

Access this article online
Quick Response Code:

Website: www.jehp.net
DOI: 10.4103/jehp.jehp_666_20

# Psychosocial implication of quarantine and lockdown during COVID-19 pandemic in India

Nisha Gathiya, Santosh Kumar<sup>1</sup>

## Abstract:

Negative psychological outcomes have been consistently associated with quarantine measure and lockdown. This article tries to look at the psychological implications of quarantine and lockdown and then touches upon how social aspects lead to psychological effects unaddressed for various communities of the people surviving in vulnerable conditions. The objective of this study was to review the psychosocial implication of quarantine and lockdown among Indian community who are facing a double burden of mental and economic crisis. Databases for relevant studies were searched in PubMed and Google Scholar with key term “quarantine,” “mental health,” “lockdown,” and “psychosocial.” Few newspaper reports related to quarantine and psychosocial implication have also incorporated. Home and facility quarantine were imposed on people in order to control and check the spread of this infectious disease. This strict imposition not just led to various other counter effects that were negative in nature, but it is predicted to have long-lasting social, economic, and psychological effects too. As social diversities lead to varied mental health adversities, a broader umbrella needs to be created in order to protect every community dealing with mental health issues due to the pandemic. In order to address the mental issues of the vulnerable classes, the issue still remains untouched, and this leaves us with a question of are we doing enough for each individual. A team of clinical psychologist, psychiatrist, and sociologist come forward to combat this mental health impact of COVID-19 outbreaks and make this quarantine tolerable for the public with appropriate solutions.

## Keywords:

COVID-19, quarantine, lockdown, psychological, psychosocial, vulnerable

## Introduction

In India, the outbreak of the severe acute respiratory syndrome (SARS) coronavirus-2 started with its first case on January 30 (2020) in the state of Kerala with its travel history from Wuhan, China. Since then, India has witnessed an increase in the number of cases of COVID-19 with a count of 145 thousand as on May 25, which is 113 days after witnessing the first case, and with this case count, now India stands on the 10<sup>th</sup> position worldwide.

Initially, with a steady increase in the growth rate of the cases to a sharp increase,

the Indian government has initiated and executed various measures in order to cure the patients infected from the virus and to prevent the transmission of the coronavirus. After almost 2 months from the outbreak, on March 24, 2020, the Indian government ordered a nationwide lockdown initially declared for 21 days which was further extended after it and then controlled by various state governments. As a preventive measure against the pandemic, lockdown limited the entire movement of the 1.3 billion Indian population. People were quarantined in public health setups or homes in order to cure and prevent the infectious disease.

The separation and restriction of movement of people who have potentially been exposed

This is an open access journal, and articles are distributed under the terms of the Creative Commons Attribution-NonCommercial-ShareAlike 4.0 License, which allows others to remix, tweak, and build upon the work non-commercially, as long as appropriate credit is given and the new creations are licensed under the identical terms.

For reprints contact: WKHLRPMedknow\_reprints@wolterskluwer.com

**How to cite this article:** Gathiya N, Kumar S. Psychosocial implication of quarantine and lockdown during COVID-19 pandemic in India. J Edu Health Promot 2020;9:363.

School of Development Studies, Tata Institute of Social Sciences, Mumbai, Maharashtra, India,

<sup>1</sup>Department of Community and Family Medicine, All India Institute of Medical Sciences, Rishikesh, Uttarakhand, India

### Address for correspondence:

Dr. Santosh Kumar,  
Department of Community and Family Medicine, All India Institute of Medical Sciences, Rishikesh, Uttarakhand, India.  
E-mail: drsantoshbhu@gmail.com

Received: 14-06-2020

Accepted: 21-06-2020

Published: 29-12-2020

to a contagious disease are termed as quarantine, and) This process is done to reduce the spread of infection and break the chain of transmission.<sup>[1]</sup> On the other hand, isolation is the separation of people who have been diagnosed with a contagious disease from those who are not sick; however, especially in communication with the general public, both the terms are often used interchangeably.<sup>[2]</sup> Before the lockdown, a Janta (People) Curfew was imposed on the 22<sup>nd</sup> of the month which lasted for 14 h. This period of buffering the coming lockdown was so short that apart from taking it as a preventive measure against the pandemic, various other adversities were faced by the people. The bold public health action has been a topic of debate since the time the lockdown was imposed in order to track whether it was able to match similar efforts when it comes to ensuring that the pandemic should not generate a secondary hunger and poverty crisis. This is because the government failed to address the aspects of being prepared for this situation starting from sensitizing people for the process beforehand to addressing the counter consequences of the state being in lockdown. It has impacted daily wagers, migrant workers, and the poorest as a knee-jerk decision was made before considering the relocation of migrants to the respective locations.

