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# Impact of COVID in Human Psychology Regarding Standard of Living

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**ABSTRACT:** The recent Covid-19 pandemic has had significant psychological and social effects on the population. Research has highlighted the impact on psychological well-being of the most exposed groups, including children, college students, and health workers, who are more likely to develop post-traumatic stress disorder, anxiety, depression, and other symptoms of distress. The social distance and the security measures have affected the relationship among people and their perception of empathy toward others. From this perspective, telepsychology and technological devices assume important roles to decrease the negative effects of the pandemic. These tools present benefits that could improve psychological treatment of patients online, such as the possibility to meet from home or from the workplace, saving money and time and maintaining the relationship between therapists and patients.

**KEYWORDS-**COVID, pandemic, psychology, standard, living, home

## I. INTRODUCTION

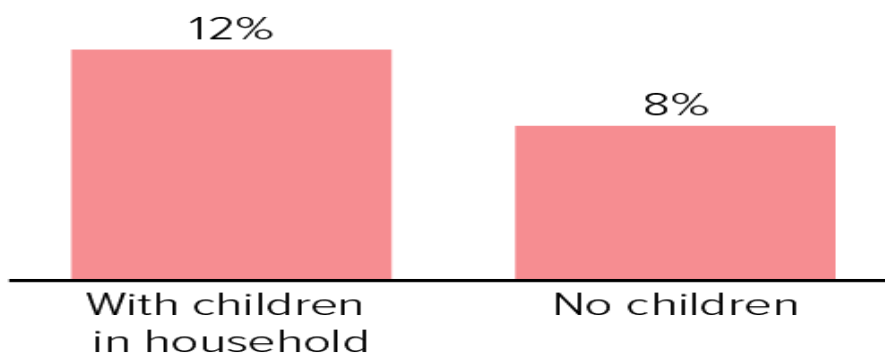
The Covid-19 pandemic led to a prolonged exposure to stress. As a consequence, researchers showed an increased interest in measuring social and community uneasiness in order to psychologically support the population. This increased attention might help in managing the current situation and other possible epidemics and pandemics. The security measures adopted in managing the pandemic had different consequences on individuals, according to the social role invested. Some segments of the population seem to be more exposed to the risk of anxious, depressive, and post-traumatic symptoms because they are more sensitive to stress.[1,2,3]

The following article has two focuses of interest: (1) the evaluation of the psychological and social effects of the pandemic on the population, mostly children, college students, and health professionals; and (2) the identification of new perspectives of intervention based on digital devices and in line with the social security measures and mental health promotion. Telepsychology, for instance, is a valid tool, effective in taking charge of the psychological suffering caused by the pandemic and in preventing the chronicity of the disease. The prolonged stress could involve anxiety, depression, and the inability to manage traumatic and negative emotions. Furthermore, the constant fear of contagion affects daily life and leads to social isolation, modifying human relations.



## For Nearly 1 in 8 Adults With Children, Household Lacked Sufficient Food

Share of adults saying that their household sometimes or often did not have enough to eat in the last 7 days, October 2021



Note: Chart excludes individuals who did not respond to the question.

Source: CBPP analysis of Census Bureau Household Pulse Survey tables for September 29 - October 11, 2021

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COVID-19 is unique in the way that it has spread far beyond health centers' borders. With the entire population at risk, the necessary restricting measures have created an unparalleled scenario, dominated by fear and uncertainty. Even though fear is an essential adaptive mechanism that humans and other species have developed to cope with threats in the environment, it can only be supportive for those who feel capable of dealing with the menaces presented specifically to them. To those who consider themselves as unable to handle such risks, fear can trigger defense responses. It seems obvious that prolonged lockdown and social distancing can be pernicious to people's mental health, as is evident in the various psychological complications noted to be rising progressively.[5,7,8] For example, more uncertainties, loneliness, anxieties, frustrations, stress, and depression were noted. The independent or combined influences of these factors can impose pressures on the normal lifestyles of the people, such as causing them to experience psychiatric conditions. It had been showed that various factors, such as feelings of hopelessness, social isolation, interpersonal problems, fear of contagion, mood disorders, chronic stress, and vast economic difficulties can cause psychiatric disorders, and for some, even suicide. It has been predicted that even after the pandemic has subsided, an increase in suicidal behaviors can occur, hence there is a necessity to address this issue.

