COVID-19 and Mental Health

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Although coronavirus disease (COVID-19), first and foremost, is a physical health crisis, it has the potential to evolve into a mental health crisis as well. In fact, various surveys and studies already document a significant negative psychological impact of COVID-19 around the world. For example, according to a May 2020 United Nations report, 35% of Chinese, 45% of Americans, and 60% of Iranians were in mental distress during the pandemic. A survey done by Ipsos in 15 countries shows that COVID-19 is dominating the concerns of global citizens. The score of the pandemic was the highest since the survey started 10 years ago, which suggests that it has become the dominant global concern (see figure below). In opinion polls conducted in individual countries, including Canada, the United Kingdom, and the United States, respondents report that their mental health was harmed by worries and stress over the coronavirus (Angus Reid 2020, Office for National Statistics of the United Kingdom 2020, National Public Radio 2020, and Morning Consult 2020).

<table>
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<tr>
<th>Top Five Global Concerns</th>
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<tr>
<td>61% COVID-19</td>
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<td>35% Unemployment</td>
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<td>28% Health care</td>
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<td>27% Poverty and social...</td>
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<td>22% Finances and/or politics</td>
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Note: Research conducted in April 2020 among adults aged 16–64 in 28 participating countries.
Source: Atkinson, Skinner, and Gedrekal 2020
At a broader level, COVID-19 is both an unprecedented global public health crisis and a global economic crisis. Therefore, from the perspective of individual mental health, health-related fears and stress, e.g., infection, death, and losing family members, are compounded by fears and stress that are related to economic hardship, e.g., loss and potential loss of job and income. Online surveys reveal anxiety, often associated with impaired sleep, to be the most common mental health symptom (Xiao et al. 2020a, b; Rossi, Socci, Talevi, Mensi, et al. 2020; and Liu et al. 2020). Some contributory factors that were identified include poor physical health (Wang et al. 2020), COVID-19-related life event (Rossi, Socci, Talevi, Mensi, et al. 2020), misinformation and high exposure to social media (Zandifar and Badrfam 2020; and Gao, Zheng, Jia, et al. 2020), and quarantine or social isolation (Rossi, Socci, Talevi, Mensi, et al. 2020; and Zandifar and Badrfam 2020). Many hospital staff, including frontline medical personnel, face mental health issues (Kang et al. 2020; Tan, Chew, Lee, et al. 2020; Xiao et al. 2020a; and Zhang, Yang, Liu, et al. 2020). Reasons cited include extended working hours, risk of infection, lack of personal protective equipment, loneliness, physical exhaustion, and separation from families.

There are many things that individuals can do to maintain mental health during COVID-19 and beyond. Healthy everyday habits, such as eating well, exercising regularly, and keeping in touch with family and friends, including through online telecommunications apps, help. Specialized wellness practices, such as meditation, tai chi, and yoga, are also beneficial for mental health, as is regular physical exercise.

References