On the other hand, apart from the migrants who were left behind, the rest of the people were either home quarantined or quarantined in government facilities. As stated by the WHO, the introduction of quarantine measures when implemented very early in a pandemic outbreak may help in either delaying the introduction of the disease in a country or area or it may delay the peak of it if the local transmission is ongoing, or can result in both. However, if the implementation of quarantine as a measure to delay pandemic is not proper, then it may generate sources of contamination and dissemination of the infection instead. It also stated that implementation of quarantine should only be as part of a comprehensive package of public health response and containment measures and in accordance with Article 3 of the International Health Regulations (2005), be fully respectful of the dignity, human rights, and fundamental freedoms of persons.<sup>[1]</sup> However, based on the current scenario, some implications can still be drawn like how effective quarantine has been when it comes to preventing the spread of the virus or the social and psychological implications of it or if coupling quarantine with few other measures can make it more effective to the spread of the Coronavirus. In 2017, a study shows that one in every 7 Indians suffers such an issue<sup>[3]</sup> and now the situation currently looks like one in every 3 Indians facing the same.<sup>[4-5]</sup>

This remains a well-established fact that quarantining people at proper time can be one of the best measures

to prevent the spread of the virus, but the process has negative implications on the one it is imposed on.<sup>[2]</sup> The process is sensitive, and it is important to ensure that people dealing with it do not suffer mental agony. With imposing measures like this, it becomes important to ensure that people put in quarantine and isolation are not stigmatized<sup>[2]</sup> or made to feel that they are being treated badly which they may perceive as being treated as criminals.

A previous study that was conducted on hospital staff who had probable chances of having encountered contact with SARS found that immediately after the 9-day period of being quarantined, symptoms of severe stress were found in the hospital staff.<sup>[2]</sup> Feelings of exhaustion, detachment from others, anxiety issues when dealing with febrile patients, insomnia, irritability, lack of concentration and indecisiveness which lead to their deteriorating work performance, or consideration of resignation were more likely with them.

The current situation has blurred the boundary between people who already had mental health issues and the normal ones. In similar situations, whenever society gets hit by a crisis of this magnitude, it legitimizes anxiety to a certain extent. The Indian Psychiatry Society carried out a study which revealed that in just the 1<sup>st</sup> week of the implementation of the lockdown, mental health illness cases rose by 33.33%, i.e., every 1 out of 3 Indian reported mental illness.<sup>[4]</sup>

Coronavirus is a global issue, and every country is dealing with it on some of the other varied scales with realizing the implications of the pandemic control measure.

### Psychosocial Implication Due to Quarantine and Lockdown

Currently, the government with the help of media is trying to portray lockdown as an opportunity to connect with family and build stronger bonds. Although this might exist as a result to support people and boost their morale, there is a lot more out of focus which should also be considered, and an open platform to talk about it can serve the best way to deal with it wherein people will be able to know a lot more about the arising mental issues and the ways to deal with them. Studies have revealed that the lockdown situation has not just made office-goers working from home and home-makers overburdened with the tasks to perform in a single day but has also resulted on practical grounds that resulted in physical inactivity and delay in milestones.<sup>[5]</sup> The working efficiency or people have been seen as significantly low where the workers also suffer issues of dealing with it, not in an official workspace impacting productivity. Lack of personal space and boredom has

also been an issue that might further result in frustration and anger among people.<sup>[6]</sup>

Though this behavioral problem might autoresolved soon after the effect of this pandemic but disadvantaged and vulnerable communities may have to go through various mental, physical, and emotional crises by the implications laid on them due to Corona pandemic which seems to be prolonged in nature It can be postulated that these long-lasting implications of a pandemic on the mental health of people may lead to an increase in obsessive cleanliness in some people.<sup>[7]</sup> In order to analyze the various effects on the basis of the various setups, people got stuck in we can look at the issue from various angles which should be considered by psychologists and mental health experts in order to arrive at solutions for addressing the problems being faced.

### Challenges being faced by the vulnerable class

It is evident that the global pandemic has an uneven impact outside and within the country. The already existing social inequalities in India are not even sharpened keeping the cutting edge toward the poor. The stringent and severe lockdown in India with hardly any safety net was announced on the last hour, making it difficult for the migrants. It severely impacted the daily wagers, migrant workers, and the poorest. Accordingly, the fiscal package is not being worked out to transfer adequate cash to the poorest while at the end of the lockdown series. While this class differences have posed a great threat to India since ever, the social inequalities look widened in the current scenario and it is no rocket science to think it to be worsening even further. The highlighted psychological impacts of lockdown are seen in context of upper economic strata while the adverse effects seem to be neglected in the lower-income groups, especially in lower income countries like India The group suffering the most in this situation which can be predicted to have traumatized by the implications of such severe measures with no safety net needs to be assessed too. Migrants working in cities after leaving their village got stuck at places, and after the continuous extension of the lockdown, the country witnessed desperate attempts to reach home in which several hundreds of them lost their lives. Social and financial security of all poor and vulnerable sections of society has to be put in priority for further development.