As a result of the COVID-19 pandemic, economic activity has contracted around the globe. Fear of the virus and strict social distancing policies have led individuals in virtually all countries to modify their consumption and working habits. Economically vulnerable citizens of low- and middle-income countries (LMICs), where the majority of the world's population resides, potentially face stark threats to their livelihoods. We use survey data systematically collected from 16 samples of over 30,000 households (containing more than 100,000 people) in nine countries in Africa, Asia, and Latin America to provide a rich, quantitative description of the economic effects of COVID-19 among various subpopulations in these LMICs.

There is reason to believe that rich and poor countries are experiencing the crisis very differently, which makes systematic documentation of the effects of COVID-19 in distinct settings critical. In industrialized nations, economic losses are often mitigated by government protection programs, employer adjustments to hours or compensation, or household savings. Absent broad social safety nets, declines in economic activity in LMICs can have more adverse welfare consequences, especially for those working in the informal economy. On the other hand, epidemiological models predict that health impacts of the virus may be weaker in LMICs given their relatively youthful populations (1). Poorer countries are also generally less connected to the global economy through trade and travel and, thus, were



exposed to the pandemic later with valuable time to prepare and learn from the experiences of China, Europe, and North America (although it is unclear whether these opportunities were seized in practice)[9,10,11]

## II. DISCUSSION

COVID-19 has dramatically changed life in every corner of the world. The deadly contagion has prompted lockdowns and various degrees of social distancing, causing much of public life to grind to a halt. All nations have felt some impact in many different ways. In terms of economic effects, the U.S. has seen record unemployment rates. But people living in low- and middle-income countries have been hit especially hard by the COVID downturn—to the point that nearly half of them may now face some level of food insecurity—according to a study published in *Science Advances*.

As the accelerating spread of COVID triggered the first global wave of lockdowns and social distancing measures last spring, it quickly became clear this would be an economic crisis as well as a public health one, says Ahmed Mushfiq Mobarak, a professor of economics at Yale University and a co-author of the study. Mobarak and an international group of colleagues quickly mobilized to investigate how the pandemic was affecting livelihoods in low- and middle-income countries—where a lack of broad social safety nets often makes people especially vulnerable to the effects of a decline in economic activity.

The onset of the COVID-19 pandemic caused a sharp decline in living standards and rising food insecurity in developing countries across the globe, according to a new study by an international team of economists.

The study, published in the journal *Science Advances*, provides the first in-depth view of the health crisis's initial socioeconomic effects in low- and middle-income countries, using detailed micro data collected from tens of thousands of households across nine countries.

The researchers conducted 16 nationally and sub-nationally representative phone surveys from April through July 2020 in Bangladesh, Burkina Faso, Colombia, Ghana, Kenya, Nepal, Philippines, Rwanda, and Sierra Leone. In all of these countries, respondents reported drops in employment, income, and access to markets and services, translating into high levels of food insecurity. Many households reported being unable to meet basic nutritional needs.

“COVID-19 and its economic shock present a stark threat to residents of low- and middle-income countries — where most of the world’s population resides — which lack the social safety nets that exist in rich countries,” said Mushfiq Mobarak, professor of economics and faculty director of the Yale Research Initiative on Innovation and Scale (Y-RISE), and the study’s corresponding author. “The evidence we’ve collected shows dire economic consequences, including rising food insecurity and falling income, which, if left unchecked, could thrust millions of vulnerable households into poverty.”[12,13,15]

Across the surveys, the percentage of respondents reporting losses in income ranged from 8% in Kenya to 86% in Colombia. The median, or midpoint of the range, was a staggering 70%. The percentage reporting loss of employment ranged from 6% in Sierra Leone to 51% in Colombia, with a median of 29%.

