Review Article

Coping Strategies for Mental Health in Covid-19 Pandemic

Dr. Parika Tanwar¹, Dr. Vandana¹, Dr. Hitender Gautam², Dr. Amit Sachdeva³

¹JR ³ SR, department of community medicine IGMC Shimla, Himachal, India
²Medical Officer, Himachal Pradesh Health Services

*Corresponding Author

Dr. Hitender Gautam²

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Abstract: The ongoing pandemic of COVID-19 has resulted in significant morbidity and mortality worldwide and has adversely affected the economy and social integrity. The family members and close contacts face psychological problems as they have been traced, isolated or quarantined which makes people anxious and guilty regarding the quarantine and stigma on their family members and friends. While the healthcare sector and government officials from all over the world is focusing on the control of the pandemic adopting various preventive measures, there is little to no attention provided to the mental health status of the isolated, panicked and home bound people. There is an emergent need to understand the mental issues related to COVID-19 and possible measures to cope with the same for their effective management.

Keywords: COVID-19 pandemic, mental health, Coping Strategies

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INTRODUCTION

The ongoing pandemic of COVID-19 has resulted in significant morbidity and mortality worldwide and has adversely affected the economy and social integrity. The number of cases are increasing with 20,162,474 confirmed cases and 417 deaths around the globe. Focus of public health authorities and the mass media is mainly on biological and physical repercussions than on mental health issues. With the growing number of reports on the increasing mental health burden caused by the COVID-19 outbreak various coping strategies are to be sought to combat the mental health concerns.

Why address mental health issues?

In the early days of the COVID-19 outbreak in Mainland China, a survey found that 53.8% of respondents rated the psychological impact of the outbreak as moderate or severe, 16.5% reported moderate to severe depressive symptoms, 28.8% reported moderate to severe anxiety symptoms, 8.1% reported moderate to severe stress levels.

Emerging mental health problems in COVID-19

Differ among various population and are categorised according to-General population-Family & friends of cases, vulnerable population, among cases, among healthcare professionals, among children

GENERAL POPULATION

As the COVID-19 pandemic has been spreading rapidly across the world, the most important mental health issue has raised the level of stress or anxiety expressed in public mental health term (Dong and Bouey 2020). Improper information and wrong information regarding the incubation period of the virus, route of transmission, treatment and safety measures cause fear and anxiety (Li et al. 2020; Ho et al. 2020; Goyal et al. 2020). The curfew and lockdown in state forces residents to stay in home which causes detrimental mental health outcomes like anxiety and insecurity regarding the future (Li et al. 2020). The people also feel boredom, disappointment and irritability under bound state of lock-down (Ho et al. 2020). This can precipitate new mental disorders and exacerbate the previously present disorders (Goyal et al. 2020). The general population can experience fear and anxiety of being sick or dying, helplessness, blame the
people who are already affected and precipitate the mental breakdown. An extensive range of psychiatric disorders can be seen like depressive disorders, anxiety disorders, panic disorder, somatic symptoms, guilt, posttraumatic stress disorder (PTSD), delirium, psychosis and even suicide (Goyal et al. 2020; Yi et al. 2020)

**AMONG COVID-19 CASES**

The suspected and/or confirmed COVID-19 persons largely experience fear regarding the high contagiousness and fatality (Wang et al. 2020a; Li et al. 2020). The quarantined people feel boredom, loneliness, anger, depression, anxiety, denial, despair, insomnia, harmful substance use, self-harm and suicidality (Wang et al. 2020a; Dong and Bouey 2020.) The survivors are the high-risk people to develop a wide range of mental disorders such as depression, anxiety and PTSD (World Health Organization 2020a).

As a continuation of safety behaviours, patients may develop obsessive-compulsive disorder (OCD) (Li et al. 2020). Moreover, physical symptoms of COVID-19 such as fever, hypoxia and cough along with adverse effects of prescribed medications (corticosteroids) may cause more anxiety and mental distress (Wang et al. 2020a). Poor or very poor self-rated health status was significantly associated with a greater psychological impact of the COVID-19 (Liu et al. 2020)

**AMONG FAMILY MEMBERS AND CLOSE CONTACTS**

The family members and close contacts face psychological problems as they have been traced, isolated or quarantined which makes people anxious and guilty regarding the quarantine and stigma on their family members and friends (Wang et al. 2020). Furthermore, they also feel shame, guilt or stigma for those family members who are sick and/or quarantined, and some studies reported PTSD and depression among the family members and close contacts (Goyal et al. 2020). On the other hand, the children who have been isolated or quarantined during the pandemic have higher chances to develop acute stress disorder, adjustment disorder and grief. PTSD was reported among 30% of the children and early loss of or separation from parents during childhood also has long-term adverse effects on mental health, including higher chances of developing mood disorders, psychosis and suicidality (Shah et al. 2020).

