



# Impact of Covid -19 Pandemic on Anxiety, Depression, Health-care, Self-harm and Mental Health

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## **Abstract:**

The COVID-19 pandemic may have brought many changes to how you live your life, and with it, at times, uncertainty, altered daily routines, fear, anxiety, financial pressures and social isolation. In the early stages of the COVID-19 pandemic, researchers highlighted the importance of monitoring the rates of depression, anxiety disorder, self-harm and suicidal tendencies across general and vulnerable populations. The COVID-19 pandemic is a major health crisis that has changed the life of millions globally. As a major virus outbreak in the 21<sup>st</sup> century, the Corona virus disease 2019 (COVID-19) pandemic has led to unprecedented hazards on mental health globally. While psychological support is being provided to patients and health care workers, the general public's mental health requires significant attention as well. The purpose of this study was to assess the effect of pandemic on mental health and quality of life.

**Keywords:** COVID-19, Anxiety, Depression, Mental Health, General population, Suicidal tendency, Self-harm

## **Introduction:**

The COVID-19 pandemic is creating concerns about the mental health of young people around the globe. There has been a call for research funders and researchers to 'deploy resources to understand the psychological effects' of the COVID-19 pandemic and the ensuing 'mental health crisis'. The crisis likely exacerbates previous risk factors of poverty and vulnerability. The Lancet Commission on Global Mental Health had already identified poverty as a key risk factor for the onset and persistence of mental disorders. A recent study<sup>4</sup> found that those with the lowest income were much more likely to suffer from anxiety and depressive disorders than their wealthier counterparts and points to the bidirectional causal relationship between poverty and mental health.

## **Impact on Anxiety:**

Anxiety can co-occur with stress, although it is distinct in that it is defined as feelings of worry or apprehension in the absence of a direct threat (APA, 2013). Anxiety disorders are characterized by excessive worry, distress,

and somatic symptoms of tension that interfere with daily functioning (APA, 2013) and are the most common mental illness in the United States and leading cause of disability globally, with approximately 31.2% of U.S. adults experiencing an anxiety disorder in their lifetime (Harvard, 2007). In the face of the many uncertainties associated with the COVID-19 pandemic, the negative impacts on mental health, including an increase in anxiety, are a significant concern.

### **Impact on Mental Health:**

The COVID-19 pandemic has brought into focus the mental health of various affected populations. It is known that the prevalence of epidemics accentuates or creates new stressors including fear and worry for oneself or loved ones, constraints on physical movement and social activities due to quarantine, and sudden and radical lifestyle changes. A recent review of virus outbreaks and pandemics documented stressors such as infection fears, frustration, boredom, inadequate supplies, inadequate information, financial loss, and stigma. In the early stages of the COVID-19 pandemic, researchers highlighted the importance of monitoring the rates of depression, anxiety disorders, self-harm and suicidal behavior across general and vulnerable populations, including front-line health care workers.

Measures taken to mitigate the spread of the disease such as national lock downs and social distancing have negatively impacted employment and the economy, and increased social isolation and loneliness. Fear of contracting the virus, experiences of bereavement, and uncertainty about the future have compounded these stressors.

### **Impact on Stress:**

Stress is a multidimensional construct (Levine, 2005), involving psychological and physiological reactivity in response to events that are perceived to be or actually threatening to existence. Psychological variables shown to result in significant stress include loss of control and uncertainty (Dickerson & Kemeny, 2004; Mason, 1968), which are at the heart of the societal, social, and daily changes people face during the pandemic.

The way in which one responds to stress can have significant immediate and long-term effects. Compas et al. (2001) present a robust, theoretical model in which stress response and coping are considered on three dimensions (voluntary vs. involuntary; engagement vs. disengagement; primary vs. secondary control). According to this model, coping involves voluntary responses that are controlled and under conscious awareness. In contrast, stress responses are involuntary, automatic responses to stress that involve physiological, emotional and behavioral responses. Stress responses and coping can be further characterized based on the extent of engagement (e.g., approach responses directed toward stressor) or disengagement (e.g., avoidant responses directed away from stressor) with the stressor. The model also theorizes that coping involves either primary control (e.g., directly changing a situation (problem solving) or the emotional response to it (emotional expression or emotion regulation) or secondary control (e.g., adapting to a situation) strategies (Connor-Smith et al., 2000).

### **Impact on Depression:**

Depression is a disabling illness which increases the risk of suicide. The Corona Virus Disease 2019 (COVID-19) pandemic has led to a rise in fear, anxiety, stress, and depression among the population: of these, university undergraduates from countries severely affected by COVID-19 are some of the most vulnerable of all, as they face strict lockdown measures and have fewer resources to cope with it. The aim of this study was to analyze the levels of fear of COVID-19, stress, anxiety, and depression during lockdown among undergraduates from Ecuador, and to test these possible predictors of depression using a model taken from our study of the scientific literature

Depression is one of the main factors that generates disability in populations in modern societies (Dong et al., 2020; Nuggerud-Galeas et al., 2020). Having experienced epidemics or natural disasters increases long-term levels of depression in populations (Mak et al., 2009; Lee et al., 2018; Morganstein and Ursano, 2020) and may also increase their future suicide rates (Cheung et al., 2008). Experiencing more upsetting events in life

and finding it difficult to cope with them are also predictors of anxiety, stress, and depression (Zou et al., 2018).

