

The Aftermath of Corona Pandemic on the Psychosocial Life of Coimbatore South Population: A Cross-sectional Study

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Abstract

Introduction: Coronavirus disease is an infectious disease caused by a newly discovered coronavirus. Since the new coronavirus can spread unnoticed so easily, many governments have felt the best way to ensure people having minimal contact with each other is to order total lockdowns. This study is performed a month after lockdown to evaluate the impact of corona pandemic on the psychosocial life of Coimbatore south population.

Materials and Methods: A cross-sectional randomized study was conducted at Coimbatore South, Tamil Nadu, India, between April 26, 2020, and April 30, 2020. The sample size was 600. Pre-tested structured and self-structured e-questionnaire was sent to the study population and the answers were viewed using separate email id.

Results: Of the 600 people, 59.5% were males and 40.5% were females. The majority (82.5%) of people felt that they were safe during the pandemic majority of people (61%) felt that the modern lifestyle was the cause for the pandemic and 66.9% of the people increased the usage of traditional and natural remedies during the lockdown.

Conclusion: We infer that the majority of the people (55%) enjoyed the break from their routine with an eye on their education and career.

Key words: Boredom, Coronavirus, Lockdown, World Health Organisation

INTRODUCTION

Coronavirus disease-2019 (COVID-19) is an infectious disease caused by a newly discovered coronavirus.^[1] The World Health Organization (WHO) used the term 2019 novel coronavirus to refer to a coronavirus that affected the lower respiratory tract of patients with pneumonia in Wuhan, China, on December 29, 2019.^[2,3] The WHO announced that the official name of the 2019 novel coronavirus is COVID-19, which has now been declared

as a Public Health Emergency of International Concern by the WHO.^[4] The COVID-19 virus spreads primarily through droplets of saliva or discharge from the nose when an infected person coughs or sneezes. Most of the infected people will develop mild to moderate symptoms and recover without requiring special treatment. People who have underlying medical conditions and those over 60 years old have a higher risk of developing severe disease and death.^[5] People with mild respiratory symptoms who are otherwise healthy should self-isolate and contact their medical provider or a COVID-19 information line for advice on testing.^[5] Globally, as of 2.00 AM CEST, April 27, 2020, there have been 213 countries, areas, or territories with cases 2,883,603 confirmed cases of COVID-19, including 198,843 deaths, reported to the WHO.^[6,7] At this time, there are no specific vaccines or treatments for COVID-19. However, there are many ongoing clinical trials evaluating potential treatments.^[1]

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In the absence of treatment or a vaccine, ceasing most human contact is really the only way to stop the spread of the virus. Essentially, the less the people have contact with each other, the less the virus can spread. Since the new coronavirus can spread unnoticed so easily, many governments have felt the best way to ensure people having minimal contact with each other is to order total lockdowns, with people only being allowed to leave to get food or medicine and to practice social distancing when they do leave their houses. To stay in houses with family and to work from home is quite unusual for people. At the time of our study, the first phase of lockdown was from March 25, 2020, and April 14, 2020. The second phase of lockdown continued from April 15, 2020, and is supposed to end on May 3, 2020. This study was performed a month after lockdown to understand the impact of corona pandemic on the psychosocial life of Coimbatore South population.

MATERIALS AND METHODS

Study Design and Setting

A cross-sectional randomized study was conducted at Coimbatore South, Tamil Nadu, India, between April 26, 2020, and April 30, 2020.

Study Population

Sample size: 600.

Inclusion Criteria

The following criteria were included in the study.

- Physiologically active males and females between 20 and 60 years old
- People residing in the same address for more than 6 months.

Exclusion Criteria

The following criteria were excluded from the study.

- People of age below 20 years old and above 80 years old
- Patients suffering from mental illness and bedridden patients were excluded from the study.

Data Collection

Since the Government has ordered complete lockdown all over the country, collecting data directly from a person using a questionnaire was practically not possible. Hence, data collection was done using Google form in the local language and English language. The study protocol was approved by the local ethical committee. The study population was determined by stratified random sampling. Pre-tested structured and self-structured e-questionnaire was sent to the study population and the answers were viewed using separate email id. Any user with average internet knowledge would be able to access the form and answers the questions.

