pISSN 2394-6032 | eISSN 2394-6040

Letter to the Editor

DOI: https://dx.doi.org/10.18203/2394-6040.ijcmph20212636

Is the second wave of COVID-19 socially retrogressive? Social liaison is the need of hour

Sir,

The challenges of COVID-19 pandemic have invoked changes in behavioral patterns of the society. The retrogressive behavior has been one of the most frequently exhibited changes in behavior.^{1,2} There has been both a physical and emotional imbalance for the society at large. There has been an utter lack of empathy for the practiced cultural values and civilization norms.³

Society is expected to evolve and progress for the betterment of mankind. It is believed that changes benefit the humans to better the society. However, the COVID-19 pandemic specially the second wave has disastrously overturned into a life changing scenario preventing the development of the society.⁴

Isolation is a social stigma

The person or family in isolation after COVID-19 affection find themselves attached with a social stigma. The peers and societal support show a strange retrogressive attitude due to its extreme isolation and lockdown measures, creating social anxiety, panic states and extreme mental stress. The social infrastructure surrounding the isolated area undergoes a massive transformation. The societal pressures make the isolation more painful. There is immense lack of support in their hour of need in COVID-19 associated isolation. The measure of hatredness comes to boil as if the person or family have committed a grave social crime. They are projected as a blot on society with lack of compassion and care.

When the scientists are still trying to ascertain the transmission routes of the virus and it's changing patterns for the possibility of airborne transmission, the accusations of inappropriate COVID-19 behaviour are made and the onus of potential transmission lies with the sufferer. This happens even when a person or family follows all the appropriate measures and still gets infected. The lockdown may significantly affect the feasibility of providing appropriate logistical support and it enact borders with limited accessibility bringing disharmony in the society.

A progressive society enables every individual to develop his or her own character, skills and attitude for selfbetterment and peaceful co-existence. The normal norms of peer interactions have reduced markedly. The involvement of online and technology driven influence have perpetuated mechanization of human existence. A digitized version of the person seems to be overpowering the normal physical presence. There has been a progressive robotic and artificially intelligent based mechanized behavior. The social upbringing has been challenged. There seems to be a lack of love and compassion in life.

Care of the sick and dying person

The scarcity of medicines, oxygen supply and constrained medical infrastructure with overburdened resources have given no hope for the society during this second wave of the pandemic.⁷ There has been a perceptible impact on human interactions. The self-centered influence of the individual prevents many from visualizing the broader picture and escalation of conflict and aggression is inevitable.⁸ The impact on society is a war like situation, becoming a fertile ground for harmful and destructive nature to overshadow the natural supportive human thinking.⁴

The pandemic has severely jolted the positive values. Commonly an emotional retrogressive attitude of the society for the diseased infected person is being experienced. There has been an unparalleled fear beyond comprehension when expected to take care of a sick diseased COVID-19 sufferer. No touching, no caring, no communication, no compassion has been the norm practiced by the commoner. The person in isolation has suffered more mentally than physically with the imposed social deprivation. The despair weakens one's mental strength to make efforts to overcome the sorrow and agony.

The deceased in their last journey were normally accompanied by family, relatives and well-wishers who showered their heartfelt condolences. Presently this changed to limited social calls and messages to probably follow the civilized norms. Sometimes the immediate family may not be even able to pay their last homage and tributes to the deceased because of COVID-19 restrictions. The rituals and grief become short-lived with no personal sympathy forthcoming for the affected family. The retrogression in society with individualization becomes all the more alarming as we feel the increasing burden of COVID-19 pandemic with retrogressive changing societal involvement for the deceased. Limited

personnel involved in their limited capacity are overburdened in disposition of the dead.

The retrogressive society behavior has been demoralizing and it needs corrective measures. Normally, a sick or diseased person in society is expected to be supported with compassion and care. The life teachings of Mother Teresa had taught mankind to take care of the untouchables, unhealthy persons of poor physical and mental health with selfless acts of compassion, love and care. Humanitarians like her have enlightened our path with their values. The deeply engraved principles in the society to perform charity for the betterment of the miserable and show respect to the dead in their last journey to attain peace have been questioned with the second wave of pandemic.⁷

Where lies the solution?

The immediate need of the hour is for a collective community effort to mitigate the negativity and propagate the positive progressive upliftment of the society. Compassion and care need to be de-individualized to alleviate the demoralizing public health concern of disastrous magnitude. A shared common goal for every individual should be to support each and every individual both physically and mentally. Social liaison is the need of the hour.

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REFERENCES

- 1. Crossley TF, Fisher P, Low H. The heterogeneous and regressive consequences of COVID-19: evidence from high quality panel data. J Public Econ. 2021;193(1):104334.
- Knell G, Robertson MC, Dooley EE, Burford K, Mendez KS. Health behavior changes during COVID-19 pandemic and subsequent stay-at-home orders. Int J Environ Res Public Health. 2020;28(17):6268.
- 3. Bump JB, Baum F, Sakornsin M, Yates R, Hofman K. Political economy of COVID-19: extractive, regressive, competitive. BMJ. 2021;22:372-73.
- 4. Zoumpourlis V, Goulielmaki M, Rizos E, Baliou S, Spandidos DA. The COVID-19 pandemic as a scientific and social challenge in the 21st century. Mol Med Rep. 2020;22(4):3035-48.
- Madhav N, Oppenheim B, Gallivan M, Mulembakani P, Rubin E, Wolfe N. Pandemics: Risks, Impacts, and Mitigation. In: Jamison DT, Gelband H, Horton S, eds. Disease Control Priorities: Improving Health and Reducing Poverty. 3rd ed. Washington (DC): The International Bank for Reconstruction and Development/The World Bank; 2017.
- 6. Singh J, Singh J. COVID-19 and its impact on society. Electron Res J Soc Sci Humanit. 2020;2(1).
- 7. Matthewman S, Huppatz K. A sociology of COVID-19. J Sociol. 2020;56(4):675-83.
- 8. Kanupriya. COVID-19: a socio-economic perspective. FIIB Bus Rev. 2020;9(3):161-6.
- 9. Masten AS, Narayan AJ, Silverman WK, Osofsky JD. Children in war and disaster. In: Lerner RM, Bornstein MH, Leventhal T, eds. Handbook of child psychology and developmental science. 7th ed. New York: Wiley; 2015: 704-45.

Cite this article as: Govil G, Tomar L, Dhawan P. Is the second wave of COVID-19 socially retrogressive? Social liaison is the need of hour. Int J Community Med Public Health 2021;8:3723-4.