes. There is a worldwide fear, depression and panic because of this pandemic. The frequently updating of the worst case scenarios by the media can fuel fear and worry. The uncertainty and Isolation can lead to difficulty in sleeping or concentrating. Stress due to panic and anxiety can affect the eating patterns, can worsen chronic health problems and are associated with psychological distress and symptoms of mental illness (Bao et al., 2020). Whether we will be able to pay enough attention to the people suffering from adverse psychological conditions? Therefore, the objective of this study is to address the several issues related to mental health because of COVID-19 pandemic. Besides, it also identifies high risk populations of adverse mental health outcomes. Finally, we discuss whether India, the second-largest populous country in the world and enormous cultural diversity, is prepared to face the challenges that may arise in future.

Covid 19 and vulnerable populations

The vulnerable sections of the society who are more likely to be under stress from COVID-19 are, migrants, older people and people with chronic diseases, children and teens, frontline workers, people who have mental health conditions.

Migrants and unexpected financial crisis

With country wide lockdown declared on 24 March 2020, and kept on extending for the second one, the migrant workforce and daily-wage earners lost their jobs. With no money at hand to survive at their workplace along with inaccurate information in various media, they are forced to leave their places of employment and marched towards their villages. They dared to walk for hundreds and thousands kilometers with their families that included children too. The COVID-19 situation is an eye opener for the entire country to introspect about our development plans. Are we prepared post COVID-19 to manage such a huge population who have already lost jobs and are in their respective villages? Are they psychologically fit to stand up again for themselves and for their dependent family members? Well, migrant workers and daily wage earners are not the only sections who have been affected by this pandemic or from the measures taken by the government to contain the pandemic. Businesses, be it small, medium or large have also been affected in many ways. Our demography is our strength. Capitalizing on human resources, skilling, re-skilling and up-skilling workforce from time to time is an important way to keep people engaged even at the local levels. Big industries are not the only answer to development always. We have a lot of untapped potential in the field of agriculture. But, again we must see that agriculture is not becoming another puppet of big industries. Locally relevant small agro-industry led business development plans would work better for a country like India.

There is also a need to look at the impact of lockdown to manage the pandemic on unemployment and poverty, which play a role in mental health problems. It is observed that many people are under stress because of loss of jobs leading to financial stress, stress from home, horrified feelings, apprehension, and feelings of helplessness due to the COVID-19 pandemic. Thus, corona virus outbreak can lead to a loss of livelihood for those who either work on short term contracts or those who are without any job contracts (Bhagat et al., 2020). India is likely to face the job crisis because of the COVID 19. Migrant workers and workers in informal sector are likely to be badly hit (ILO, 2020). COVID-19 affects economy and also on well-being. It also leads to have high levels of fear and panic behaviour, such as hoarding

and stockpiling of resources (Shigemura et al., 2020). Unexpected financial crisis can have negative psychological impacts, including post-traumatic stress symptoms, confusion, anger and depression. Adverse mental health outcomes are likely to be high because of resource crunch and food insecurity, discrimination, and contact with infected and sick individuals during the epidemics. The role of unpredictability, uncertainty, seriousness of the disease, misinformation and social isolation leads to stress and mental morbidity (Zandifar and Badrfam, 2020).

An increase in financial and family stress in this pandemic would worsen the mental health and lead to a more passive lifestyle. In several places, when the stranded migrant labourers gather to catch the bus/train to go to their native place were brutally beaten by the police force. The migrant labourers suffer the most due to the shortage/lack of food, shelter, healthcare, fear of getting infected or spreading the infection, loss of wages, concerns about the family, anxiety, fear and ultimately greater risk for developing long-term psychological difficulties. There is a need for outreach and social support among migrant labourers to reduce the risk of common mental disorders.