Only those who read and acknowledged the consent were able to participate in the study.

Questions related to psychosocial life during the specified time due to lockdown was structured. Each question had three responses, namely, yes, no, and unable to decide. Participants had to choose one option only. They are as follows...

RESULTS

The e-questionnaire was sent to 626 people. Of these, 26 people did not respond. Only 600 people responded. Hence, we accepted them as our study population.

Of the 600 people, 59.5% were males and 40.5% were females [Table 1].

This shows that males have better access to mobile phones and internet facilities.

About 69.2% of people fell under the age category of 20–30 years and 4.4% of people fell under the age category of 51–60 years [Table 2].

Table 1: Gender

Gender	Number of participants	Percentage
Male	357	59.5
Female	243	40.5
Others	0	0

Table 2: Age

Age groups	Number of participants	Percentage
20–30	415	69.2
31–40	90	15
41–50	55	9.2
51–60	26	4.4
61–70	13	2.2

Table 3: Residence

Residence	Number of participants	Percentage
Village	134	22.4
Semi urban	111	18.5
Urban	209	34.8
Metropolitan	146	24.3

Table 4: Educational qualification

Qualification educational	Number of participants	Percentage
10 th –12 th	38	6.3
Graduate	302	50.3
Postgraduate and above	226	37.7
Others	34	5.7

From this, we understood that the people between 20 and 30 years of age actively accessed the internet. This may be because they were students or worked from home.

About 34.8% of people are from the urban area, 24.3% of people are from the metropolitan area, 18.5% of people are from the semi-urban area [Table 3].

Hence, in total, the majority of the population (77.6%) had a good lifestyle. The literacy rate was about 94.3% in total [Table 4]. The majority of the people, namely, 56.7% were unmarried [Table 5].

A set of 20 questions were asked to assess the mental well-being of the study population [Table 6].

The majority of the people (50.5%) felt that their productivity was affected during lockdown and 36.3% of people felt that their productivity was unaffected [Table 6].

About 65.6% of people felt lonely during this lockdown and 30.4% of people did not feel anything abnormal [Table 6]. This could be because the majority of the study population were unmarried [Table 5].

About 59.5% of people felt that spending time on social media really helped them to kill time [Table 6]. This could

be because the majority of the population were between 20 and 30 years of age [Table 2].

About 14% of people had negative thoughts about their health, whereas 81.8% did not have negative thoughts about their health [Table 6]. This could be because of the fact that they all remained indoors and avoided human contact.

One of the most astonishing facts from the study was that majority of the population (63.4%) did not bother about corona related WhatsApp images and stories, while 31.8% of them felt that it did affect [Table 6]. This is because of the adequate awareness taken by the Union and the State Governments.

The fear about gaining weight (44.8%) and vice versa (45.7%) among the study population was almost equal [Table 6].

Another astonishing fact about our study was that 79.7% of people engaged in more household work during the lockdown period. Only 18% of people did not involve [Table 6]. This shows that the basic oneness among the family has not lost even in this fast-paced world.

About 55% of people felt that it was good to have a break from their routine and 36.8% of people felt the other way [Table 6]. This may be because the majority of the population would not have taken an adequate break during the other days.

In another question, we found that 55% of people experienced boredom during the lockdown period and 38% of people did not experience any boredom [Table 6].

Table 5: Marital status

Marital status	Number of participants	Percentage
Married	258	43
Unmarried	334	55.7
Divorced	4	0.7
Separated	4	0.7