**AMONG HEALTHCARE PROFESSIONALS**

In pandemics healthcare services demand increases sharply, and many countries do not have adequate manpower as well as resources to cope with pandemics and in this case it is COVID-19. Therefore, healthcare personnel have to face an increased workload with the fear of being infected. They have been quarantined frequently when they come in contact with COVID-19 case. Increased workload, isolation and discrimination are common which result in physical and mental exhaustion, fear, emotional disturbance and sleep disorders. A recent study involving 1563 health professionals reported that more than half (50.7%) of the participants reported depressive symptoms, 44.7% anxiety and 36.1% sleep disturbance (Ho et al. 2020). Moreover, there are not adequate services to provide counselling and psychiatric screening services for anxiety, depression and suicidality for physicians who have been dealing with infected persons (World Health Organization 2020). It is also meaningful to postulate that many physicians develop PTSD, depression, anxiety and burnout after the cessation of the pandemic (World Health Organization 2020). Along with the physicians, the frontline healthcare providers (FHCP) can develop mental disorders such as depression, anxiety and PTSD (Li et al. 2020). The war between professionalism and personal fear of getting infected causes burnouts and physical and mental symptoms (Goyal et al. 2020)

**AMONG SPECIAL POPULATION (OLD AGE AND CO-MORBIDITIES)**

As this pandemic has been spreading rapidly across the world, it is causing fear, worry and concern among older adults and people with underlying comorbid disorders. It has a potential impact on the existing diseases, and the affected persons may lead to psychiatric symptoms which possibly related to the interplay of mental disorders and immunity (World Health Organization 2020). Patients with chronic physical illness (e.g., chronic renal failure, diabetes mellitus and cardio-cerebrovascular diseases) also need regular follow-up in hospitals which become problematic and increases chances of worsening of underlying disease.

**Coping with Mental Health Issues during COVID-19 Pandemic**

While the healthcare sector and government officials from all over the world is focusing on the control of the pandemic adopting various preventive measures, there is little to no attention provided to the mental health status of the isolated, panicked and home bound people. Significant decrease in regular social activities and staying indoors will have detrimental impact on emotional well-being. To avoid a distressing situation, individuals should not watch too much of pandemic related news, they should maintain a healthy relationship, get in touch with friends and family members on a regular basis by using social media and start thinking optimistically (CDC 2020). If coronavirus anxiety shows up, try to share the fear with others, which will calm the fear, and also try to increase self-awareness by getting adequate sleep, exercising
regularly and employing different relaxation techniques (Kecmanovic 2020).
People can cope with the mental health challenges by adopting various measures.

**COPING STRATEGIES**

**Problem-focused ways**
- Following expert advice
- Gathering information
- Taking direct action
- Getting organised

**Emotion-focused ways**
- Distracting oneself by pleasurable activities
- Talking to loved ones
- Relaxation
- Mindfulness
- Obtaining emotional support

**Recommendations for effective coping with mental health challenges**
1. Awareness about the COVID-19 and regular updates about appropriate preventive measures from notified and trust worthy sites.
2. Developing readiness to meet the challenges like scarcity of resources, disasters etc.
3. Not paying heed to fake news and social media posts that spreads panic.
4. Organising your day and regular scheduling of the daily chores.
5. Inclusion of indoor recreational activities and relaxation exercises to daily practice.
6. Approaching and not avoiding healthcare system, if any symptoms of mental distress develop.
7. Positive thinking and installation of hope

**CONCLUSIONS**
This pandemic of COVID-19 carries significant mental health hazards. There is a lack of evidence addressing the mental health issues mentioned above during the COVID-19 pandemic. As the disease statistics are reaching new peaks every day, isolation and lockdown states are getting prolonged, recreational opportunities for people are becoming fewer and the financial crisis is building in, mental health issues are likely to grow at a faster rate. There is a emergent need to understand the mental issues related to COVID-19 and possible measures to cope with the same for their effective management.

**WAY FORWARD**
COVID-19 pandemic related mental health issues can be short-term or long-term. Existing literature addresses the immediate mental health concerns only. It is important to see the long-term mental health sequels of COVID-19 infection. Earlier pieces of evidence suggest that maternal exposure to influenza infection during the epidemic of influenza in Europe increased the risk of schizophrenia in offspring, possibly by altering the neurodevelopmental process (Mednick et al. 1988; Murray et al. 1992) . We don’t know anything is about the after-effects of COVID-19 infection; therefore, there is a need for extensive research in this novel disease. It is also required to understand the mental health needs of patients with COVID-19, close contacts, health professionals dealing with COVID-19 patients and the general population. As there is raising concern about contracting infection during direct contact with patients, online video consultation can be a potential mode of delivering therapy to people with mental distress during this fast spreading pandemic of COVID-19 (Greenhalgh et al. 2020).

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