

# PSYCHOLOGICAL AID TO COVID-19 PANDEMIC: A MENTAL HEALTH RESPONSE TO CRISES MANAGEMENT

Sana Rehman<sup>1</sup> & Umi Lela<sup>2</sup>

<sup>1</sup>Department of Psychology, Gift University Gujranwala, Punjab, Pakistan

<sup>2</sup>Gift University Gujranwala, Punjab, Pakistan

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## SUMMARY

*Catastrophic Pandemics have been adversely impacted the globe throughout human history. As a consequence psychiatrist, psychologist and mental health practitioners performed their role to mitigate the adverse impacts through its scientific and clinical lenses. It was observed that due to advance nature of COVI-19 pandemic, more advance approach of psychological aid is required. This work gives an overview of the multi-dimensional and trans-disciplinary techniques, which can be helpful to cope up with the crises that emerged from the threat of COVID-19 Outbreak for victims, survivors, health care practitioners and community.*

**Key words:** *psychological aid - COVID-19 pandemic - mental health response*

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## INTRODUCTION

Sudden infection outbreaks continue to unfold throughout human history. The most common infection outbreak that has been reported in history were the HIV/AIDS epidemic that captivated world attention in the 1980s and 1990s (WHO 2008). The (SARS) severe acute respiratory syndrome occurred in 2002-2003 (Chan & Huak 2014). Furthermore, the H1N1 influenza pandemic of 2009 (Ofri 2009), Spanish Flue Pandemic (1918-1920), the Ebola virus outbreak in 2014 (Strauss 2014), Black Disease (Lee 2018) and the Zika virus outbreak in 2016 were very devastating. All these outbreaks are not merely proclaimed to develop the physical sufferings, but bring about huge psychological burden (Wang et al. 2020). The mental health practitioners, psychologists and psychiatrist became active after these outbreaks, and bring about substantial improvement (Xiang et al. 2020).

Previously the role of psychologist, psychiatrist and mental health practitioners have been very crucial to mitigate the obnoxious consequences of the epidemic. In the 21<sup>st</sup> century, with the global advancements, the emergence of COVID-19 found to be more complex in its emergence. Its consequences and effects can be seen among victim, survivors, communities, health care staff and practitioner. As of February 28, 2020, around 83,704 confirmed cases have been reported globally with 2,8590 deaths (WHO 2020).

In this scenario the collaborative work of the mental health practitioner, psychologists and psychiatrist can bring about significant reduction in the adverse psychological effect of a pandemic. As the impact of COVID-19 is devastating; therefore, a multi-dimensional approach for psychological aid is mandatory, considering the current needs of the community, health care staff and patients (Duan & Zhu 2020). The advanced multi-dimensional approach for psychological aid to the community should be comprised of 4 dimensions such as social

distancing, cultural and religious belief, psychodynamic perspectives and psychopharmacological concerns. The current study provides a comprehensive framework about possible psychological aid programs to facilitate the community, victim and health care staff in the crucial time of the pandemic.

## E-MENTAL HEALTH APPROACH AND DIGITAL PSYCHIATRY

It was observed that COVID-19 is a highly infectious disease with an estimated reproductive number (R<sub>0</sub>), ranging from 1.4-6.49 (Ying et al. 2020). Hence, social distancing is very crucial aspect during such communicable diseases as precautionary and preventive measures. The concept of social distancing emerged at the time of Black death in 1377 by the city-state of Dubrovnik. Social distancing has been divided into two categories, i.e. isolation and contagion. Isolation separates the ill persons who are diagnosed with a communicable disease from healthy people to stop the spread of illness. In contrast, the quarantine refers to healthy people who are at risk of developing the disease if exposed to infected agents (Huremovic 2019).

During the time of isolation and quarantine, it was hard to for psychologist, psychiatrist and mental health practitioner to provide psychological aid to people due to limited geographical access. In this critical time, the ever-increasing proliferation of internet can mitigate the treatment gap during pandemic crises. E-mental health approach and digital psychiatry intend to facilitate the people due to limited geographical access (Ćosić et al. 2020). Many psychologists, psychiatrist and health care practitioner have designed an impressive framework for the development of an e-CBT approach for healing the affected people. The most impressive E-CBT approach comprised of 12 steps approaches following the asynchronous format (Alvi & Omrani 2020).

Currently, in the critical time of COVID-19 pandemic, many hospitals have moved to provide an online session for psychological and mental health issues. The steps towards online counselling and psychological aid are good, but a proper framework should be followed while delivering such treatment modalities. Apart from patients, the people living in quarantine also get benefits from such services. As people often report boredom, anxiety, depression, aggression, fear, frustration, and perceptual sensitivity (WHO 2020). Therefore the psychological aid through e-CBT or digital psychiatry may help them to control their symptoms and cope up with the situation.

