

COVID 19 AND THE PSYCHOLOGICAL DILEMMA

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ATHENA. A

IFIM College, Bangalore

Dr.NAGARATHNA M L

Assistant Professor, IFIM College, Bangalore

Abstract

First identified in December 2019 in Wuhan, China came to a notoriously infectious disease caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2).even though the disease originated in a rural province, the disease gained global attention by spreading at a lightning speed. By July 2020 around 13,042,340 worldwide are tested positive and 7,588,510 are recovered. On the disturbing side, the number of deaths also increased rapidly. Even though continuous research and rapid medical decisions are being taken, containing the spread of the disease still appears to be farfetched. The unpreparedness of the nations, even with the advanced medical sciences and resources, has failed to address not only the physical health scenario but also the aspects of mental health amongst the public during this global pandemic. As all efforts are still focused on a complete understanding of the epidemiology, symptoms, patterns, and mode of transmission, and management of the disease it fails to provide accurate information to the general public. This leads to various levels of psychological dilemmas and outbreaks. The people who are fighting the disease upfront like the patients and healthcare workers also experience psychological turbulence in the behavioral aspect. This paper focuses on the current psychological scenarios faced by aid workers and commoners and how to

overcome them.

Keywords: Pandemic, Dilemma, Psychology, Global, Management

Introduction

World health organization (WHO) estimated in 2005 that three pandemic influenza emergencies on an enormous scale will strike the world in 100 years. When the lifestyle of the human race and the environmental components changed rapidly, new pandemics emerged like the Swine flu (H1N1) pandemic in 2009 and the H3N2 pandemic in 1968. Even though modern medicines are in their advanced state, the outbreak of a new epidemic involving microorganisms that are never happened before makes it impossible to find a cure or a preventive measure immediately is subjective. Hence controlling the spread becomes impossible as human contacts become the main source.

In the case of novel coronavirus (COVID-19), the outbreak that started in a village market in China turned into a global pandemic as it infected more than 13,042,340(July) people in over 150countries. The COVID-19 outbreak was declared a national emergency in almost all the countries turned into complete shutdown mode. Even when the number of survivors is increasing,

the death rate is also taking a huge leap.

When actions are at a slow pace and proper equipment and methods to control is farfetched, people get into a panic mode and this affects the behavioral patterns of individuals. On top of that quarantine mode of living will be forced upon the public for their safety. But the reaction towards this mode of survival may adversely affect normal behavioral patterns as the scenario extends to a longer period as they go through stress and boredom for a long period. Socio-economic scenarios during the time of this pandemic are also creating fear and stress in people like the job security and the state of the economy is facing a downfall.

Objectives of the study

1. Analysis of the current scenario in light of past pandemics based on the behavioral changes of people.
2. Understanding the mental health of patients, aid workers, and common people during the pandemic.
2. Measurements and sources of awareness chosen by the authorities and individuals to overcome the behavioral imbalance and social stigma.

Literature Review:

A pandemic or epidemic can be referred to as the widespread of a dangerous infectious disease. Throughout history, humankind has faced multiple accounts of outbreaks from the great plague of Britain in 1665 to the most severe H1N1 influenza pandemic of history in 1918, from the 1957 H2N2 pandemic to the current COVID 19. All these horrific outbreaks created images of fear and chaos which lead to a major social breakdown.

Novel coronavirus (COVID-19) outbreak that started in a Wuhan province, China became a global epidemic as it infected more than 5 million people within a month. The outbreak was so fast-spreading and borderline deadly that almost all the countries turned into complete shutdown mode very quickly. The scenario is still uncontrollable as the number of survivors is still increasing and the death rate is also taking a huge leap. Even though scientists and medical professionals are working hard to contain the spread and to find a cure, the unpreparedness of the world to face a pandemic of an enormous scale and fast-spreading rate makes it almost impossible to bring it under control.

Pandemics are not only a medical dilemma that outrides the balance of the human body but also a confusing time for personal and professional lives with severe impact and affects people and societies at different levels. Strategies to contain the disease from spreading involves isolation and physical distancing which can alter or put an impact on the mental health aspects of an individual or a group of people.

