

Original Research Article

COVID-19: the psychological impact and coping strategies among youth during lockdown in India: the role of education

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ABSTRACT

Background: COVID-19 is a biological disaster and its impact on the psychological wellbeing among individuals in the society. It affected all age group in the society and the youth are more vulnerable in the pandemic. The aim of the study was to understand the stress, anxiety, depression level and coping strategies among youth during the early stage of lockdown period in India.

Methods: A cross-sectional descriptive study and 302 youth across India were responded through snowball sampling method. An online survey through google form and the tools were socio-demographic details, DASS-21 and coping strategies questionnaire. The self-reported English version online questionnaire were analysed through SPSS.

Results: The study found that 36.8% of youth had stress, 32% of them had anxiety whereas 48.7% had depressive symptoms and 30.4% spend their time in social networking sites during the early stage of lockdown in India. There were significant comparison between depression and recreational activities ($\chi^2=6.92$; $p=0.03$) and highly significant comparison between depression and spending times in hobbies ($\chi^2=8.32$; $p=0.01$).

Conclusions: The youth need psychosocial care and support during this pandemic and the youth need to take up physical-mental-spiritual self-care activities.

Keywords: Coping strategies, DASS-21, Depression, Pandemic, Psychosocial care

INTRODUCTION

The WHO situation report indicated that COVID-19 has affected almost all countries and the devastation is still continuing. Since 31 December 2019 and as of 5 September 2020, 26,640,247 cases of COVID-19 (in accordance with the applied case definitions and testing strategies in the affected countries) have been reported, including 874 963 deaths (WHO). COVID-19 has governments operating in a context of radical uncertainty and faced with difficult trade-offs given the health, education, economic and social challenges it raises. This epidemic, COVID-19 was not merely a health issue, as to the misfortune of millions around the globe, the virus was a shattering event for economies, public policies,

international politics and world trade. The pandemic disease is a biggest challenge in the modern society and the first outbreak was in China.^{1,2} Coronavirus cases increased on second half of March 2020 in India and now it's increasing day by day.³

The lockdown is to shut down all the government, private institutions, offices, transportation facilities across the country for reducing the pandemic COVID 19.⁴ During the lockdown there were various issues occurred such as economic, physical, family, psychological problems. The psychosocial problems are one of the major factors during COVID-19. A review on psychosocial impact of COVID-19 found that the individual may undergo acute such diseases like panic acute panic, anxiety, obsessive

behaviors, hoarding, paranoia, depression and post-traumatic stress disorder.⁵ A survey on the general public in Kashmir to better understand their level of psychological impact along with the economic downfall during COVID-19 outbreak and found that majority of the respondents had psycho-socio-economic problems and academic problems.⁶ A recent study examined among 370 individuals on psychological impact of quarantine period on asymptomatic individuals with COVID-19. The study found that the stress, anxiety and depression was there among most of the individuals.⁷

The individuals should have to avoid the psychological distress and need to cope up with the current pandemic situations. Therefore the coping strategies had a major role in the current biological disaster. The individuals can take support from online psychological services and adopt lifestyle measures such as yoga, online learning, music, reading, creative activities, positive thinking, spiritual activities and so on.^{8,9}

Nevertheless to say, the lockdown inevitably led to psychological stress responses. Individuals restricted at home tended to use social media to obtain the outbreak news, therefore were readily exposed to misleading news and unproven rumors.¹⁰ Their understanding of the COVID-19 situation easily fell into bias and thus constantly being bothered and scared. Delay in resuming work and persistence of epidemic caused anxiety about employer's layoff or bankruptcy. Some people suffered from high body temperature due to continuous anxiety and irritability and couldn't help measuring body temperature repeatedly. As such, many residents experienced nervousness, frustration, fear and mood swings.^{11,12} A nationwide survey reported that, under the threat of COVID-19, the prevalence of psychological distress is up to 35% among the general population in China.¹³

Youth is the highest population group and faced psycho-socio-economic problems in India.^{14,15} The psychological impact is one of major challenges faced by youth due to several factors such as internet addiction, academic pressure and so on.¹⁶⁻²¹ The coping strategies are one of the major factors to reduce psychological vulnerability among youth. The current study aimed to understand the stress, anxiety, depression and coping strategies among youth during lockdown in India. Moreover, the study intended to bring light on the urgent need of understanding and intervening among various stakeholders to get rid of their psychosocial problems due to the COVID-19 pandemic issues.

