

Mental health during the COVID-19 pandemic.

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Perspective

The COVID-19 epidemic has had an impact on people's mental health all across the world. The COVID-19 pandemic has caused anxiety, depression, and post-traumatic stress disorder symptoms in a variety of population groups, including healthcare workers, the general public, and patients and quarantined individuals, similar to previous respiratory viral epidemics such as SARS-CoV, MERS-CoV, and influenza epidemics. The Inter-Agency Standing Committee on Mental Health and Psychosocial Support recommends that the core principles of mental health support during an emergency be "do no harm, promote human rights and equality, use participatory approaches, build on existing resources and capacities, adopt multi-layered interventions, and work with integrated support systems," according to the Guidelines on Mental Health and Psychosocial Support. COVID-19 is harming people's social connectivity; trust in individuals and institutions, jobs and salaries, as well as causing significant concern and fear. COVID-19 further complicates substance use disorders (SUDs) by disproportionately affecting people with SUDs as a result of cumulative social, economic, and health disparities. COVID-19 is made more likely by the health consequences of SUDs (such as cardiovascular disease, respiratory disease, type 2 diabetes, immunosuppression and central nervous system depression, and psychiatric disorders), as well as the associated environmental challenges (such as housing instability, unemployment, and criminal justice involvement). COVID- Loneliness, mental health problems, withdrawal symptoms, and psychological trauma can all be exacerbated by 19 public health mitigation measures (such as physical separation, quarantine, and isolation). During and after the epidemic, confinement rules, unemployment, and budgetary austerity measures can have an impact on the illicit drug market and drug usage habits. Fear,

worry, and stress are natural reactions to perceived or real threats, as well as to uncertainty and the unknown. As a result, people's terror in the face of the COVID-19 epidemic is natural and understandable.

In a pandemic like COVID-19, the fear of getting the virus is compounded by the considerable changes to our daily life as our movements are restricted in support of efforts to contain and slow the virus's spread. Working from home, temporary unemployment, home-schooling children, and a lack of physical interaction with other family members, friends, and co-workers are all new realities that require us to take care of our mental as well as physical health. During the COVID-19 pandemic, WHO, in collaboration with partners, is giving guidelines and advice to health workers, health facility managers, people who care for children, older adults, people in isolation, and members of the general public to help us look after our mental health?

As new materials about caring for our mental health during the COVID pandemic become available, they will be posted to this website. COVID-19 can also induce other psychological reactions, such as the risk of infection when the transmission mode of COVID-19 is not completely understood, common symptoms of other health problems being confused for COVID-19, and so on. growing concern about children being left at home alone (during school closures, etc.) while parents are at work, and the risk of vulnerable individuals' physical and mental health deteriorating if care help is not available. Doctors and nurses on the front lines may encounter significant mental health issues. Working with COVID-19 patients is stigmatised, and implementing strong biosecurity controls causes stress (such as physical strain of protective equipment, need for constant awareness and vigilance, strict procedures to follow, preventing autonomy).

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