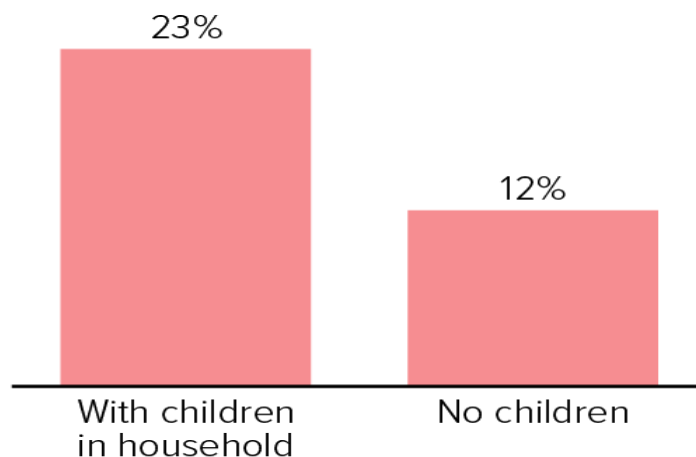
“Painting a comprehensive picture of the economic impact of this global crisis requires the collection of harmonized data from all over the world,” said Edward Miguel, a professor of economics at the University of California-Berkeley and a co-author of the study. “Our work is an exciting example of fruitful collaboration among research teams from a variety of institutions working in multiple countries simultaneously to improve our understanding of how COVID-19 has affected the living standards in low- and middle-income countries.”





## Over 1 in 5 Renters Living With Children Were Not Caught Up on Rent

Share of adult renters who said household is not caught up on last month's rent, October 2021



Note: Chart excludes renters who did not respond to question.

Source: CBPP analysis of Census Bureau Household Pulse Survey tables for September 29–October 11, 2021

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Significant percentages of respondents across the surveys reported being forced to miss meals or reduce portion sizes, including 48% of rural Kenyan households, 69% of landless, agricultural households in Bangladesh, and 87% of rural households in Sierra Leone — the highest level of food insecurity. Poorer households generally reported higher rates of food insecurity, although rates were substantial even among the top half of each sample.

The steep rise in food insecurity reported among children was particularly alarming given the potentially large negative long-term effects of under-nutrition, according to the study.

Survey results from Bangladesh and Nepal suggest that levels of food insecurity were far higher during the pandemic than during the same season in previous years.

In most countries, a large share of respondents reported reduced access to markets, likely due to lockdowns and other restrictions implemented to contain the spread of the virus. The availability of social support from governments or non-governmental organizations varied widely across the surveys, but the high rates of food insecurity reported suggest that support was insufficient even when present, the researchers found. [15,17]

In addition to increasing food insecurity, the study shows that the pandemic and accompanying containment measures have undermined several other aspects of household wellbeing. In all the countries, schools were closed during most or all of the survey period. Respondents also reported reduced access to health services, including prenatal care and vaccinations. Combined, these factors could have damaging long-term effects on children in particular, the researchers note.

“The pandemic’s economic shock in these countries, where most people depend on casual labor to feed their families, causes deprivations that have adverse consequences in the long term, including excess mortality,” said study co-author Ashish Shenoy, a professor of agriculture and resource economics at the University of California, Davis. “Our findings



underscore the importance of gathering survey data to understand the effects of the crisis and inform effective policy responses. We demonstrate the efficacy of large-scale phone surveys to provide this crucial data.”

Current circumstances may call for social protection programs that prioritize addressing immediate poverty and under-nutrition before tackling deeper underlying causes of inequity and economic deprivation, the researchers state. They suggest that policymakers consider identifying poor households using mobile phones and satellite data and then provide them mobile cash transfers.