METHODS

The current study stands a cross-sectional descriptive study through snowball sampling techniques across India. The study population was youth age between 18 to 35 years old and 302 of them were did their response. The online survey was conducted during the third and fourth

phases, response were recoded from 9 May 2020 at 12:51 IST and ended on 24 May 2020 at 15:46 IST. An online questionnaire was made in google form included consent form, socio-demographic details such as age, gender, education, marital status, occupation and socio economic status of respondents. The DASS-21 tool was administered for assessing stress, anxiety and depression symptoms among youth during lockdown. The stress, anxiety and depression are the subscales of DASS-21 and each subscale comprises of seven statements regarding how the test subject was feeling over the last week and four responses ranging from 0-did not apply to me at all, 1-applied to me some of the time, 2-applied to me for a considerable amount of time to 3-applied to me very much/most of the time. The scoring system is of the Likert type and the total score for each subscale gives the severity of that very symptom which has a range from 0 to 21 for each subscale (Lovibond and Lovibond, 1995; Tran, Tran, and Fisher, 2013). The questions were included in coping strategies are use of social networking, recreational activities, relaxation/yoga/physical exercise, spending times in hobbies, task formulation and no activities done during lockdown. The English version self-reported online questionnaire was analysed through SPSS and content included in results are frequency distribution and comparison.

RESULTS

The major findings of the research study consisted of the socio-demographic data, the psychological impact of youth population, the coping strategies of youth during lockdown in India and a comparison between depression and domains of coping strategies among youth. The mean age of respondents was 24.27 (SD=3.99) and it means that majority of the respondents was college students. Table 1 depicts the socio-demographic details of youth in India. The majority of respondents were female (56.3%), 51.3% educated up to post graduate, 71.9% were unemployed, 81.5% were not married, 62.3% were from rural settings and 92.4 % from middle socio-economic background.

Table 2 illustrated the psychosocial impact such as stress, anxiety and depression among youth during lockdown. There were 36.8% of respondents had mild to extremely severe stress, 32% of them had mild to extremely severe anxiety whereas 48.7% had moderate to extremely severe depression during the early stage of lockdown in India. This indicate that the youth were not able to handle there psychological problems during the early stage of lockdown in India.

The coping strategies among youth during lockdown were depicted in Table 3. The majority of the respondents were spend social networking sites (30.4%) and 6.7% of them done task formulation and 4.5% were not engaged in any kind of activities. This indicates that the youth were engaged in some activities during the initial stage of lockdown in India.

Table 1: Socio-demographic details of youth in India.

Socio-demographics		N	%
Gender	Male	132	43.7
	Female	170	56.3
Education	Higher secondary	16	5.3
	Under graduate	112	37.1
	Post graduate	155	51.3
	M. Phil	10	3.3
	PhD	9	3
Occupation	Unemployed	217	71.9
	Government sector	16	5.3
	Private sector	64	21.2
	Self-employed	5	1.7
Marital status	Single	246	81.5
	Married	54	17.9
	Widow/widower	1	0.3
	Divorce	1	0.3
Area	Rural	188	62.3
	Urban	114	37.7
Socio-economic status	Upper	4	1.3
	Middle	279	92.4
	Lower	19	6.3

Table 2: Psychological impact among youth.

Psychological impact	Stress (%)	Anxiety (%)	Depression (%)
Normal	191 (63.2)	205 (67.9)	155 (51.3)
Mild	77 (25.5)	17 (5.6)	42 (13.9)
Moderate	22 (7.3)	53 (17.5)	72 (23.8)
Severe	9 (3)	11 (3.6)	14 (4.6)
Extremely severe	3 (1)	16 (5.3)	19 (6.3)

Table 3: Coping strategies of youth during lockdown in India.

Coping strategies	N	%
Social networking	195	30.4
Recreational activities	113	17.6
Relaxations/yoga/physical exercise	100	15.6
Spending times in hobbies	161	25.1
Task formulation	43	6.7
No activities	29	4.5

Table 4: Comparison between depression and domains of coping strategies among youth.

Comparison		Depression			X ²	P
		Low risk (%)	Moderate risk (%)	High risk (%)		
Social networking	No	66 (61.7)	29 (27.1)	12 (11.2)	1.07	0.58
	Yes	131 (67.2)	43 (22.1)	21 (10.8)		
Recreational activities	No	115 (60.8)	47 (24.9)	27 (14.3)	6.92	0.03*
	Yes	82 (72.6)	25 (22.1)	6 (5.3)		
Relaxations/yoga/physical exercise	No	126 (62.4)	52 (25.7)	24 (11.9)	2.1	0.33
	Yes	71 (71)	20 (20)	9 (9)		
Spending times in hobbies	No	84 (59.6)	34 (24.1)	23 (16.3)	8.32	0.01**
	Yes	113 (70.2)	38 (23.6)	10 (6.2)		

Continued.