The health care staff also encounter the psychological burden during and aftermath of the pandemic. They also need psychological healing as long duty hour, physical contact with the infected person, fear of getting an infection, and distance from family adversely affect their mental health. They should be given website access, smartphone and laptop to communicate with their respective families. Also, they should be facilitated by psychological aid. The unaddressed needs and emotional wounds health care practitioners can revert able long even after the Outbreak has abated.

## THE USE OF PSYCHODYNAMIC APPROACH DURING PANDEMIC

The second advance approach is a psychodynamic perspective that should be considered while providing psychological aid during a pandemic. According to the psychodynamic approach, the COVID-19 pandemic not merely affects the physical immune system but also attack behavioural immunity. Hence psychodynamic aspects are crucial to understand and manage the mental and psychological problem associated with the pandemic (Marčinko et al. 2020). The most prevalent pandemic mental and psychological or behavioural issues reported being xenophobia, defensive reaction, over-reaction, under-reactions, stigmatization, and spreading panic (Brooke & Jackson 2020). According to the psychodynamic approach, psychological aid can be given through the unconscious mind and psychodrama. It also threw light on the crucial role of defence mechanisms.

### *Unconscious Mind*

The complex content underlying in the unconscious is very crucial to understand human behaviour during the pandemic. What factors motivate people not to change their behaviour for precautionary measures. An unconscious mind is a place where most of the upsetting events are buried. Childhood experiences and current relationships are vital to understand and control the current behaviour of the people. The effects of COVID-19 pandemic should be tackled by assessing and managing the role of collective unconscious associated with archetypes. Every aspect of archetype has some symbolic meanings which are imperative to understand while delivering psychological aid. In 2020 the people should learn

from the experiences of the survivors of the previous pandemics. The psycho pandemic through the unconscious mind is significant to deal with painful memories.

### *Defence Mechanism*

Defence mechanisms as a therapeutic intervention produce better results, especially for those people who do not have better psychological adjustments. The defence mechanism such as Denial, Disavowal displacement, Idealization, Grandiosity Narcissism, Projection, Splitting, is found to be crucial. These defence mechanisms can be used for treatment during COVID-19 pandemic situation.

Some other mature defence mechanisms improve the resilience capacity during crises. Humour, anticipation, altruism, and self-observation are the most important mature defence mechanisms. The Covid-19 Outbreak in 2019 is stressful for people; therefore, to develop a positive psychological change, it is important to understand the ingredients of adaptation and process of adaptation (Fiorillo & Gorwood 2020). The therapist assistance to patients in recognizing the defence mechanisms is helpful in avoiding the painful feelings housed in the unconscious mind. Furthermore, to connect with the accurate releasing of those feelings that were buried previously. Surprisingly the effectiveness of immature defence mechanism in releasing the stress of pandemic trauma is more effective than a mature one.

### *Psychodrama*

Psychodrama has been very popular in the prevention control and experiential management (Drakulić & Radman 2020). The most effective and unique approach of psychodrama is the Therapeutic Spiral Model – TSM (Hudgins 2002). TSM is a conscious reviling of trauma through safe guidance that helps the patient to transform his victim role. The pandemic crises affect the power of verbalization; as a result, psychological comprised of symbolic ideas. TSM is the best technique that helps the protagonist to understand his/her emotions through a spiral of images. In this therapeutic process, the protagonist learns how to react calmly with the spiral of images.

Three strands of spiral use: manifest the internal states of the protagonist regarding trauma. The first strand refers to the energetic, spontaneous and creative level during the series of the pandemic spiral. The protagonist can play a versatile role such as father, mother, brother or sister during the COVID-19 Outbreak (Chen et al. 2020). The second strands are to make the protagonist aware of his feeling without being psychologically disturbed. The third strand is giving meaning to the experiences of the protagonist. If a person can go through all the three strands, so that means he is functionally and psychologically healthy. In this way, the protagonist learns to change their behaviour by experiencing new exceptions.

### *Creating Recovery-Oriented Role*

Creating Recovery-Oriented Role American psycho dramatist, Tian Dayton discovered the new undeveloped protagonist role in psychodrama with three exceptions

(Dayton 2003). Firstly, the protagonist should be provided with a space for practising the role for better adaptation. Secondly, it should be assessed if the role suits the protagonists or not. Thirdly, it is mandatory to be ready for understanding the perspectives of others and self as well. This type of role is known as “recovery-oriented role” emphasizing the significance of the psychodynamic approach (Dayton 2003). Generally, in psychodrama therapist and protagonist follow the multiple group psychotherapeutic work, but in situation the circumstances of social distancing, it is important to understand the models for the individual setting. For example, as a substitute for the initial warm-unique group, psychodrama interventions can be played for individual such as free association, which can also escort to action. In addition, as the therapeutic relationship between the therapist and protagonist is very crucial to set up the drama setting and for role reversal. In the social distancing situation and individual setting, the protagonist can be offered a variety of psychodrama prompt such as blankets, balls, pillows and scarves (Chesner 2019).

