

2020-21

ISSN 2277 - 5730
AN INTERNATIONAL MULTIDISCIPLINARY
QUARTERLY RESEARCH JOURNAL

AJANTA

Volume - X

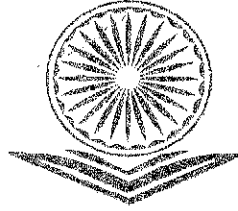
Issue - I

January - March - 2021

ENGLISH PART - I

Peer Reviewed Refereed
and UGC Listed Journal

Journal No. 40776



ज्ञान-विज्ञान विमुक्तये

IMPACT FACTOR / INDEXING
2019 - 6.399
www.sjifactor.com

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Ajanta Prakashan
Aurangabad. (M.S.)

25. An Outbreak of Covid 19 Pandemic and Mental Health : Vulnerability of Women

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Abstract

The Covid 19 outbreak is the most severe pandemic that occurred since the last century. This highly infectious disease spread across the world in a short span of time infecting millions of people, impacted many aspects of human life and posed an unprecedented challenge to our health systems, socio political organisations and infrastructure of most countries. This pandemic affected physical and mental health adversely. The consequences of infections by a new virus, potentially lethal threatens patients as well as the near ones badly and hence makes permanent like impact like trauma turns into the psychological illness and hence overall mental health. An inevitable stress associated due to covid 19 resulted psychiatric illness and related psychological disorders. The studies revealed that women may be at higher risk of psychiatric symptoms during pandemic. This article reviews the intensity of the outbreak of the pandemic, risk factors for the development of psychological symptoms during covid 19.

Key words : Covid 19, Psychiatric Illness, Psychological Disorders, Stress.

1. Introduction

Since 15 months the corona virus pandemic is a global threat in the 21st century¹, especially due to the second wave of the pandemic in the last three months there has been a severe outbreak and shown significant rise of affected and confirmed cases of infected people in india (>30% of world population) and the rest of the world². The administration including normal health services as well as mental health has been severely affected. Several research reports have indicated the poor conditions of mental health among all the age group on the onset of the covid 19 pandemic, Soon after WHO declared novel corona virus disease a pandemic on 11 March 2020, the world responded in a traumatic way and an administration of the countries had to take an immediate actions and scale up responses to disease which includes treat, detect and reduce transmission. India too declared its lockdown in an entire nation for 21 days, later increased further for few more days has invited many challenges such as socioeconomic inequalities and health disparities, etc. Though the lockdown time has provided the government

machineries to organise its preparedness and at the same time the country combats with the unique pre-existing challenges³. since the beginning of the Covid-19 pandemic a research survey by the Indian Psychiatry Society observed that 20% and more people suffered from poor mental health. An evidence indicates that during the Covid-19 pandemic, women are relatively at higher levels of psychological stress among the urban poor⁴ and households with migrant workers in rural areas – who were acutely affected by the lockdown restrictions – show higher incidence of mental health issues relative to those without migrants⁵. Today, the primary concern for entire human race is to how to survive in the pandemic.

In the history the large scale disasters had indicated significant negative impact on individuals ranging from depression, post-traumatic stress disorder, substance use disorder, behavioural disorders, domestic violence and child abuse⁶. India's coronavirus crisis has pushed millions into forced isolation and unemployment. Health experts warn that anxiety, depression and suicide are on the rise and that mental health could be the country's next crisis. The present COVID-19 pandemic has created similar situations where the people, directly or indirectly have been caught by the risk of anxiety and depression, loneliness and domestic violence; since schools are closed, possibility of an epidemic of child abuse. Though the outcome of the possible mental illness are impossible to predict under the changed circumstances, but we can definitely work upon the history from the past pandemics, the Spanish flu, the AIDS pandemic and more.

This article reviews the impact of the onset of corona virus, an outbreak of its second wave as well as its effect on the mental health of women.

2. An outbreak of Covid 19

World Health Organization declared the novel coronavirus disease 2019 (COVID-19) outbreak a global pandemic on March 11, 2020. Social distancing between people are presently the only means to slow the spread of the disease, that resulted into the declaration of lockdown. The current statistics declared by WHO says Coronavirus has spread to 192 countries. The Number of confirmed cases worldwide are 14,47,41,684 and 30,71,833 have died; 5,85,42,843 are active cases and 8,31,27,008 have recovered as on April 23, 2021 at 4:00 am. whereas India reported its first COVID-19 case on 30 January 2020 from Kerala and ever since the numbers have increased each day. in India, there are 1,62,63,695 confirmed cases including 1,86,920 deaths where as the total active cases are 24,28,616 and 1,36,48,159 have recovered as on April 23, 2021 at 2:30 am.

