

Addressing Mental Health Issues During COVID -19 Pandemic

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Abstract

Objectives: analyzing psychological issues due to covid 19 and emphasizing psychological coping mechanisms.

Method: International journals found in two electronic databases were used to identify studies with large circulation: Scopus and Embase.

Findings: The present epidemic in Wuhan (China) triggered by the pandemic COVID-19, corona virus infection on human sites around the world, has a major impact on global health and mental health. In addition, given all instruments used to battle virus spread, additional strategies for addressing the mental health balance in India are needed. The general issues of mental health are growing, COVID-19 patients tainted, near contacts, older citizens, kids and health staff. Most health professionals who work in isolation units and hospitals are not trained on mental health. The consequence of mass quarantine seems more likely to be fear.

Key words: Recognizing, COVID -19, Psychological problems, Coping

Introduction

The latest pandemic of the corona virus (COVID-19) is unparalleled in the history of modern world health in 2019. In addition to the biological context and because of the enormous and permanent changes in everyday life, dealing with it is a challenge to psychological resilience. Earlier research demonstrated the dramatic individual and social psychosocial impacts of epidemics and contamination of diseases that gradually became more prevalent than ^{(1),(2)}. actually. the overall population has already been high anxiety and stress levels and depression as a result of this pandemic^{(3),(4)}The rapid spread of the novel corona virus declared a pandemic by the World Health Organization has created a sense of fear around the globe.⁽⁵⁾

During these changed times of COVID-19, several medical professionals, such as doctors, nurses and virologist, work in overtime or in altered routines, as with most medical workers, home IT professionals, regular work hours academics as well as work in special schedules and surroundings.⁽⁶⁾

Effect on general population due to COVID-19

During pandemics, when the world is facing a shutdown or a frequent slowdown, individuals are encouraged to create social separation, thereby reducing interactions among individuals.⁽⁷⁾

Evidence shows that sensitive groups confined to their homes during a pandemic can lead to adverse health outcomes. Children are less physically active and have much more observation time, uneven sleep cycles and poor diets, leading to increased weight and a cardio lack of respiratory fitness. ⁽⁸⁾There are also other direct and indirect implications for school closures, such as unintentional childcare duties, which are particularly

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significant in health care activities. ⁽⁹⁾ This can apply in most countries around the world not only to care for infants, but also to adults and geriatrics. ⁽¹⁰⁾

Other facets of pandemic outbreak include stigma and terror. It may pose important barriers to healthcare seeking, social marginalization, lack of confidence in health authorities and the perception of public risks which lead to mass hysteria between citizens and to excessive health care allocations by politicians and healthcare professionals. ⁽¹¹⁾

Healthcare practitioners typically go the other way. As the require for healthcare is growing exponentially, they face long working shifts that can lead to physical pain and breathing difficulties, often with little resources and inadequate infrastructures⁸ and a need to wear Personal Protective Equipment (PPE). This can result in you isolating yourself from or expanding your family, changing your routine and limiting your social support network ⁽¹²⁾

Over and above all this pandemic will impact the future policymaking at global , regional and national levels across the world starting from health, society , and economy. ⁽¹³⁾

Any individual may experience symptoms of mental morbidity following a traumatic event and pandemics that cause much stress among large populations under appropriate stress..^{(14),(15)}

Effect on COVID-19 Cases

Patients with confirmed or suspected 2019-nCoV can experience anxiety, isolation, and irritation from the effects, which may be life-threatening, of infection by a new virus. Symptoms like fever or hypoxia are also present cough and adverse drug effects such as corticosteroid insomnia may lead to a worse degree of anxiety and mental distress.⁽¹⁶⁾

Anxiety, anger, nervousness, emotionality, criticize and blame (everyone else), dissatisfaction, depression, mental addictions and failings to cater are echoing the particular problems during the COVID-19 pandemic. ⁽¹⁷⁾⁽¹⁸⁾ Bio function, such as sleep impairment and intercourse. ⁽¹⁹⁾ ⁽²⁰⁾ Cognitive disorders include impaired focus, poor memory, incapacity to make choices, lack of dignity, increased alertness, distortions of vision,

distracting and inappropriate memories, decreased self-esteem, and denial. • Emotional outbursts, anger, arguments and the inability to settlement include the psychological and personality issues. Remission, failure to communicate with others, decreased and/or increased appetite (or coping) reduction, decreased or lost Libido, inability to control the use of drugs and increased risk-taking behaviour.⁽²¹⁾

Suicides in the COVID-19 pandemic were recorded from different parts of the world.⁽²²⁾

Family Members and close connexions affect:

Families and closest contacts are faced with psychological problems, isolated or quarantine problems along with COVID-19, which cause people to feel insecure and guilty of the implications of infection, quarantine and stigma in their families or friends. ⁽²³⁾ Families lose their loved ones as a result of the pandemic trigger resentment and rage. In addition, they also feel guilt, culpability or stigma for ill and/or quarantined members of the family and some studies have documented PTSD and family depression and close contact. ⁽²⁴⁾ On the other hand, the incidence of an acute stress disorder, changes disorder, and grief in isolated or quarantined children is higher. 30 per cent of children registered PTSD and early loss or breakup of parents during childhood, including increased risks of developing mood disorder, psychosis and suicide, has long-term negative effects on mental illness.⁽²⁵⁾

Mental Health Issues among Special Populations:

The mental health of the special populations is at very high risk in the case of COVID-19.