History of the struggle:

The linkage between the outbreak of infectious pandemic and mental disorders can be traced back to the early 17th century when the great plague hit the streets of Britain in 1665. During the period May to August of 1665 around people died from the rural region of Great Britain .at the time fear of death alongside poverty and lack of medical assistance, remaining people suffered from depression, anxiety with the development of phobias. Symptoms surfaced in a large portion of the

population as the people started losing the sources for basic needs like food and clean water

.downfall of the economy created a panic situation around the world. During the most devastating pandemic of 1918 caused by an H1N1 virus with avian gene origin, at least 50 million people lost their lives within a year. Neither vaccine nor antibiotics were invented at the time to protect against the influenza infection. Hence control efforts were implemented like isolation, quarantine, education on personal hygiene, use of disinfectants, and limiting public gatherings. People who were in quarantine reportedly experienced boredom, severe anxiety over the fear of having the disease which later evolved into panic attacks and symptoms of delirium alongside borderline PTSD.

In 2005 when severe acute respiratory syndrome (SARS) outbreak happened, the psychological fear became more fearful than the intensity of the disease itself. During the pandemic reports observed that around one-third of the population who were unaffected became hyper-vigilant in the forms of sympathetic arousal, insomnia, and anxiety. The survivors of the pandemic had to go through the feeling of being rejected around other people and this created a foundation for PTSD. Health care workers and first responders were also affected by the epidemic as overwork and exposure created psychological breakdowns on a higher rate. Zika pandemic and Ebola crisis also created similar situations on a higher intensity scale as factors like poverty and lack of information also came into the picture. Neuropsychiatric aspects of these disorders like hemorrhage and other unspecific symptoms also created multiple loopholes for disorders like OCD and schizophrenia.

COVID 19 has also created similar cases of mental health issues on a larger scale because of its intensity and rate of spread in a small amount of time. At the time of modern technologies and fast inventions, failing to create a faster cure makes people anxious and worried. As the number of cases is rising day by day the workload and exposure of healthcare workers are increasing which makes them mentally vulnerable and exhausted. Quarantine mode of living for a long period creates behavioral changes in individuals as they become bored and angry from doing nothing of their normal routine. While a fraction of the world is still working on the scientific aspects of this outbreak, healthcare workers and the general public are dealing with this unclear situation based on very limited information. This dilemma of a situation has already created a large scale of uncertainty in the lives of people, which requires systematic research to identify the impact on mental health based on the learning of past scenarios of similar outbreaks. This subject matter is extremely relevant yet being ignored by health authorities like WHO and national health authorities of countries.

Patients of covid 19

As COVID-19 identified as a new disease; the vague understanding of its origin and spread will establish cognitive distress, anxiety, confusion, and fear in the public which can create harmful stereotypes. This fear will become anger in some people and the mentality towards a person who is infected with the disease alters. Due to this rising stigma affected, individuals will tend to hide their symptoms to avoid discrimination or hatred, which may stop them from seeking immediate healthcare intervention. People who are recovered from the illness will also feel insecure about their current status in the society which will lead to the inability to concentrate, lack of sleep, unhappiness, extreme anxiety, and depression which may evolve into PTSD. Patients with low immunity or any form of the immune disorder will experience psychological trauma as it is known

from the death charts that they are more vulnerable to extreme conditions of the pandemic which may end up in the death of the individual. Death of a patient in isolation will affect the other patients with the same medical conditions mentally as they experience a

downfall in their confidence levels. Family members of those who are suffering and passed away suffer long-term internal anguish which creates a mental and emotional “iceberg effect.”.

Mental health aspects of quarantine life

The implementation of home quarantine is effective to control the pandemic but it becomes the primary factor of developing brief/acute to post-traumatic stress disorder (PTSD) as they display increased sleep and numbness. When the period of isolation increases with additional strict rules, the tendency to deny the requirements becomes a norm for people struggling with an inactive mindset. Extroverts will find this scenario extremely resilient as they are usually comfortable around other people. A sense of loneliness that may result in depression can occur in this case.

In some cases, the anger and frustration of isolation will lead to the assault of partners or self-harm. Recent reports bring out the fact that disturbing amounts of domestic and juvenile abuse during the quarantine which may be the after-effects of a mental breakdown in some cases.