### Financial instability: Economic crisis during pandemic

, In this times of Corona, the effects can also be seen in financial aspects of the country as trade and industry have been blown by the lockdown and temporary shutting down of businesses. Financial instability in the near future has been an issue of worry among the public not only belonging to the informal sector but the

formal sector too. Companies suffering financial losses are seen to be going in lay-off states and not hiring for a longer time in the future. Economic devastation has led to workers left with no food, no income, and no shelter. If we consider Tier-1 institutes they faced issues like students losing their internships after getting placed and not receiving call letters at the end due to the prevailing situation which not just affected their resumes but also marked as a breaker to the good start of their careers. The lockdown has not just given a jerk to the entire economy of the country, but it is a long-time shock that the country will go through. The Government of India in order to support the small and medium scale enterprises has urged people to shop locally and also support Indian brands to support the small and medium scale businesses.

### Domestic violence and mental harassment

Not only this, but the country is also witnessing increased cases of domestic violence and mental harassment at homes due to the situation, further contributing to the adversities of mental health, especially among women. In India, according to a report by the National Commission for Women (NCW), the country witnessed a 45% increased number of domestic violence in just 25 days after the imposition of the lockdown. NCW registered 587 complaints of domestic violence between March 23 and April 16 which shows the doubling of cases as in reference to the normal situation. When we consider the intersectionality of women belonging to rural, the scenario might even look more dangerous as many women from rural areas are even scared of complaining and also they do not have the access to register a complaint during lockdown.<sup>[8]</sup>

### Implications on individuals with substance use disorders

Individuals with substance use disorders are already under psychological illness due to pre-existing mental problems and the become more vulnerable due to the exaggeration of their problems due to corona effect The COVID-19 threat has the possibility of hitting this community of people really hard. Along with a higher risk of suffering from contamination due to low immunity levels, they face issues such as anxiety, nervousness, withdrawal symptoms, and suicidal instincts. The disease can be a serious threat to these individuals as it attacks the lungs, and people who had been habitual of smoke and marijuana suffer from damaged lung problems. In addition to this, these individuals are more likely to suffer feelings of homelessness and detention compared to those in the general population.<sup>[9]</sup> Restrictions on travel and markets leading to the unavailability of the substance may lead to problems like engaging in hazardous activities like trying to self-manufacture the substance or commit suicide.<sup>[5]</sup>

## Issues to be Traced Back

The Harvard School of Public Health conducted a study along with the United States Centers for Disease Control and Prevention. In the study, they took residents' survey of Hong Kong, Taiwan, Singapore, and the United States, and it was found that a majority of people in each of these countries opposed compulsory quarantine. In the study, it was found that regions with greater experience with the quarantine measure depicted very less willingness than the U.S. respondents did to be quarantined at home.<sup>[10]</sup> This implies the difficulty of following quarantine procedures, such as the wearing of masks, designed to protect unexposed family members.<sup>[11]</sup> The unwillingness of the people to be quarantined in spite of being aware of the fact that it is one of the core practices to stop the spread of contagious disease underlines the unease people face while undergoing it.

If we consider India, the problem looks even worse due to a huge difference between both the countries in all the major spheres. Moreover, various other psychosocial factors being analyzed also depict the consequences of it, which makes us think upon the safety nets to be ensured to people while taking severe decisions which may favor public good but poorly affects individuals on a personal level. First, India being a country that has not faced similar situations in the past was very underprepared to implement such a move considering the various social diversities and the economic disparity it consists. These features already had a contribution to the rising pattern in the mental morbidity of the people. The state of uncertainty then created suddenly by the virus outbreak resulted in further rise of cases.<sup>[12]</sup> Second, the problems with lockdown are no less, but when a person in the nearby area gets infected by the virus, it leads to the area getting under contamination zone which does not just lead to fear among people but also aggravates the problems by leading to the quarantine of people in the area.

## Way Forward

India holds an already overburdened mental health machinery, and efforts are required to be made from government and other stakeholders capable of dealing with mental health issues considering the unfortunate situation which will result in a rise in mental health issues in the country. There seems a need to leverage our power to deal with communities, and the mechanism should be locally devised and evidence based.<sup>[5]</sup> In India, as social diversities lead to varied mental health adversities, a broader umbrella needs to be created in order to protect every community dealing with mental health issues due to the pandemic. Intersectionality plays a vital role in India in terms of every aspect, and addressing it in terms

of mental health cannot be overlooked in such times. As we witnessed, how people followed lockdown in India, which has a demonstration of acceptance to the reality, changing reality by collaborative action is also one facet to it. People have to be brought back to normal lives again which is not possible sooner if no intervention is made by action from all stakeholders of our society. Spreading right and authorized information becomes the first aspect to it like how and till this is all supposed to last, and preventive measures then can be followed.

