Research Article

Psychological Impact of the COVID-19 Pandemic and Ways to Deal with it in the General Population and Certain Specific Populations

Roukaya Benjelloun¹, Rabie Karrouri² and Yassine Otheman³

¹Assistant Professor of Psychiatry, Faculty of Medicine, Mohammed VI University of Health Sciences (UM6SS), Casablanca, Morocco
²Assistant Professor of Psychiatry, Psychiatry Department, Moulay Ismail Military Hospital, Faculty of Medicine and Pharmacy, Sidi Mohamed Ben Abdellah University, Fez, Morocco
³Associate Professor of Psychiatry, Head of Psychiatry Department, Moulay Ismail Military Hospital, Faculty of Medicine and Pharmacy, Sidi Mohamed Ben Abdellah University, Fez, Morocco

INTRODUCTION

Since the World Health Organization (WHO) declared the COVID-19 outbreak as a pandemic in March 2020, the world has been experiencing an unprecedented situation on several levels. Several governments have put in place containment and social distancing measures to control the spread of the virus. But the unprecedented nature of this pandemic, as well as the measures taken, while necessary and vital to deal with it, are significant stressors and can have psychological repercussions on the general population and some vulnerable categories. The psychological response of each depends on their perception of the risk in order to be able to get out of this situation with the least possible damage. Learning to cope with these difficult times is also a way to learn how to deal with the adversity that such events can constitute in the future.

METHOD AND RESULTS

Aim: Here we propose to describe this psychological impact, giving some advice in line with international recommendations.

Method and Results: Through a summary of the main recommendations issued in this area recently, we have established a list of advice for professionals and concerned people.

Discussion and Conclusion: Protecting ourselves and the most vulnerable people, from the psychological risks to which we are exposed, is currently an absolute necessity in order to be able to get out of this situation with the least possible damage. Learning to cope with these difficult times is also a way to learn how to deal with the adversity that such events can constitute in the future.

Psychological Effects of the COVID-19 Pandemic on the General Population

The psychological response of each depends on their perception of the situation and their ability to cope, and the symptoms experienced can vary in nature and intensity. The COVID-19 pandemic represents a stressful situation where anxiety may be related to the following aspects:

1. The traumatic nature of this pandemic poses a threat of annihilation to oneself or to relatives.
ii. An unprecedented situation, to which no one has been prepared.
iii. The relatively fast start and unpredictable outcome.
iv. Perceived lack of controllability (lack of curative treatment or vaccine)
v. Containment: isolation and loneliness related to the feeling of being cut off from loved ones, family tensions, financial difficulties related to job loss or declining income [1-3].

Thus, under the effect of this stress, people can develop thoughts or behaviours that may not be rational.

I Thoughts on the Pandemic

Adapted or rational thoughts may include fears of being infected or infecting others, fear of dying, concerns about one’s own health, ability to effectively care for one’s children or other dependents. However, some inappropriate or irrational thoughts can also be seen. These can be catastrophic thoughts and interpretations: “It’s the end of the world,” with a sense of helplessness: “I can’t do anything about it” “risk can come from everywhere”, and negative predictions about the current or future situation

Anxiety is the main emotion felt; its intensity varies from mild to extreme, with the occurrence of panic attacks that can constitute an authentic panic disorder. Other psychological disorders may also appear, such as irritability, a distressing feeling of waiting, a state of painful hyper-vigilance, sleep disorders, but also anger, especially if the person thinks that he has been exposed to the disease because of the neglect of others, or that he has not been supported in this crisis. A depressive mood, a sense of despair, boredom and frustration secondary to isolation and confinement can also be seen. If it is normal to feel anxious or afraid in front of danger or threat, in some people this reaction will be inadequate or accompanied by significant emotional distress.

II Pandemic Related Behaviours

Adapted behaviours will consist in using anxiety and stress to be proactive and take the necessary measures to protect oneself according to expert’s advice. While inappropriate behaviour can cause negative consequences, impaired functioning or suffering for oneself or others. Here are some examples of such behaviours:

i. Failing to comply with protection measures (barrier measures, etc.),
ii. Questioning the authenticity of this pandemic,
iii. Obsessive compulsive behaviour,
iv. Searching for information about the pandemic throughout the day,
vi. Total isolation at home despite the need to go out: e.g. shopping, going to work,
vi. Overconsumption of anxiolytic and sedative drugs.

Recommendations to the General Population

In order to prevent such dysfunctional thoughts and behaviours, some recommendations have been developed:

i. Adopting a good lifestyle: sleep, diet and physical activity are the pillars of a lifestyle that allows better mental and physical health, which is the best way to strengthen immunity and mental balance.

ii. Limit exposure to anxiety-inducing messages: Set a limit to the amount of information received on the subject (for example by not exceeding 30 minutes per day). It is not recommended to be exposed to disturbing news just before bedtime, as this can interfere with sleep. Searching for information from reliable sources also avoids exaggerated concerns. A continuous stream of information is likely to anguish anyone. We must stick to facts, not rumors and misinformation, and prefer reliable sources of information (serious media, official sites.)

iii. Support others: Supporting each other is beneficial (both for the helper and for the one who is helped). For example, you can call your loved ones and neighbours, or isolated people you know and who may need help. You can also help people in vulnerable situations by offering food, clothing or medicines. Another important way to support others and feel better, is to be encouraging to health professionals who care for those affected by COVID-19.

iv. Enjoy activities: you can listen to music, watch favorite movies, exercise at home, read a book, prepare a good meal and enjoy food, play board games, organize social events with friends or family members via different means of communication and social media.

v. Seek professional help in case of persistence or worsening of emotional distress: phone calls with specialist, visiting psychologists or psychiatrists [1, 2, 4].