Table 6: Questions and responses

Questions	Yes (%)	No (%)	Unable to decide (%)
My productivity is affected since lockdown	303 (50.5)	218 (36.3)	79 (13.2)
I feel lonely during this lockdown	393 (65.6)	182 (30.4)	24 (4)
Spending time on social media help me to kill the time	357 (59.5)	191 (31.8)	52 (8.7)
I have any negative thoughts about my health	88 (14.7)	49 (18.1)	21 (3.5)
I feel that corona related WhatsApp images and stories affect my thoughts	380 (31.8)	191 (63.4)	29 (4.8)
I have gained weight during this lockdown	269 (44.8)	274 (45.7)	57 (9.5)
I am getting myself involved in more household work during this lockdown	478 (79.7)	108 (18)	14 (2.3)
I feel good because of a break from my daily routine?	330 (55)	221 (36.8)	49 (8.2)
I experience boredom due to ongoing lockdown	331 (55)	226 (38)	43 (7)
I am worried about my job	308 (51.3)	257 (42.8)	35 (5.8)
There are relationship conflicts during this lockdown	362 (60.3)	182 (30.3)	56 (9.3)
My personal life is affected	192 (32)	383 (63.8)	25 (4.2)
I feel that tele-counseling is effective during lockdown	221 (36.8)	236 (39.3)	143 (23.8)
Use of herbs and traditional remedies have increased in my house	401 (66.9)	169 (28.3)	29 (4.8)
My gut feeling says that I am safe during this pandemic	495 (82.5)	44 (7.3)	61 (10.2)
I feel our traditional lifestyle is the best	516 (86)	38 (6.3)	46 (7.7)
I do not enjoy things the way they were earlier	264 (44)	218 (36.3)	118 (19.7)
I am worried about self/children's education/career	368 (61.3)	186 (31)	46 (7.7)
My sleep, appetite, and daily life are disturbed	289 (48.2)	293 (48.8)	18 (3)
Modern lifestyle is responsible for spread of COVID-19	366 (61)	118 (19.7)	116 (19.3)

Table 7: Occupation

Occupation	Number of participants	Percentage
Self-employed	52	8.7
Government employee	43	7.2
Private employee	257	42.8
Homemaker	34	5.7
Not employed	17	2.8
Student	163	27.2
Retired	13	2.2
Other	21	3.5

This may be due to the fact that the majority (51.3%) of the study population were employed [Table 7].

As expected by us, 60.3% of people had relationship conflicts during this lockdown period and 30.3% of people did not have any relationship conflict [Table 6]. This could be due to the fact that the majority of the population were left unemployed due to lockdown and faced issues like boredom.

One of the interesting facts of our study was that only 32% of people felt that their personal life was affected and the majority of them, namely, 63.8% of people felt the opposite [Table 6].

About 36.8% of people felt that tele-counseling was effective during lockdown and 39.3% of people felt that tele-counseling would not be effective during lockdown and 23.8% of the study population were unable to decide [Table 6].

Another good thing during the lockdown was that about 66.9% of people increased the usage of traditional remedies in their houses. This could be due to the fact that people started to realize the importance of traditional and natural things in the day to day life and 86% of people felt that they were the best.

The majority (82.5%) of people felt that they were safe [Table 6] during the pandemic and 7.3% of people felt that they were not safe. This could be due to the effect of staying indoors.

As expected, 44% of people did not enjoy things the way they enjoyed them earlier and 36.3% of people said that they did not find any differences [Table 6].

As expected, about 61.3% of people worried their own/children's education/career and 31% of people had no worries about them [Table 6].

Interestingly, 48.2% of people felt that their sleep, appetite, and daily life were disturbed and 48.8% of people felt

that their sleep, appetite, and daily life were not disturbed [Table 6].

About 61% of people felt that the modern lifestyle was responsible for the spread of COVID-19 and 19.7% of people felt that the modern lifestyle had nothing to do with COVID-19 [Table 6].

DISCUSSION

According to Seligman (2002), happiness was composed of 3 subjective facets: Positive emotion, engagement, and meaning. Happiness was, therefore, achievable by pursuing one or more of these facets. As a result, individuals low in one aspect could still be "happy" if they nurtured other components. In our study, we aimed to understand the impact of lockdown in the lives of people. We infer that the majority of the people (55%) enjoyed the break from their routine with an eye on their education and career. The majority of the people (79.7%) involved in household activities with their fellow family members. The majority of people (61%) felt that the modern lifestyle was the cause for the pandemic and 66.9% of the people increased the usage of traditional and natural remedies during the lockdown. Before the study, we expected the people to be stressed because of staying indoors for one continuous month. After analyzing the data, we were astonished that most of the people were positive and felt good. This could be due to the awareness created by the Government and the role of media is commendable.

CONCLUSION

We infer that the majority of the people (55%) enjoyed the break from their routine with an eye on their education and career. This is the impact after 30 days only. However, the same study has to be repeated again after a month to know whether this lockdown still remains a blessing on the psychosocial life of the people or a catastrophe!!

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