### **Impact on Healthcare Workers**

Particular attention has been paid to the mental health of front line healthcare staff during the pandemic. Overwhelming workloads, high patient mortality, depleted resources, and feeling inadequately supported whilst fearing contagion may increase burnout and psychological de-stress. Research from the SARS (severe acute respiratory syndrome) pandemic found significant levels of psychiatric morbidity among healthcare staff, double the usually found in population studies.

One study of healthcare workers found that over 70% reported psychological distress, 50% reported clinically significant symptoms of depression and 45% reported significant symptoms of anxiety. Several risk factors for psychological distress among healthcare workers includes:

- Being females
- Being a nurse
- Experiencing stigma

Liu et al. (2020b) pointed out that mental health professionals may need to work especially closely with those working in critical care units, to minimize stress levels and reduce the risk of depression, while Kang et al. (2020) noted the positive impact of telephone helplines for healthcare workers to specifically address mental health problems. To date, no literature pertaining to healthcare workers from other countries has been published.

### **Impact on the General Population:**

Given the adverse mental health outcomes that have followed previous epidemics, the specific stressors and the unparalleled magnitude of the COVID-19 health crisis, population-based studies began to emerge early in the pandemic.

One of the first pieces of research into the psychological impact of the disease was a Chinese cross-sectional study that measured PTSD, depression, anxiety, and stress. In the immediate aftermath of the outbreak, more than half of the participants rated the psychological impact of COVID-19 as moderate or severe. One-third reported moderate or severe symptoms of anxiety, 17% reported depressive symptoms and 8% reported moderate to severe levels of stress. The same researchers repeated the surveys in a second study, and although scores on the PTSD measure had reduced, they were still above the clinically significant cut-off for a diagnosis. Levels of stress, anxiety and depression remained the same over the four-week period.

Although the Chinese studies were able to demonstrate the prevalence of mental health symptomology over four weeks, they did not compare these scores to pre-pandemic scores in similar populations.

A large-scale self-report study in the United States, however, which measured the prevalence of psychological distress in adults in April 2020 provided a comparison with scores pre-COVID-19 in 2018. Approximately 14% of respondents reported symptoms of severe psychological distress, an increase of 10% compared to findings in 2018. Symptoms of distress were higher among younger adults, women, and those in the lowest household income bracket.

In the United Kingdom, a longitudinal analysis of adults was measured in three waves across six weeks. Across all three time points, levels of suicidality, depression and anxiety were much higher than established population norms. On average, approximately 1 in 4 adults reached the diagnostic thresholds for depression and anxiety compared to 1 in 20 compared to pre-COVID-19 general population studies. Suicidal ideation was reported by 10% of the sample, compared to pre-COVID rates of 3%. Over time, rates of suicidal ideation increased, anxiety decreased, and depression remained stable.

**Impact on Suicide Tendency and Self Harm:**

The National centre for Suicide Research and Prevention of Mental Ill-health (NASP) is already attempting to increase awareness about the potential increase in suicide and self-harm behavior as a result of the societal impact of the ongoing pandemic ("The Corona Virus," n.d.). Possible potential risk factors such as prolonged periods of social isolation, fear of unemployment, economic loss due to lockdown, death of family members and significant others etc. have been proposed to precipitate self-harm behaviors during this pandemic crisis ("The Corona Virus," n.d.) There have been reports of suicide due to excessive fear of contracting COVID-19 from India as early as 12<sup>th</sup> February, 2020, even when the infection was not spread across the country (Goyal et al., 2020). Further, there have been isolated reports in the newspapers/bulletin of suicide due to alcohol ban during the lockdown period from different parts of India (M.K, 2020; Pathak, 2020). Here we present two different presentations of self-harm attempts related to apprehension of developing COVID-19, who presented to our emergency medical services.

COVID-19 survivors without post-COVID syndrome may also be at elevated suicide risk. Studies of suicidal in COVID-19 survivors are urgently needed and will be a new area of suicide research. An appropriate management of psychiatric, neurological and medical conditions may reduce suicide risk among COVID-19 survivors with or without post-COVID syndrome.

**Conclusion:**

The Covid-19 pandemic has alarming implications for individual and collective health and emotional and social functioning. In addition to providing medical care, already stretched health care providers have an important role in monitoring psycho social needs and delivering psycho social support to their patients, health care providers, and the public-activities that should be integrated into general pandemic health care.

Research evidence of the impact of COVID-19 on suicidal behaviour is accumulating rapidly. This living review provides a regular synthesis of the most up-to-date research evidence to guide public health and clinical policy to mitigate the impact of COVID-19 on suicide risk as the longer-term impacts of the pandemic on suicide risk are researched.

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