Elderly people: were particularly vulnerable to morbidity and death because of the COVID-19 pandemic; their problems are already at risk of autoimmune diseases and impaired immunity due to the lack of proper nutrition, are often affected by autoimmune disease and are more vulnerable to the development of dementia and depression.⁽²⁶⁾

Young children :The social isolation of young children does not come into being; schools and play areas are closed and their classmates, friends, sleep-over and playing dates have ceased. Their children are the children who have no access. This can lead to

their tranquility and isolation. The protocols for social distancing and locks-downs may also increase, cause fear, anxiety, abnormalities in the behavior, irritability and agitation, and not just affect their perceptions of the pandemic. Children can be watched and cried and teenagers can attempt to cope with the ingestion of drugs. These unhealthy management mechanisms can lead to short and long-term mental health problems.⁽²⁷⁾
(28)

Pregnant women: COVID-19 pregnant women are at severe risk because of sudden outbreak and an unexplored natural disease history. There was little evidence of how new coronaviruses can affect pregnant women worldwide.⁽²⁹⁾

Even pregnant women's mental health is critical and needs to be taken seriously. Women are exposed to the virus during their initial stage of pregnancy which can cause unknown complications and pregnancy outcomes. In general women who are pregnant require emotional support, particularly during pregnancy, but protocols which distance them from social support usually received by them can prevent them. When a woman who is a health care worker is pregnant during these times, the issues are even greater. The already burdened system can be stressed unduly and women can be stressed.⁽³⁰⁾

Marginalized groups: aboriginal and tribal people who have been marginalized from societies also are at high risk, typically have little access to healthcare standards and live where healthcare and facilities in normal times are difficult to meet. COVID-19 will provide such societies with a great challenge. Most of these people are employed in dangerous jobs and are unable to take advantage of paid leaves and face an eviction threat; they can lose employment and space, making them more prone to the illness and drive them to mental illness. You may encounter issues such as helplessness, desperation and perhaps strength to demand essential sustainability.⁽³¹⁾

The largest spreader of corona viruses is beggars living on the side of the lane. They keep their belongings on the brooks and sleep on the floor. Most do not wear masks and start at the nearest red light intersection. Stress and emotional disruptions also endured. Significant measures and methods for rehabilitating and supplying health services with mental health requirements for such

citizens.⁽³²⁾

People with comorbidities:

Because of their medical comorbidities, the risk to those already ill makes them very vulnerable to new coronaviral infections. This prevents them from being critically ill.

China and Italy studies have shown that COVID 19 has risen in severity and mortality and morbidity among the people who have medical comorbidity. This gives people with these conditions the sense of fear and anxiety, influencing their ability to deal with the disease.⁽³³⁾⁽³⁴⁾

Health care workers: The pandemic affects physicians in an emotional way and the vast majority says they experience one or more of the following consequences: fear of infection, anxiety, tiredness, sleeping trouble, loneliness, anguish, insecurity or irritability. The front-line people are particularly affected by fear of personal and family infection, workplace pressure and tiredness.⁽³⁵⁾

Because of the exponential rise in demand for health care they have to cope with long shifts of work, often with little funding and fragile facilities and with the need to wear Personal Protective Equipment (PPE), which may cause physical pain and breathing difficulty. Moreover, a substantial number of clinicians may not be prepared to perform clinical intervention in new virus patients who are little known for, and for whom clinical guidelines or treatments are not well developed.⁽³⁶⁾ There is also fear of auto-inoculation and concern that the virus may spread to your family, friends or colleagues^{(37),(38)} This can lead them to get alienated or extended, change their routine and reduce their social support network.

Taking care of confrontation with issues of mental health during COVID-19 pandemic

Tele psychiatry: Currently, tele psychiatric consultation has become increasingly popular with lock-downs as well as social distance, and fears of COVID-19. The advance of technology has made access to health care via networking possible with phones and internet. Different tele psychiatry models can be used in different national contexts. In lieu of COVID-19, India has already begun using psychiatric hotlines and

helplines. The most frequent services

Psychological can include the COVID-19 pandemic first aid, identification of mental health issues,

Checking and appropriate psychological symptoms referrals. This will lower the workload in

and a successful action to eliminate hospitals. Footfall in installations that lead to maintenance