The researchers also recommend providing support for basic utilities, such as water and electricity, through subsidies and by removing penalties for unpaid bills. They note a fundamental link between containing COVID-19 and providing economic relief since households facing acute shortages may be less willing than others to follow social distancing rules as they pursue opportunities to meet basic needs. [18]

### **III. RESULTS**

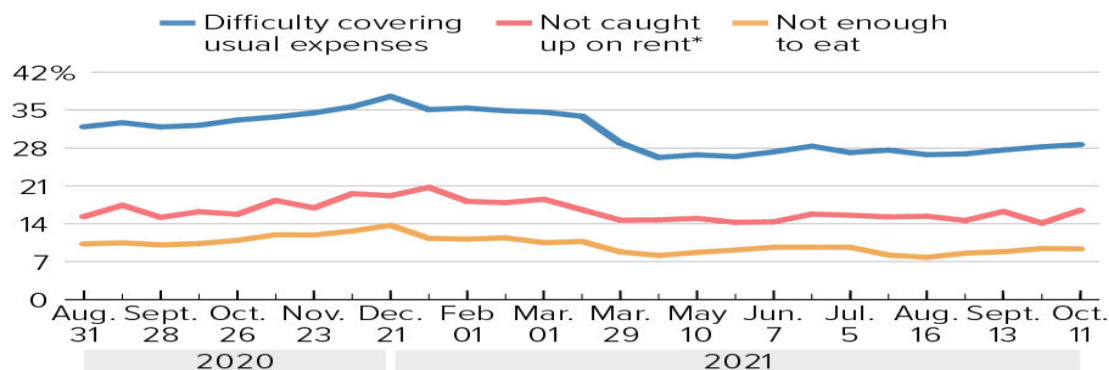
Good nutrition, shelter, and the ability to lead a dignified life are essential foundations of good health. If unaddressed, rising living costs will leave people in health-harming, even life-threatening, situations in the short term, while embedding a public health timebomb for the future. For children, many have already faced educational and health challenges during the pandemic; adding a cost-of-living crisis will only worsen their prospects. Governments face a choice: to ensure that citizens can maintain a decent standard of living during this crisis or to allow population health fragment further. Instead of economists sounding the alarm, public health leaders must step up and speak out about the health consequences of failing to protect communities from the cost-of-living crises engulfing nations.

The COVID-19 pandemic and resulting economic fallout caused significant hardship. In the early months of the crisis, tens of millions of people lost their jobs. While employment began to rebound within a few months, unemployment remained high throughout 2020. Improving employment and substantial relief measures helped reduce the very high levels of hardship seen in the summer of 2020. Nonetheless, considerable unmet need remained near the end of 2020, with 20 million households reporting having too little to eat in the past seven days and 10 million households behind on rent. Some 3 million fewer people are employed than before the pandemic, though steady progress has been made, including in recent months.

Hardship in 2020 and 2020 would have been far worse without extraordinary steps taken by the federal government, states, and localities to respond to the pandemic and its economic fallout. Key hardship indicators showed strong improvement during early 2020, aided by job growth and government benefits. Hardship rates fell especially fast after the enactment of the American Rescue Plan Act on March 11, 2020, which included \$1,400 payments for most Americans as well as other assistance to struggling households. Food hardship among adults with children also fell after the federal government began issuing monthly payments of the expanded Child Tax Credit on July 15, 2020, along with improvements in food assistance. Still, according to the Pulse survey, in October 2020, nearly 20 million adults lived in households that did not get enough to eat, 12 million adult renters were behind on rent, and some of the progress from late March appeared to have stalled as other troubles continued to affect the economy, including expiring unemployment benefits and supply chain problems that contributed to rising prices for many goods. [17,18,19]

## Hardship Fell After Relief Enacted But Persisted in 2021

Share of adults



\*Percent of adults in renter households.

Note: Dates shown are the last day of each 13-day data collection period. Data collection was paused between December 21, 2020, and January 6, 2021, between March 29 and April 14, 2021, and between July 5 and July 21, 2021. Percentages exclude individuals who did not respond to the question.

