Letter to the Editor

Fear and agony of the pandemic leading to stress and mental illness: An emerging crisis in the novel coronavirus (COVID-19) outbreak

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ABSTRACT

The outbreak of novel Coronavirus (COVID-19), later named as a pandemic affecting nearly 210 countries and territories has led to negative emotions of fear and agony in the general population and healthcare staff professionals. The healthcare regulators and the governments have imposed emergencies and lockdowns in their countries which has led to an adverse effect on the mental health of people ultimately leading to a rise in anxiety, depression, and associated mental illness. The fear and uncertainty increased by the COVID-19 crisis are putting extreme pressure on our finite resources. This report aims to synthesis the dilemma of mental illness as a result of pandemic and initiates suggestions to help the general public, healthcare professionals, and workers mitigate the negative emotions to improve the mental wellbeing in this detached period of isolation.

Dear Editor

1. The psychological and social aspects of the COVID-19 pandemic

With the pandemic of the novel coronavirus (COVID-19) sweeping over the globe, almost one-third of the world's occupants have been placed on enforced quarantine due to contagious viral disease (Bashir et al., 2020a). It will most probably result after the outbreak of anxiety and depression and there will be a wave of mental illness. A survey among the Belgian population among the 18–65 years old citizens revealed that before lockdown, only 15% were in stress and 32% population was resilient. After two weeks of resilient lockdown, the population stress increased to 25%. Among the general public, healthcare workers are at high risk of catching long-term mental health problems, followed by children, elderly and people already suffering from mental or psychological problems and poverty (Hoof, 2020). In this era of unspecified isolation, contagious disease, and with no sign of returning to normal life soon, coronavirus is putting an adverse effect on people's mental health. Crisis Text line, a crisis counselor operating in the UK, USA, and Canada, has shown that since February 2020, up to 80% of the messages are anxiety and depression (Qiu et al., 2020).

Previous studies reveal that people under lockdown are more prone to evolve various symptoms of psychological problems, e.g., stress, depression, emotional fatigue, insomnia, and post-traumatic anxiety signs (Brooks et al., 2020). Schwartz and Pines (2020) shared a presentation, which was about asking the medical officers to share their feelings on the current pandemic swooping over the globe. Their replies were as follows: *"Exhausted, overwhelmed, and anxious"* and *"The current workload is not sustainable."* Medical staff is of the view that the world is facing two contagions at the same time: the coronavirus and the negative emotions it creates. Emotions such as tiredness, fear and anxiety adversely affect the thinking capacity of people and can not pay attention to the right choices. They assert that the effect of these negative emotions starts physiologically. They use the term Allostatic load, which is the cost of chronic or severe erosion on humans' bodies, minds and emotions. This Allostatic overload takes place when stress on a person's internal resources surpasses a person's extent. The anxiety and fear increased due to the COVID-19 crisis are establishing a severe burden on peoples' internal capacities. The results include problems in decision-making, disruption and nervous exhaustion.

2. Review of literature

Emergencies, disasters and crises occur as a part of life. But events such as COVID-19 pandemic are different from domestic and personal emergencies (Bashir et al., 2020b). The reason is not their larger size but rather these events take control of human lives. People in Pandemic such as COVID-19 may manifest various psychological reactions like stigmatization, fear, hopelessness and helplessness. Fear of a pandemic is a significant psychological response as a result of a crisis. There can be different results of fear like some people out of fear perform desired actions, while others do not take the desired action. Another consequence may be that when people feel fear, they may react in extremely inappropriate ways (Centers for Disease Prevention and Control, 2019).

Swinton (2020) states that disasters like pandemics cause depression and complexity, which happen because we may not be prepared to deal with such pandemic and emotional effects attached to it. The most common effects attached to such disasters are anxiety and fear. These fears are probably due to distorted thoughts that affect people's capability to remain calm and think rationally in the scenario of disasters. These distorted thoughts occur automatically and some such common ones may include: drawing negative conclusions, catastrophizing the problem, growing negative emotions in mind relating to a pandemic or any catastrophe. Unfortunately, such thoughts cannot be controlled, they can only be managed.

In this situation of pandemic and social distancing, where fear is ruling everywhere, management of such thoughts is crucial even for a normal person and the people who are already fighting some depressions and passing through some mental disorders anyone can

understand their condition. There is need to differentiate that in this particular crisis of pandemic, we have to face two bitter realities: first is the pandemic itself; a deadly condition which has a high mortality rate, second is the impact of negative emotions like fear and anxiety causing mental illness (Courier, 2020). Brooks (2020) in a column published in the New York Times, writes about the replies of the readers in response to a question that was asked about their feelings in this scenario of COVID-19. He summarized their response as "there is also a river of woe running through the world — a significant portion of our friends and neighbors are in agony."

