

## Two Tents for Corona Virus – Mental Health Perspective

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COVID-19, Lockdown, Social distancing, Mental health.

### Introduction

COVID-19 pandemic has affected each and every one of us in one form or the other. Days have turned into weeks and then months with this lockdown and social distancing. COVID-19 has claimed thousands of lives. As of May 24th, 2020, there were about 1.62 million cases with 97,150 deaths and 361,239 recovered cases across the United States [1], and 5.2 million cases, with 337,736 deaths reported to WHO globally [2]. This virus has not only claimed thousands of lives but has put a lot of financial hardships on families. The financial markets have witnessed a historical crash since the pandemic. Since the middle of March 2020, jobless claims in America have totaled around 38.6 million, which is roughly one out of every four people who were working in February, before the pandemic hit [3]. The unemployment rate in April, 2020 was 14.7% which is the highest since the tail end of the Great Depression. Millions of additional people have joined the ranks of the unemployed since then [3].

### Impending mental health crisis

With the loss of human lives, unparalleled physical, emotional, and financial suffering taking up most of our attention, we are yet to pay attention to the inevitable crisis looming on the horizon. According to a news report, about one-third of the world population was in some form of restrictions. With an estimated 2.6 billion people in quarantine [4], we are bound to see its psychological effects. A recent review published in the Lancet suggested that the psychological impact of quarantine are usually wide-ranging, substantial, and can be long-lasting [5]. This review looked at the psychological impact of quarantine, and most studies reported adverse psychological effects, including post-traumatic stress symptoms, confusion, and anger. Stressors included

longer quarantine duration, infection fears, frustration, boredom, inadequate supplies, inadequate information, financial loss, and stigma. It is very clear that we have not “hit the peak” or “flattened the curve” for mental health issues. There is an overwhelming feeling that this pandemic and lockdown will lead to a deep and long-lasting psychological impact on human lives. This growing anxiety and fear among the general public are also echoed by various media outlets [6]. A report from Forbes indicated that the pandemic affected the mental health need of women more than men [7]. A poll conducted by the Kaiser Family Foundation in March 2020 indicated a widening of mental health needs between men and women. In their poll, 53% in the late March 2020 of women (36% in early March 2020) vs. 37% of men in the late March 2020 (27% in early March 2020) reported a negative impact of the COVID-19 pandemic in their lives and the impact is more among those who had minors in their families [8]. There is also a growing concern that this pandemic can cause an increase in domestic violence and child abuse, as was witnessed during the Ebola pandemic (2013-2015) [9,10]. We have already started noticing trends showing an increase in the domestic violence during COVID-19 pandemic [11]. Some areas in China reported a tripling of the reported rate of domestic violence in February from last year [12]. A more grim picture comes from studies conducted in the post-2007 recession period which indicated that 1% rise in the unemployment rate is associated with a 0.99% increase in suicide rate in the United States [13], this is higher than 0.79% [14] increase noted in from European countries. With unemployment rates being historically high [15], it is predicting a terrifying future.

### Impact on minors

One of the silent sufferers in this chaos are the kids, adolescents, and young adults who had to adapt very quickly to this fast-changing pandemic. Unpublished data from a preliminary study in Shaanxi Province showed that the most common emotional

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reactions of children during this pandemic are clinginess, distraction, irritability, and fear [16].

Another study [17] showed that approximately 30% of the isolated or quarantined children met the criteria of post-traumatic stress disorder. UNICEF raised concern that hundreds of millions of children across the globe will likely face significant mistreatment, gender-based violence, exploitation, social exclusion, and separation from caregivers [18] due to this pandemic. According to the United Nation's policy brief, children are going to be affected worse, especially that of poorer countries and poorer communities. The United Nation's estimate, in the long term, this global financial loss can lead to an additional 42-66 million children to live in an extreme financial disadvantageous situation in the coming years [19]. It is also well known that economic hardships are associated with increased mental health problems for youth [20]. It is also feared that the psychological effects of these uncertain times are likely to last a lifetime for young adults.