Elderly

Elderly are one of the vulnerable sections among whom the mental health is likely to deteriorate in this lockdown era. Elderly are susceptible to COVID-19 due to their reduced immunity as they age. They are also psychologically vulnerable at this time as they miss talking to real people; they miss their walks and remain confined to their homes only. They lost the comfort they drew from their daily walks and chatting with friends. The disruption of routine life among elderly can lead to anxiety. The isolation and fear can escalate nervousness. Those who have the pre-existing conditions like anxiety, depression and OCD (obsessive compulsive disorder), their condition aggravates as they struggle with new levels of loneliness and helplessness. This can be extremely frightening and very fear inducing. Social interaction is important for the emotional wellbeing of the elderly. Their psychological condition deteriorates by maintaining physical distance, even from their grandchildren. Some older people may already be socially isolated and experiencing loneliness which can worsen their mental health. The psychological impacts can include anxiety and feelings of stress or anger. Its impacts can be particularly difficult for older people who may be experiencing cognitive decline or dementia. It is important to maintain social connections with them through the digital methods those who are familiar and those who do not, may need guidance

how to use them. Further, the psychosocial support services must be provided to elderly at this time (Kluge, 2020).

Children

Children across all ages and stages face enormous disruption in this unprecedented time. Because of the outbreak of corona virus across the globe, most of countries have announced temporary closure of schools. This has affected more than 91 per cent of students, comprising around 1.6 billion children and young people globally (UNICEF, 2020). Because the schools are closed as part of necessary measures to protect them from corona virus, children may not have the structured environment that is provided in the schools. They have less opportunity to be with their friends. They are less likely to get social support which is essential for good mental well-being. Without school many children may not have adequate meals, resources, or a healthy environment (mostly public funded) at home. Due to the changing environment and sudden stressors, children are likely to experience anxiety and mental health issues.

Regular programmed work may be one substitute for the children who are out of school. Some of the schools have started online classes. Though it is helpful, but not all children have access to technologies that enable remote connectivity. Further, it is an additional burden on parents to take care of the children (especially small kids) when they are attending the classes. This becomes a challenge for parents especially who work from home by doing multiple role in the household like, educating their children, managing a household, or scrambling to find day-care or babysitters while schools are closed. As the children spend time with their parents, make more demands on them, and, in turn, some parents may be under undue pressure. Such scenarios create adjustment issues in the family and each member of the family are affected psychologically. Given the disproportional accumulation of resources in some homes and a scarcity of many of the basic needs in majority of homes, technology-enabled remote learning encourages more discrimination. Children who don't have the resources feel inferior compared to children who have all the facilities available easily. Rather than forcing children to use one way of getting connected to schools for keeping them updated, there is a need to explore other possible ways of inclusion so that these children do not feel neglected or rejected by the schools and their peers. Technology must not be used to divide rather to unite all during this difficult time.

Further, giving love, affection and making them understand what is happening will help them to reduce their fears. Encouragement of creative activities and establishing routine of the day can be beneficial. Different ages and stages of life have varying demands and needs. Hence, using a single method for all may not work very effectively all the time or with all the children of same or similar age. There is a scope to develop new ways of thinking and strategizing to engage children if such situation arises.

Pre-existing Mental Illness

Patients with pre-existing mental illness, such as anxiety or depression, or who have a prior history of trauma, may be at higher risk of relapse or new episodes of disorder due to stress during this challenging times (Roy, 2020). In this period, there is a higher chance of self-harm and suicidal ideation, including isolation, stress, financial worries, disruption of personal recovery plans, and relationship discord (Gunnell *et al.*, 2020). The day boarding and day care centres for persons with mental health problems have been closed down, temporarily, as a result of lockdown to maintain social distancing. The health care facilities have been advised to provide emergency medical care, and people with other health problems, including mental health problems, can wait till the prevailing COVID-19 related situation improves. Hence, persons with chronic mental health problems who need regular medical care are deprived, as they do not have an emergency care provisions and facilities. Mental health rehabilitation being a non-emergency service has also been stopped affecting persons with chronic mental illnesses and intellectual disabilities to be deprived of these services (Chaturvedi, 2020). Having been placed in their respective homes also creates problems for the care givers and other members of the family, thus affecting the entire family's psychological health in terms of adjustment issues. COVID-19 like situations has given an opportunity to think about the care of the mentally ill persons in a novel and non-obvious way.

Psychological impact of quarantine

Quarantine as a strict measure to contain the spread of the virus is gradually taking toll on the individuals. Quarantine life is perhaps the most obvious and immediate effect on the mental health. Because of quarantine, the daily routine gets affected. This made people to lose the control over their lives. Majority are afraid of death; either their own or that of the people they love. Many people feel distressed because of enforced isolation in a quarantined environment. Social rejection by people who are afraid of dealing with the cured or suspected

patients is another contributing factor for depression and suicidal thinking. There are several instances in India, like, one person who ran away from the isolation ward at a General Hospital and was found hiding in his home; as well as two American citizens who fled from Medical College Hospital, Alappuzha, but were tracked down at the Cochin international airport. In addition, severe depression among the quarantined people could cause a post viral fatigue and deprived of a close relation (though death).