## **CULTURE IN MANAGING MENTAL HEALTH RESPONSE**

Communities’ response to outbreaks and their willingness to embrace the interventions to mitigate the effects of an outbreak can significantly influence the outcome. In diverse countries of the world, the cultural beliefs, custom tradition and religious beliefs immensely affect the intervention outcome. Therefore the psychological aid must be designed according to the cultural and religious diversities. Generally, the psychological aid follows the code of ethics and code of conduct, and the religious and cultural practices are overlooked. Numerous religious & cultural practices, beliefs and attitudes affect the mental health of the survivors in the aftermath of the crisis. The advance psychological aid must consider the cultural diversities and religious beliefs of the people to deal with their sufferings. For example, the geographical composition of India is multi-cultural, and the complexity of its religious and diversity leads to poor mental health practices at health care. The practitioner and psychologist provide advantages to those who belong to the same religion or culture. Therefore while designing the psychological aid for pandemic the psychologist, psychiatrist mental health practitioner must be with the same entity.

The religious belief such as cow urine is considered as a protection shield against the virus. In addition, the religiously-oriented obligations discourage social distancing and refusal from adhering to rule restrictions. Social and behavioural change communication can be implemented by incorporating a cultural and religious belief in each country under the broad framework of the health arena.

Augusto, Teboh-Ewungkem, and Gumel investigated the role of traditional beliefs and customs on the transmission of the Ebola outbreak. They found that the

beliefs of people contributed to the spread of illness. Furthermore, they suggested that the identification of cultural parameter are significant in developing an efficient control strategy. Similarly, the results of Ebola crises international interventions effected due to the religious framework in West Africa in 2014-2015 (Huremovic 2019). Similarly, in the Muslim community, religious and cultural practices are very diverse. The healing from disease or infection through prayers is the common belief of Muslims. The concept of keeping the deceased body in the cotton for burial is also very common. As the Muslims communities who succumbed to EVD, the deceased bodies were buried in the bags instead of cotton. Such practices were very upsetting for the Muslim, as it was against the ritual and religious belief (Huremovic 2019). Furthermore, the mental health or psychological intervention based on the western perspective was least acceptable for them still during the COVID-19 the Muslims often practice religious healing procedures rather than precautionary scientific measure. Also, the psychological can be beneficial for them, if it is designed according to injunctions of the Quran, sunnah and Islam.

In addition, the diverse countries of the world encompass of multiple religious and cultural practices. Hence it is difficult to design a universal intervention approach that all the communities can embrace. Therefore the psychological aid or management plan should be design considering the target population religious and cultural practice. The positive outcome of psychological aid can be achieved through cultural and religious belief enactment.

## **PSYCHO-PHARMACOLOGICAL TREATMENT**

The magnitude of Neuropsychiatric complication during and after the pandemic has always been high (Stern & Markel 2004). The development of mental illness found to be consistent with the use of infection outbreak treatment. It was observed that not only pandemic, infection outbreak and human loss cause the psychological or mental health disturbance, but the persistence exposure to vaccination and pharmacological treatment also affects mental health. A nested case-control at the UK reported that persistent antibiotic exposure, in particularly quinolones and pencilling has been associated with the high risk of depression and anxiety (Huremovic 2019).

Infection treatment with an antiviral agent and diverse vaccination also associated with the psychiatric complication. In response to persistence exposure to pharmacological treatment, the common mental health issues found to be Schizophrenia, mood disorder, delirium, psychotic symptoms. Therefore the provision of pharmacological treatment along with psychological intervention is mandatory to produce better results. The management of anticipation of contagion through treatment should also be treated along with psychological aid. Unfortunately, it is impossible o treat mental health issues with the pharmacological approach without psy-

chological interventions. The combination of psychiatric, psychological and mental health approach might be used for a better understanding of the people.

## CONCLUSION

The advance multi-dimensional approach is important to mitigate the devastating impact of COVID-19 Outbreak. The combination of e-mental health approach or digital psychiatry, psychodynamic approach and psychopharmacological treatment would produce better results in the critical time of the pandemic.

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## Contribution of individual authors:

Sana Rehman: conceptualised the paper, write up, proof reading and editing.

Umi Lela: helped in searching literature, review and give a final review to the paper.

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## Correspondence:

Ms Sana Rehman, Scholar and Lecturer  
Department of Psychology, Gift University  
Sialkot Bypass, Lohian Wala, Gujranwala, Punjab 52250, Pakistan  
E-mail: sanarehmanpk@gmail.com