Online group cognitive behavioral therapy for panic buying: Understanding the usefulness in COVID-19 context

Sir,

Cognitive behavioral therapy (CBT) is a specialized and structured form of psychotherapy for various psychiatric disorders. It is often problem focused, time bound and is well accepted by the mental health professionals. CBT can be delivered to the client in conventional therapeutic settings (face-to-face interaction) as well as through teleconsultation/telepsychiatry (online CBT). Similarly, it can be carried out through individual sessions or group sessions. The CBT targets erroneous thinking (cognition) and dysfunctional behaviors. It allows the client to understand the psychodynamics behind the distressing experience. It also enables the client to identify the potential domains of intervention. The classical five-area model of CBT explains how an erroneous thought in a particular situation (context) is responsible for distressing emotions, unacceptable physical sensations, and maladaptive

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behavior. It also helps in convincing the client that any change in the cognition or behavior may result in resolution of the negative experiences.

During this current COVID-19 pandemic, there have been reports of panic buying, globally.\(^{[4-6]}\) Although panic buying is not considered as a disorder, it caused significant disruption of social integrity and produced chaos. The explanatory models that describe panic buying highlight the underlying cognitive distortions and maladaptive behaviors,\(^{[6]}\) which need to be tested empirically.

Although panic buying behavior was reported previously, it comes into the focus during this COVID-19 pandemic again. However, it is an under-researched problem and there is a dearth of literature exploring its multiple aspects, such as psychopathology, cultural variation, social impact, and appropriate preventive measures.\(^{[8]}\) It can be episodic or persistent over a period of time; can be demonstrated by fewer individuals or a larger group of people; can be focused to a particular product (toilet tissue or onion) or wide ranges of products; can be spotted in adversity (disaster or outbreak) or during the ceremonial eve. When it affects a larger mass, it gets reinforced by the process of social learning, resulting in a challenging situation to address. As it is not a disorder and because it mostly manifests itself in sparse episodes during adversities or emergencies, it is unlikely that the individuals involved in panic buying will seek a psychiatric consultation. Moreover, due to the surrounding situations (social distancing or lockdown), long-term face-to-face consultation should be considered as an expected setting.

An adequate awareness, regarding social disruption and remedial measures, could be the primary condition regarding the panic buying during the emergency situation like COVID-19. Individuals who indulge the behavior repeatedly, getting distressed by it, acknowledge their panic buying behavior, and have the willingness to change it can be addressed through CBT. Online group CBT could be a potential option. The governmental or public health authority of the local community, national psychiatric society, and even the supermarkets can arrange or take the lead to arranging it. Cognitive restructuring and behavioral modification strategies may be useful in the process of CBT for panic buying. If a structured therapy session is not possible, then at least adopting the core skills (thought challenging, gathering evidence, and preventing the maladaptive responses) used during CBT may be used for reducing the panic buying behavior. Figure 1 explains the five-area CBT model of panic buying.

Existing evidence supports that internet-based CBT is having comparable effectiveness such as the face-to-face conventional CBT.\(^{[7]}\) Considering the challenges of face-to-face interaction during COVID-19 pandemic, CBT can be delivered through telepsychiatry. Individuals with similar psychopathology can avail the group online CBT intervention. When privacy becomes a concern for some clients, their needs can be addressed through individual online sessions.

As an emerging issue, different perspectives of panic buying have been coming out day by day. Here, we have attempted to explain the usefulness of online group CBT for panic buying in COVID-19 context. Panic buying is an ill-defined entity. For example, we do not have simple metrics to quantify this. In addition, during a crisis like the COVID-19 pandemic, it may be difficult to delineate the real worries and exaggerated ones. Empirical research on this subject may be expected once definitions are in place. Before then, a suggestion may be the debate about handling using CBT.

**Financial support and sponsorship**

Nil.

**Conflicts of interest**

There are no conflicts of interest.
Letters to Editor

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Submitted: 01-Jun-2020, Accepted: 16-Jun-2020, Published: 10-Oct-2020

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