Psychological Effects of the COVID-19 Pandemic on Specific Populations and Means of Dealing with It:

I People with Psychiatric Disorders

People with psychiatric disorders are highly vulnerable, often socially isolated, at risk of discontinuation of psychiatric care, and may have difficulty complying with containment guidelines and barrier measures. In addition, they often have somatic comorbidities that increase the risk of developing severe forms of COVID-19. Anxiety and containment itself can be a source of psychiatric disorder relapses. A reorganization of outpatient care system, to ensure the continuity of medical monitoring, is primordial in this period. Here are some recommendations in favour of people with psychiatric disorders and their families:

i. Maintaining and strengthening the offer of outpatient care: in order to ensure continuity of care and maintain the patient’s relationship with the caregiver who usually provides follow-up. Consultation in times of confinement will be preferentially carried out remotely, by video transmission or telephone. Contact with the patient should be regular and intensified in case of suicidal risk and for patients with severe disorders.

ii. It is essential to maintain the possibility of directly examining patients for their first consultation or in case of severe psychiatric disorders, in the usual places of care, under health protection conditions. Access to hospitals must be maintained as far as it is possible.

iii. Remain vigilant in the follow-up of psychiatric patients: Practitioners can contribute to the somatic follow-up of the psychiatric patient, including regular assessment of possible COVID-19 symptoms. Particular attention should be paid to the social and family context of the patient (isolation, increased risk of domestic violence, risk of intra-family tensions caused by the
situation of confinement, situation of children present in the home, etc.).
iv. Medical teams must establish regular contact with the patient’s family to include them in care and monitoring and make them aware of the need to maintain a healthy lifestyle during confinement.
v. Facilitate the renewal of treatments in pharmacies: In order to ensure that patients are able to continue taking their drugs, pharmacists may continue to dispense drugs to patients, preferably after contacting treating physician.
vi. Maintaining permanent access to care: Psychiatric facilities must provide a hotline for acute distress situations. The telephone number is previously notified to the patient as part of the patient’s care project. Access to psychiatric emergencies should remain possible throughout the pandemic period [5, 6].

II Children and Teenagers

The impact of the pandemic is more pronounced on children and adolescents. The quality of relationships with parents, who may be weakened or powerless in such unpredictable circumstances, can exacerbate parent/child conflicts, and further damage an already fragile relationship. In addition, the COVID-19 pandemic can aggravate pre-existing mental disorders or expose children and adolescents to physical or psychological violence [7].

Recommendations that can help protect this young population during these pandemic times include:
i. Establish communication with children without forcing things, listening to what children think, understand and say about COVID-19, and provide precise and simple explanations without scaring or blaming them. Thus, taking the time to provide the correct information in a language that the child/adolescent can understand, will avoid anxious reactions.
ii. Welcome and validate children’s emotional reactions and reassure them about how the family will care for each other, which also helps contain possible anxiety reactions.
iii. Restoring a routine can help find time structuring landmarks by establishing a schedule to rhythm the days.
iv. Parents must be a positive role model: taking care of yourself is also a good manner to help children do better.
v. keep in touch with the school as long as possible, so that these measures are in continuity with those in classes.
vi. Preventing violence: Special vigilance is required regarding the risk of increased violence against children, whether physical, sexual or psychological, which is more difficult to detect [8, 9].

III Elderly

In times of pandemic or confinement, older people may become more anxious, stressed, agitated, or exhibit withdrawal behaviours. The elderly may develop cognitive impairment or aggravate pre-existing cognitive disorders in isolation conditions.

In case of dementia, families and caregivers should be more vigilant. They must explain the pandemic, and ways to reduce the risk of contamination, with simple facts and appropriate formulas. Do not hesitate to repeat the information as often as necessary. The information must be communicated in a clear, concise and respectful manner. The decrease in sensory abilities, especially auditory, may require to deliver the information with a written and graphic medium, especially about protective measures [10].

IV Patients with Chronic Diseases

These patients are more fragile and more exposed to both psychological and somatic effects of the pandemic and constitute as well a population at risk for severe forms of COVID-19. That is why it is recommended to ensure having a sufficient supply of medicines for 30 days or more, and to anticipate all needs: medicines, food and hygiene products. Moreover, it is important to keep regular contact with family and relatives, neighbours and caregivers. For these patients, it is important not to modify or stop treatment, or take new medications without the advice of a doctor. Patients with cancer are particularly at risk of aggravation of their disease due to delays and treatments that reduce immunity. This is also particularly psychologically harmful given the life-threatening nature in the disease [11, 12].

V People with Special Needs

They are also a particularly fragile and at-risk population, usually in need to organize their access to care. People with disabilities may face more difficulties in accessing medical care. Some steps may help reduce this burden: Providing the appropriate medical transport needed to access urgent care is essential. Ensuring continuity of access to disability pathways and structures in collaboration with the relevant authorities. Ensuring that people with disabilities at home and those accompanying them are screened. And finally, remaining vigilant on medical conditions that will make people with disabilities vulnerable and at risk for COVID-19.

Conclusion

The psychological aspects of the COVID19 pandemic are increasingly being studied and of high interest, given the persistence of the situation and the damage it causes at all levels of life. Protecting ourselves and the most vulnerable people, from the psychological risks to which we are exposed, is currently an absolute necessity in order to be able to get out of this situation with the least possible damage. Learning to cope with these difficult times is also a way to learn how to deal with the adversity that such events can constitute in the future.

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