Sr No	Wide Spread	Confirmed Cases	Active	Recovered	Deaths
01	World	14,47,41,684	5,85,42,843	8,31,27,008	30,71,833
02	India	1,62,63,695	24,28,616	1,36,48,159	1,86,920
03	Maharashtra	40,94,840	7,01,614	33,30,747	62,479

Figure 1. The widespread Corona virus Statistics .

(Source : WHO Dashboard as on April 23, 2021 at 2:30 am

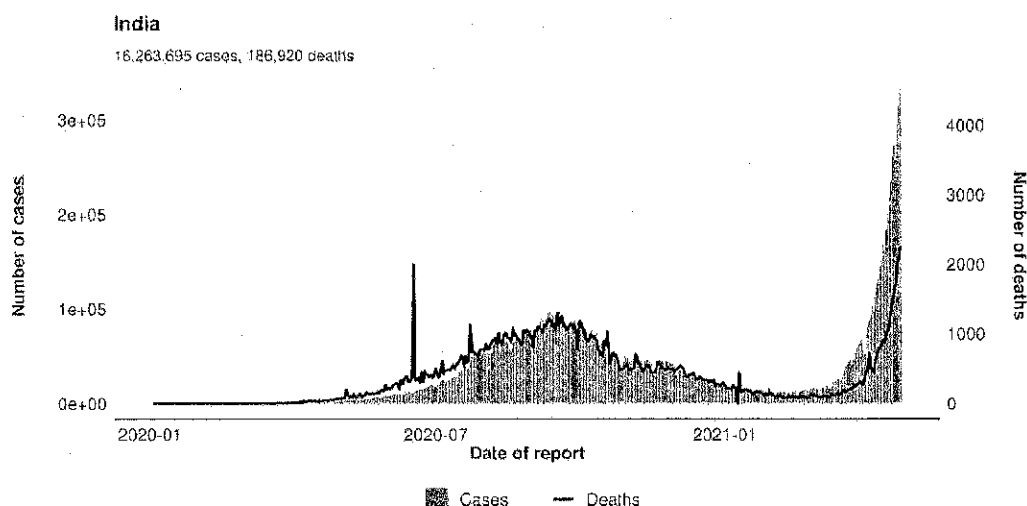


Figure 2. The widespread Corona virus Statistics since 2020-21

(Source : WHO Dashboard as on April 23, 2021 at 2:30 am

4. Risk Factors for Mental Health during Covid 19.

Covid 19 pandemic has not been restricted to only healthcare needs but also on numerous spheres of human life. An india being a diversified coutry having its large proportion of population live in diverse and vulnerable life situations are affected by the lockdown in the country and are showing signs and symptoms of mental distress and emotional problems. An outcome of interaction of both proximal and distal factors are related to the risk to mental health. The proximal factors act directly to cause the disease, whereas the distal factor causes indirectly via many other causes. The situation caused due to the current COVID-19 is giving a strain on the affected person and their families due to fear of infection, social isolation, financial crisis or factors illustrated below. Beyond these few protective factors that help in overriding these stressors may are helpful in maintaining good mental health amongst families and communities.

A study revealed that in the year 2017, 14% of india’s population suffered from mental health including 45.7 million under depressive disorders and 49 million suffer from anxiety disorders. The Covid 19 pandemic has further enhanced this mental crisis, with reports from

across the world suggesting that the virus and associated lockdowns were having a significant impact on the population particularly women and children. The prevalence of depression and anxiety disorders as well as eating disorders was found to be significantly higher among women⁶.

The previous studies at the time of SARS 2001 epidemic show societal reflections and reactions on the account of sociocultural factors that play an important role in shaping an individual. It has been reported that fear resulted from the unknown cause of the disease and a possible fatal outcome. A greater signs of distress shown during this crisis of covid 19 is an overwhelmed response of the people affected by this novel coronavirus. Due to lockdown effect, an economic recession in the formal and nonformal sectors gave birth to unemployment, payment cut and salary deduction created the varied psychosocial stressors. Moreover, an overwhelming reaction of the social media and overreactive behaviour of people has brought an invitation to the mental illnesses among the weaker section of the society. The news reporters onsite reports and ground view gives birth to the stigma and discrimination among the health workers, families, patients as well as quarantined families. Overdose of information from all sources has created a positive correlation between the sociocultural aspects, the spread disease and psychological stressors. Even the incidents of domestic violence and child abuse have also been reported. Confinement at home due to compulsory lockdown is not a blessing for many, especially those who have been in abusive relationships. The lockdown has aggravated the situation for victims of domestic violence according to the statistics release by the National Commission of Women. The drastic change happened due to the restrictions on economic activities have resulted in enormous economic losses and consequent loss of income and livelihood.