Shah et al. (2020) conducted a review to present the same epidemics from the previous history to grasp its negative effect on mental well-being and provide a historical view to medical practitioners in this period of similar pandemics to provide psychological assistance. Daley (2020) posits that the viral pandemic is deadly and frightening. But another looming crisis is the pandemic of severe depression and anxiety which will hit the world after this viral pandemic because of reasons such as unemployment, forced quarantine and lack of leisure activities. Self-isolation is such a critical phenomenon, which also brings certain anxieties and fears because people are concerned; they may infect their loved ones. Furthermore, social isolation and rejection of purpose and lower self-esteem will be a cause of severe mental health problems. As in this social isolation, there is a wave of desperation at a mass level, the negative emotions of depression and stress with the elongations of the Centrelink lines, human society will have to take care of the mental health of the people as it is making the availability of masks, and testing kits to prevent people from viral disease.

Johnstone (2020) says somewhat opposite to the above views. She says that people are not confronting pandemic of mental health problems rather they are all passing through a situation which is horrifying in a true sense and such scenarios, the negative emotions of anxiety, fear, confusion and despair because this kind of terrible situation changes people's ways of living altogether. Many professionals would proclaim that these negative emotions of people are experiences of people which they are going through in this phase of pandemic and these experiences of people are being named as clinical depression, personality disorder, psychosis, and many more. Another dilemma would initiate that drug companies would push medical staff to prescribe medicine even when it is not required, hence resulting in the opioid crisis.

Donald Trump, the US President while delivering daily briefing related to COVID-19 on April 11, 2020, replied to a journalist in response to a question concerning the end of lockdown that opening up the lockdown may lead to death but "you know what staying at home leads to death also and it's very traumatic for this country but staying at home if you look at numbers that lead to a different kind of death perhaps but it leads to death also" (Trump, 2020). In the light of this reply, it can be inferred that the US president is also concerned about the negative emotions of fear, agony, depression, and anxiety that are sweeping over in this era of pandemic and COVID-19.

The above literature highlights the problems that all strata of societies of the world are passing through. Now in the light of the different sources including psychologists, experts, medical practitioners and so on, some suggestions are presented in the table that will help general public covering children, youngsters, elderly, healthcare practitioners and workers to control negative emotions of anxiety, fear and depression and they will be able to prevent themselves from catching mental illness during and after this global emergency. The suggestions to the state or government of the country to control the stress of the public include keeping the quarantine period as short as possible, provide people with as much information as possible, provide adequate supplies (e.g., food, medicine) to the people in the period of quarantine, educating people about normal psychological impacts and initiation of a website to deal with psychosocial problems of the public (Brooks et al., 2020; Hoof, 2020; Rona et al., 2007).

3. The way forward

Prior research has devised some solutions for the general public to relieve them from fear and stress that they are facing due to pandemic (Brooks et al., 2020; Schwartz and Pines, 2020; Swinton, 2020). They are of the view that people should prefer altruism to compulsion, people should acknowledge the anxiety by admitting that feelings are temporary and won't last forever, a schedule of worrying should be made for example half an hour a day, limiting of daily listening of news, usage of only trusted sources of information, change of thinking that it's a physical distancing only not social distancing, they can socially connect via social media sources to their friends and family, people should set new quarantine habits (a morning walk, start a journal, talk to family, exercises like jumping, or running up and downstairs, singing, and painting etc.), people should not catastrophe about COVID-19 situation. A positive attitude is a remedy to relieve stress. Hoof (2020) is of the view that people can take help from a website addressing psychological issues to seek psychological help.

World health organization (WHO) asserts in its report that the general public should find hopeful stories of people who have recovered from coronavirus disease (WHO, 2020). This will help them in boosting their morale and decrease their fear of the disease. WHO issues a guideline about protecting children from stress and fear caused by novel COVID-19 which describes that children should be given an opportunity to show fear and sadness, keep children close to the family, provide activities for children according to their age and discussion about COVID-19 with children in an age-appropriate way may reduce their anxiety.

Although, the literature about mental health and COVID-19 is rather scarce at the moment, but the existing literature indicate that depression and PTSD, PTSS and OCD (Cheng et al., 2004; Chua et al., 2004; Liu et al., 2012), have significantly increased due to COVID-19. And the analysis of indirect effects on mental health issues due to COVID-19 indicates higher anxiety and depressive behavior with significant negative association with mental health issues in general public (Lancee et al., 2008). This is why, we suggest that further research to analyze mental health and neuropsychiatric consequences is key in addressing mental health care, treatment and adoption of preventive measures during COVID-19 pandemic.

Declaration of Competing Interest

Authors declare no conflict of interests.

Supplementary materials

Supplementary material associated with this article can be found, in the online version, at doi:10.1016/j.psychres.2020.113230.

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