If lockdown and quarantine is seen as essential, then making it tolerable to the public becomes as important as imposing it.<sup>[11]</sup> Transparency and communication also become an important aspect in such a situation as fake media reports out for the purpose of TRP can create panic among people. A greater control and support by the government on every actor in the society is what we require now. Policies targeting to address every community according to need become crucial. For this, auxiliary mental health programs should be run, and every individual, whether it be children, youth, or geriatric population, should be targeted under it. As the reviewed article already highlights that preexisting mental health problems and abnormalities are likely to be aggravated after unprecedented effects of COVID, we need to address these issues with larger focus. Preexisting mental health problems and psychological abnormality likely to be aggravated after unprecedented effect of COVID-19 and routine care through telecounseling or similar digital mental health care may be one of the ways forward to address this issue.<sup>[13]</sup> One such effort if "Let's Talk" which was launched in early April in order to support existing efforts being led by government and other civil society organizations. Such efforts have seen to be very effective considering the stigma attached to mental<sup>[7]</sup> health issues also taking into account that the dealing of issue with telephonic helplines is a very cost-effective way and the person can maintain his confidentiality.<sup>[14]</sup> With the help of psychiatrists, clinical psychologists, mental health therapists, and the other mental health expert's teams and professionals, we can come up with proper solution to tackle these issues which corona has posed upon us.

## Financial support and sponsorship

Nil.

## Conflicts of interest

There are no conflicts of interest.

## References

1. World Health Organization. Considerations for Quarantine of Individuals in the Context of Containment for Coronavirus Disease (COVID-19): Interim Guidance, 29 February 2020. World Health Organization; 2020.

2. Brooks SK, Webster RK, Smith LE, Woodland L, Wessely S, Greenberg N, *et al.* The psychological impact of quarantine and how to reduce it: Rapid review of the evidence. *Lancet* 2020;395:912-20.
3. Sagar R, Dandona R, Gururaj G, Dhaliwal RS, Singh A, Ferrari A, *et al.* The burden of mental disorders across the states of India: the Global Burden of Disease Study 1990–2017. *Lancet Psychiatry* 2020;7:148-61.
4. Varshney M, Parel JT, Raizada N, Sarin SK. Initial psychological impact of COVID-19 and its correlates in Indian Community: An online (FEEL-COVID) survey. *Plos one.* 2020 May 29;15:e0233874.
5. Halder S. COVID-19: Psychological impact and psychotherapeutic intervention. *EC Psychol Psychiatry* 2020;9:32-5.
6. Chavan BS, Garg R, Bhargava R. Role of 24 hour telephonic helpline in delivery of mental health services. *Indian J Med Sci* 2012;66:116-25.
7. Wang G, Zhang Y, Zhao J, Zhang J, Jiang F. Mitigate the effects of home confinement on children during the COVID-19 outbreak. *Lancet* 2020;395:945-7.
8. Abuse NI on D. COVID-19: Potential Implications for Individuals with Substance Use Disorders. National Institute on Drug Abuse; 2020. Available from: <https://www.drugabuse.gov/about-nida/noras-blog/2020/04/covid-19-potential-implications-individuals-substance-use-disorders>. [Last accessed on 2020 Jun 26].
9. Blendon RJ, DesRoches CM, Cetron MS, Benson JM, Meinhardt T, Pollard W. Attitudes toward the use of quarantine in a public health emergency in four countries: The experiences of Hong Kong, Singapore, Taiwan, and the United States are instructive in assessing national responses to disease threats. *Health Affairs* 2006;25 Suppl 1:W15-25.
10. Kundu B, Bhowmik D. Societal impact of novel corona virus (COVID-19 pandemic) in India. *SocArXiv*; 2020. Available from: <https://osf.io/vm5rz>. [Last accessed on 2020 Jun 26].
11. Kpanake L, Leno JP, Sorum PC, Mullet E. Acceptability of community quarantine in contexts of communicable disease epidemics: Perspectives of literate lay people living in Conakry, Guinea. *Epidemiol Infect* 2019;147.
12. Suryawanshi R, More V. A study of effect of Corona Virus COVID-19 and lock down on human psychology of Pune City region. *Stud Indian Place Names* 2020;40:984-94.
13. Agyapong VI. Coronavirus Disease 2019 Pandemic: Health System and Community Response to a Text Message (Text4Hope) Program Supporting Mental Health in Alberta. *Disaster Medicine and Public Health Preparedness*:1-2.
14. Chavan BS, Garg R, Bhargava R. Role of 24 hour telephonic helpline in delivery of mental health services. *Indian J Med Sci* 2012;66:116-25.