Risk Factors of Mental Health During Covid 19				
SR NO	Proximal Facotrs	Protective Factors	Distal Factors	Outcomes
1	Family Issues – Violence and Abuse	Positive Thinking	Fear and Infection	Poor Mental Health
2	Stigma	Spirituality	Work Pressure	
3	Any Health Precondition	Family Support	Information Overload	Good Mental Health
4	Economic Crisis	Community Support	Lockdown and Social Isolation	

Thus, mental health of the population has become a public health concern and should be health concern.^{7,8} It is estimated that 35% of women around the world including India suffer

from depression during pregnancy and postpartum. Pregnant women and new mothers are at an enhanced risk of mental health problems. Covid-19 pandemic has affected women more profoundly than men in several areas, both at workplace (especially in the health and social sector), and at home with an increased workload due to lockdown and quarantine measures. Worldwide, 70 percent of the health workforce is made up of women who are often frontline health workers (nurses, midwives and community health workers). Similarly, most of health facility service-staff (cleaners, laundry, catering) is made up of women. In the US, women hold 78 percent of all hospital jobs, 70 percent of pharmacy jobs and 51 percent of grocery store roles. Consequently, women are more likely to be exposed to the virus. In Italy and Spain, 66 and 72% of health workers infected were female as compared with 34 and 28% of males respectively^{9,10,11}.

5. Conclusion

The multidimensional and complex problem of mental health of women is different from men. However, women have been affected very differently (if not more severely) around the world the reason of which is more than mere biological. The holistic understanding of the socio cultural and environmental factors faced by women is to be addressed and well explained. The mental health of women have been hit badly by the current pandemic situation and of course the social situations like lockdown, isolation and quarantine affecting their mental health even worse.

Some of the reasons for this could be following

- multitasking & Multiple roles of women in life and family.
- Increased home stay of entire family putting extra burden of care on the women in house
- Limited support for the poor families hit the women first making the health worse than before.
- Due to limited resources women are more likely to loose job or financial independence more likely to loose their school or education as a whole when more support needed in family, or education is only technology based.

Women have special caliber and are the backbone of our society. they work persistently and managing quality in different sectors, all simultaneously. However, the women have been discriminated continuously since long. An attention is required to look after their physical and mental health. The socio political and economic issues have deeply affected the mental health of women. In order to deal with these long discussed issues of women, an attention is brought on this platform to do a concrete policy level decision so as to study and address

critically multiple roles of women in life and family as well as their special caliber and multidimensional and complex problem.

6. References

1. Li Z, Ge J, Yang M, Feng J, Qiao M, Jiang R, et al. Vicarious traumatization in the general public, members, and non-members of medical teams aiding in COVID-19 control. *Brain Behav Immun* 2020;88:916-9.
2. Jin Y, Yang H, Ji W, Wu W, Chen S, Zhang W, et al. Virology, epidemiology, pathogenesis, and control of COVID-19. *Viruses* 2020;12(4):372, doi:http://dx.doi.org/10.3390/v12040372
3. Zaigham M, Andersson O. Maternal and perinatal outcomes with COVID-19: a systematic review of 108 pregnancies. *Acta Obstet Gynecol Scand.* (2020) 99:823–9. doi: 10.1111/aogs.13867.
4. Hantoushzadeh S, Shamshirsaz AA, Aleyasin A, SeferovicMD, Aski SK, Arian SE, et al. Maternal death due to COVID-19. *Am. J Obstet Gynecol.* (2020) 223:109. doi: 10.1016/j.ajog.2020.04.030
5. Capobianco G, Saderib L, Alibertic S, Mondonid M, Pianab A, Dessolea F, et al. COVID-19 in pregnant women: a systematic review and meta-analysis. *Eur J Obstetr Gynecol Reprod Biol.* (2020) 252:543–58. doi: 10.1016/j.ejogrb.2020.07.006
6. Shankar Das,⁷ Mental Health and Psychosocial, Aspects of COVID-19 in India: The Challenges and Responses, *Journal of Health Management* 22(2) 197–205, 2020 © 2020 Indian Institute of Health Management Research DOI: 10.1177/0972063420935544, 198-205.
7. Roy Deblina, Tripathy Sarvodaya, Kar Sujita Kumar, Sharma Nivedita, Verma Sudhir Kumar, Kaushal Vikas. Study of knowledge, attitude, anxiety & perceived mental healthcare need in Indian population during COVID-19 pandemic. *Asian J Psychiatr* 2020;102083. <https://doi.org/10.1016/j.ajp.2020.102083>.
8. Rajkumar RP. COVID-19 and mental health: a review of the existing literature. *Asian J Psychiatr* 2020 Apr 10:102066. <https://doi.org/10.1016/j.ajp.2020.102066>.