Comparison	Depression					
	No	Yes	No	Yes		
Task formulation	No	163 (62.9)	66 (25.5)	30 (11.6)	4.24	0.12
	Yes	34 (79.1)	6 (14)	3 (7)		
No activities	No	181 (66.3)	63 (23.1)	29 (10.6)	1.43	0.48
	Yes	16 (55.2)	9 (31)	4 (13.8)		

The comparison on depression and coping strategies domains was depicted in Table 4. There were significant comparison between depression and recreational activities ($\chi^2=6.92$; $p=0.03$) and highly significant comparison between depression and spending times in hobbies ($\chi^2=8.32$; $p=0.01$) whereas the rest of the coping strategy domains not had comparison with depression. This indicated that the youth were not doing recreational activities or hobbies leading to high risk of depressive symptoms.

DISCUSSION

The current study found that there were 36.8% of respondents had stress, 32% of them had anxiety and 48.7% had depression during the early stage of lockdown in India. Due to various reasons the psychological impact occurred during lockdown. The lack of money, social distancing, unemployment were the major factors of psychological impact among individuals in society.^{22,23} A study mentioned that the prevalence of stress, anxiety and depression among adolescents and youth in India estimated the range from 5 to 70%. The range from mild to extremely severe stress was 20%, 24.4% of anxiety and 18.5% of them had depression.²⁴ The current study had high level of psychological impact among youth during lockdown. This indicates that initial stage of lockdown was very difficult to adjust among youth.

The study also focused on the coping strategies of youth during lockdown. A study also pointed out the social media played a major role to control the emotion, stress, fear.²⁵ This indicated that the social media is one of the major components to reduce psychological impact. The current study also found that the majority of youth's coping strategy was social networking sites (30.4%).

The relationship between stress and coping strategies has been a topic of previous studies, because in critical situations stress affects many people, but individual responses vary according to different coping strategies.²⁶⁻²⁸ Coping strategies refer to behavioural and cognitive efforts that help to reduce the pressure of a stressful situation and are used when its demands exceed individual resources.^{29,30}

There were studies found that recreational activities can reduce the depressive symptoms among individuals.^{31,32} The current study also found that there is a significant comparison between depression and recreational activities. The youth had no recreational activity lead to high level of depressive symptoms. However, COVID-19

leads to reduce the recreational activities of youth and increase the psychological distress. The hobbies provide sensual engagement, self-expression, creativity, relaxation and it was associated with a decrease depressive symptoms.^{33,34} Similarly found in the current study, highly significant comparison between depression and spending times in hobbies. The youth were not engaged in hobbies leads to high depressive symptoms. However the regular recreational activities and engaged in hobbies among youth may help to reduce the depressive symptoms. The limitations of the current study was only used English version questionnaire and need to include causal factors related to psychological impact among youth during lockdown. The less positive results may be because of the English version questionnaire administered among high educational youth.

It is recognised that a coordinated education systems, balance both physical and psychological well-being is a must to relieve stress and other reactions associated with any health or pandemic issues. The youth population also seek support from the existing and growing avenues like online support systems, virtual and net word based education in dealing issues also learning innovative things. The experiences underwent by the youth should be analysed and must be studies in detail to gather appropriate strategies to focus in building the education based on local knowledge, culture and psychological understanding. Education systems should be part of the response to prevent, limit or slow the spread of the virus and curtail its impact. Compared to the education system, the public health system has a smaller presence.

CONCLUSION

To cope with epidemic-associated stressful reactions, psychological crisis interventions a necessary intervention is essential in India to manage the impact of the pandemic. The coronavirus disease 2019 (COVID-19) pandemic may be stressful for people. Fear and anxiety about a new disease and what could happen can be overwhelming and cause strong emotions in adults and children. Public health actions such as social distancing, can make people feel isolated and lonely and can increase stress and anxiety. However, these actions are necessary to reduce the spread of COVID-19. The current study found that the youth had high level of psychological distress during the lockdown in India. Youth's first life time experience in social distancing and lockdown may leads to psychological impact. Therefore, the youth need psychosocial care and support during this pandemic and the youth need to take up physical-mental-spiritual self-

care activities. The study is recommended appropriate interventions targeted to the vulnerable populations in providing such a primary and advance level awareness, precautions and effective recovery mechanisms to be provided timely to reduce the psychological impact due to the pandemic. The policy level guidelines, revisiting the existing policies are also required to tackle many issues related to the pandemic.

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