Mental disorders or the symptoms of a mental breakdown in people who are quarantined can be the outcome of matters listed below;

- Low or lack of direct social and emotional support during a bad time.
- Living in a high-risk zone or red zone.

- Lack of knowledge and uncertainty about the disease.

- Being in the ‘risk category’ (elderly and people with other health conditions).
- Personally knowing someone who is a patient.
- Frequent changes in control procedures and public health recommendations.
- Lack of visits from family.

The financial situation of a person is also creating a dilemma or a trigger for mental issues. Long term lockdown halt small scale businesses and jobs like helpers and drivers without any source of financial security. This will create a sense of fear followed by depression and suicidal thoughts for some people. Individuals who are in lockdown far from their family are also likely to survive anxiety, fear, and depression. Healthcare workers are considered as the warriors in the upfront to fight a pandemic. Their dedication and hard work bring relief to those who are suffering. However, epidemics create serious moral stress among these workers as they are also humans who have the desire to have a safe life for them and their families. The total number of infected health personnel with COVID 19 is over 22,000 and around 50 workers are dead. The main dilemma faced by health care workers during an outbreak is the moral injury that can occur in the work environment.

The intensity of the disease is something that they are unaware of in the beginning. Hence being exposed to a trauma that they are not prepared for can create psychological disturbances like anxiety. The overwork in a highly controlled environment can initiate disorders like PTSD, burnout, anxiety, and depression even after the pandemic becomes controllable.

Solutions

Systematic and well-established solutions are required to overcome the mental health dilemma during the pandemic on different levels.

1. For patients who are affected by the disease,

a psychiatric treatment team including psychologists nursing staff, and social worker should be available to establish mental health support at a required distance in every facility.

1. Virtual mental health consultation through videoconferencing psychotherapy sessions will help people with anxiety and mood disorders.
2. Evidence-based, therapist-guided internet interventions are also helpful.
3. Helping to restore the affected population's basic services and security from a safe distance rather than avoiding that individual will help them to recover from the psychological dilemma.
4. Strengthening family and community networks using modern channels of communication (through phone calls and video conferences.)
5. Providing specialized mental health intervention for severely affected survivors to help them cop up (based on clinical training and following guidelines of emergency response).
6. Establishment of help centers and numbers to contact.

Summary

COVID 19 pandemic is one of the worst health dilemmas faced by the human race. Without a proper introduction and cure, people are still fighting to eradicate the illness without considering their safety and the rest of the world is adjusting to a new lifestyle to stop the spread. Along with the physical deterioration, the pandemic can take a toll on the mental health aspect of patients, health workers, and common people through fear, anxiety, and other mental health problems. With systematic solutions like virtual intervention and another form of bits of help, it will be possible to stop the mental aftereffects of a tragedy to start a new life over again.

References

1. Wind, T. R., Rijkeboer, M., Andersson, G., & Riper, H. (2020). *The COVID-19 pandemic: The "black swan" for mental health care and a turning point for e-health. Internet Interventions, 100317. DOI:10.1016/j.invent.2020.100317.*

2. Perrin PC, McCabe OL, Everly, Jr. GS, Links JM: *Preparing for an influenza pandemic: Mental health considerations. Prehospital Disaster Med* 2009;24(3):223-230.
3. Shah K, Kamrai D, Mekala H, et al. (March 25, 2020) *Focus on Mental Health During the Coronavirus (COVID-19) Pandemic: Applying Learnings from the Past Outbreaks. Cureus* 12(3): e7405. DOI:10.7759/cureus.7405.
4. Tucci, V., Moukaddam, N., Meadows, J., Shah, S., Galwankar, S. C., & Kapur, G. B. (2017). *The Forgotten Plague: Psychiatric Manifestations of Ebola, Zika, and Emerging Infectious Diseases. Journal of global infectious diseases*, 9(4), 151–156. https://doi.org/10.4103/jgid.jgid_66_17.
5. Moghanibashi-Mansourieh A. (2020). *Assessing the anxiety level of the Iranian general population during the COVID-19 outbreak. Asian Journal of Psychiatry*, 51, 102076. <https://doi.org/10.1016/j.ajp.2020.102076>