A recently published study [21], looked at cohorts coming of age during the early 1980s recession, showed that a temporarily higher state unemployment rate at the age of labor market entry led to an increase in mortality that appears in the late thirties and increases until age 50. A higher mortality rate is driven by a significant increase in both disease-related and "external" causes, that include liver disease, drug poisoning, and lung cancer. They also found a major impact on the socioeconomic parameters in middle age, including an increase in the divorce rate, a decline in marriage rates, and a decline in family size. It was also noted that while the overall mortality was similar by race, but an increase in the measurement of "deaths of despair" was common among white, non-Hispanic men. The white men also tend to experience a decline in earnings in midlife and tend to experience more considerable reductions in family stability than their non-white counterparts [21]. Similarly, in another study, a higher unemployment rate from age 21 to 25 was associated with an elevated risk of poor mental health in the middle age [22].

### **Is a mental health crisis inevitable?**

American Psychiatric Society and the American Academy of Child and Adolescent psychiatry have been predicting a mental health crisis. We feel that this impending psychiatric crisis will hit children and young adults the hardest. As of May 24th, 2020, 1.2 billion 'learners', that amounts to 68.5% of the total student population worldwide, have been affected with 153 countrywide closures in [23]. Postponement and cancellation of the admissions to the Universities and schools in several countries are leading to a significant amount of uncertainty among students [12]. As a consequence, the school going children and young adults are facing complex issues compounding their mental health needs.

First, an increase in the incidence of mental health issues and worsening of previously diagnosed psychiatric conditions have been noticed among children [24]. In a survey in the UK that included more than two thousand youths up to age 25 with a history of mental health need, approximately one-third of the

respondent reported much worsening of their mental health, almost half reported "a bit worsening" of their mental health and around 26% had no access to mental health support [25]. The disruption of routine can also lead to worsening of symptoms of children with special-need such as autism spectrum disorder [12]. Parents have also reported a significant worsening of ADHD symptoms along with negative mood among their children [26] during the current pandemic. According to the American Association of Child and Adolescent Psychiatry, another big issue is that access to mental health is already worsening [27]. Around 45 % of adolescents lack access to mental health resources under "normal" circumstances [28]. Even a higher proportion of children who are in desperate need of mental health services are being deprived of the help they deserve due to the closure of the schools. Slightly more than a third of all adolescents utilized mental health services only in an educational setting, and overall, 58% of all adolescents received services accessed them in either alone or in combination with a noneducational setting [29]. It is estimated that school closure led to a lack of access to mental health treatment to approximately 3.2 million adolescents in the United States who used to receive mental health services in an educational setting [30]. A significantly higher proportion of minority children or young adults than of their White counterparts used public mental health services [31]. These adolescents most likely will receive mental health services disproportionately and exclusively from their school settings [29] and will be affected the most.

### **Preparedness is the key**

As with all traumatic events, this pandemic is likely to leave a collective physical and psychological damage that will be felt now and later. Although people may find new coping skills once the pandemic is over, one of the major concerns is the effect of the trauma leading to the development of post-traumatic stress disorder [32]. Similar to physical damage, this psychological damage also requires urgent care. There is an urgent need for rapid intervention by psychiatrists, psychologists, and other mental health providers to ensure adequate immediate and post-immediate support for victims to avoid the development of post-traumatic stress disorder and other mental health issues. Death of the loved ones can be catastrophic to the rest of the family members and traumatic to the survivors as well.

Frontline healthcare workers also need special attention and mental health care as they get affected by the overwhelming stress, burn out, and fatigue. The support from mental health providers should be aimed at attenuating the immediate psychological impact of the events that are unfolding and also to provide post-immediate care to lay the groundwork for later therapeutic care. Problems may appear in the days, weeks, months, or even years following the trauma. The trauma can be manifested in the form of irritability, insomnia, anguish, feelings of uneasiness or insecurity, depression, distressing thoughts, images making family and work-life difficult and can affect both child and adolescent mental health. Similar to any other disaster management, planning, and preparedness is the key [33]. We need to enhance the coverage of telepsychiatry and work with the insurance companies so that the services are covered

at least for several months post-pandemic. It is equally essential to increase the availability of grants in mental health treatment and research. Fortunately, the world is building tents to treat patients diagnosed with this deadly and highly contagious disease. However, the question remains, are we building another “mental health tent” that we are going to need in the next few months?

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