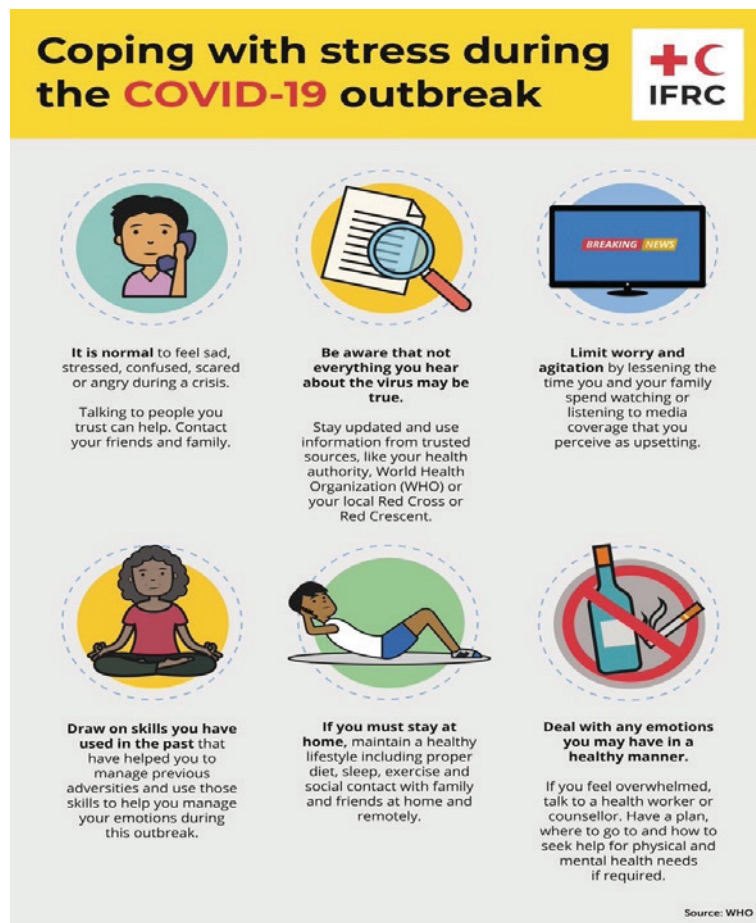
of the protocol of social distance. This will also help to make them think that somebody always listens,

Soon support is provided.⁽³⁹⁾

E-teaching: E-teaching is one of the most common trends. The economic prices for the internet and better technology have created a great resource of knowledge about healthcare. This initiative in medical professionals can also be prepared to target the interventions of COVID-19 and can upgrade their knowledge⁽⁴⁰⁾

Resilience: Although each person is affected and unnerved by the coronavirus pandemic and tries to adapt to it, not everyone can cope efficiently with stress and adapt quickly to new conditions. Resilience is measured by factors such as living conditions, poverty, lack of access to health care, potential future vulnerability (i.e. job risk), genetic make-up, previous experience, social interactions⁽⁴¹⁾ and social help. Improved mental toughness helps to effectively fight the coronavirus pandemic⁽⁴²⁾.

Stress is a pandemic natural response. Possible stress-related responses may involve carelessness, irritability, anxiety, sleeplessness, reduced efficiency, and conflict between the members of society. This can be applicable to the larger population, but in particular to sectors directly involved (e.g. health workers). Depression and anxiety should be stressed as normal reactions to a dangerous situation⁽⁴³⁾



Summary of coping with stress during COVID-19 (adapted from source international federation of Red Cross and Red Crescent societies)

Modalities to defeat mental health issues:

Maintaining relationships:

- Establish an online platform for mutual support
- Just sit down and enjoy the conversation
- Teams of staff have established online community gatherings, online book clubs and co-working areas in which others can (virtually) operate.
- **Your friend is Routine:**
- It helps to control fear and helps you respond more easily to this present reality.
- Setting coherent limits between working time

and non-working time in your physical as in your head space.

- Identification of something that does not work and is not linked to viruses that bring happiness to you.
- Operating in brief blasts with consistent breaks can help to maintain continuity
- Restricting exposure to the pandemic can cause disturbances
- **Manage vulnerability by keeping in touch**
- Take every day and focus on things you can deal with.
- Consciousness can be great tools and meditation

TAKING CARE OF MENTAL HEALTH DURING THE PANDEMIC



Reframe your thoughts

Instead of thinking negatively, try to reframe it as a good time to do what you've always wanted to, such as baking, painting, making music, etc.



Know when to switch off

Yes, it is important to be updated. But from time to time, remember to give your mind a rest from all COVID-19 news.



Focus on the needs of others

Think about what you can do to help others, from sending care packages to front liners, to helping the weak or cooking for your loved ones.



Reach out to loved ones

Although we need to be physically apart, we can still stay connected to the people we love with tools such as phone calls, text messages and video calls.



Create a new schedule

Structure helps provide a sense of stability. Remember to always include an activity you look forward to in your daily schedule.



Seek professional help

If it is difficult for you to cope, it is okay to look for professional advice. There is no stigma in doing so.

Taking care of mental health during COVID-19(adapted from resources Malaysian Health Coalition)

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