The curtailed movement, isolation, social distancing and separation of people potentially exposed to a range of psychological conditions, from post-traumatic stress symptoms to confusion, anger, depression, stress, insomnia and emotional exhaustion. Inability to activate social network is associated not just with immediate anxiety, but longer-term distress.

It is highly likely that people under quarantine may face some other emotional or mental health issues. It can be stressful when a healthcare provider thinks the quarantine people might have been exposed to COVID-19, even if the person does not. Coming out of quarantine may have mixed emotions mainly because people behave/feel differently as the friends or family members fear of contracting the disease even though the person is not contagious on one hand and relief from stress of monitoring on own health or being monitored by others for sign and symptom of COVID-19, relief from stress of not being able to perform normal work or parenting responsibilities during quarantine on the other hand.

Though some of the strategies adopted by some state/national level institutions like, NIMHANS has set up a helpline to reach out to patients, Kerala have set up helpline to tele-counsel people in quarantine, and all the states should be prepared to handle the crisis. As per the World Health Organization (WHO) guidelines those who are home quarantined should maintain a healthy lifestyle, which includes proper diet, sleep, exercise, and social contacts over phone. The mental health and emotional needs of all those who suffer from COVID- 19, those who are quarantined, their families, and also of the health providers should be addressed.

Quarantine as a method of forced social or physical distancing from others though effective in controlling the spread of the infection, is believed to be a punitive measure by the people who are quarantined. The level of awareness and sensitization prior to quarantine and pre-counselling sessions in the print and electronic media could have been used to pacify the

anxieties. At the same time constant streaming of negative news about quarantine centres, the managers of the centres as well as the behaviour of the patients should be restricted and positive outcomes of the centres should be highlighted in order to control the negativity about quarantine process among the prospective cases.

Frontline workers

Healthcare workers providing frontline services are at a significant risk of adverse mental health outcomes including anxiety, depression, distress, and low sleep quality during the COVID-19 outbreak. This may be because of the long working hours, risk of infection, shortage of protective equipment, loneliness, physical fatigue, and separation from families (Kang et al., 2020). The frontline paramedics including female nurses are also at greater risk of developing PTSD, depression, grief, and guilt which are of long term concern (Sarangi, 2020). Besides, the police forces including the security staff are also at greater risk for developing long-term difficulties.

The fear of involuntary admission into the isolation ward among the homeless has an adverse effect on mental health. The adverse effects of the pandemic may lead to anxiety and stress related disorders in maternal and neonatal outcomes.

Conclusions

It appears likely that there will be substantial increase in traumatic incident, including, invasive thoughts like nightmares or upsetting memories, irritability, trouble in sleeping, trouble in concentrating. The effects of lockdown due to COVID -19 lead to long term psychological problems which would require both large-scale psychosocial crisis interventions, and the incorporation of mental health care in disaster management plans (Dong and Bouey, 2020). Though the Indian government has taken some step to handle this crisis, but it has to go a far. In order to minimize the stress levels and to reduce the risk of depression, mental health professionals may need to work closely among those working in critical care units (Liu et al. 2020). There is a need to educate the public about the common psychological effects of a pandemic (Banerjee, 2020). There is a need to reduce the stigma associated with the disease. There is a need to strengthen both mental health services and the social capital to reduce the adverse psychological impact of the outbreak especially for vulnerable populations. There is a need for real-time monitoring of mental health issues,

across the population at-risk groups and also the frontline workers including healthcare professionals. Marginalized sections of the society including the elderly, undocumented migrants, homeless persons and those with mental illness should be given priority and extra effort should be made to obstruct from their deteriorated mental health conditions due to this pandemic. The impact of COVID-19 on mental health may take months to become fully apparent (Maunder, 2009). It requires combined efforts from psychiatrists and also from the health care system to manage its impact. A close and organized collaboration among psychiatrists, psychologists, psychiatric nurses, psychiatric social workers and specialities from other branch of medicine, as well as with local authorities and health workers in the community is essential in combating the current and after effects of this pandemic.

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