Source: CBPP analysis of Census Bureau Household Pulse Survey tables

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## IV. CONCLUSION

The Household Pulse Survey provided data on the number of adults struggling to cover usual household expenses such as food, rent or mortgage, car payments, medical expenses, or student loans. Some 63 million adults — 29 percent of all adults in the country — reported it was somewhat or very difficult for their household to cover usual expenses in the past seven days, according to data collected September 29–October 11, 2020. That was down from a peak of 38 percent in mid-December 2020. In early 2020, the share of adults with trouble covering expenses stabilized as employment rose and aid from the December 2020 relief package — including renewed jobless benefits and another round of stimulus payments — reached households.[19]

## REFERENCES

1. Zoumpourlis V, Goulielmaki M, Rizos E, Baliou S, Spandidos DA (October 2020). "[Comment] The COVID-19 pandemic as a scientific and social challenge in the 21st century". *Molecular Medicine Reports*. 22 (4): 3035–3048. doi:10.3892/mmr.2020.11393. PMC 7453598. PMID 32945405.
2. <sup>a b</sup> "WHO-convened global study of origins of SARS-CoV-2: China Part". World Health Organization. 30 March 2020. Retrieved 31 March 2020.
3. <sup>a b c d e f g h i j</sup> Ritchie, Hannah; Mathieu, Edouard; Rodés-Guirao, Lucas; Appel, Cameron; Giattino, Charlie; Ortiz-Ospina, Esteban; Hasell, Joe; Macdonald, Bobbie; Beltekian, Diana; Dattani, Saloni; Roser, Max (2020–2022). "Coronavirus Pandemic (COVID-19)". *Our World in Data*. Retrieved 24 August 2023.
4. <sup>a</sup> "The pandemic's true death toll". *The Economist*. 26 July 2023 [2 November 2020]. Retrieved 26 July 2023.
5. <sup>a b c</sup> "COVID-19 Dashboard by the Center for Systems Science and Engineering (CSSE) at Johns Hopkins University (JHU)". ArcGIS. Johns Hopkins University. Retrieved 10 March 2023.
6. <sup>a</sup> "Spain to move from treating COVID-19 as a pandemic to an endemic illness". *Euronews*. 18 January 2022. Retrieved 23 June 2022.
7. <sup>a</sup> Hyo-jin, Lee (4 November 2022). "Koreans move out of pandemic's shadow after nearly 3 years of battling COVID-19". *koreatimes*. Retrieved 4 November 2022.
8. <sup>a</sup> Rigby, Jennifer; Satija, Bhanvi (5 May 2023). "WHO declares end to COVID global health emergency". *Reuters*. Retrieved 6 May 2023.
9. <sup>a</sup> "Clinical questions about COVID-19: Questions and answers". *stacks.cdc.gov*. Retrieved 26 May 2023.
10. <sup>a</sup> "The Great Lockdown: Worst Economic Downturn Since the Great Depression". *IMF Blog*. 14 April 2020. Retrieved 23 April 2020.



11. ^ Ioannidis, JPA (June 2022). "The end of the COVID-19 pandemic". *European Journal of Clinical Investigation*. 52 (6): e13782. doi:10.1111/eci.13782. PMC 9111437. PMID 35342941.
12. ^ Multiple sources:
13. "Coronavirus – The latest news on the COVID-19 outbreak". Sky News. Retrieved 20 July 2020.
14. "Coronavirus News – BBC News". BBC News. Retrieved 20 July 2020.
15. "Coronavirus (COVID-19)". nhs.uk. 2 June 2020. Retrieved 20 July 2020.
16. ^ Coronavirus: the science explained-UKRI. "What is coronavirus? The different types of coronaviruses". [coronavirusexplained.ukri.org](http://coronavirusexplained.ukri.org). Retrieved 20 July 2020.
17. ^ Multiple sources:
18. "2nd U.S. Case Of Wuhan Coronavirus Confirmed". NPR.org. NPR. Retrieved 4 April 2020.
19. McNeil Jr DG (2 February 2020). "Wuhan Coronavirus Looks Increasingly Like a Pandemic, Experts Say". *The New York Times*. ISSN 0362-4331. Retrieved 4 April 2020.
20. Griffiths J. "Wuhan coronavirus deaths spike again as outbreak shows no signs of slowing". CNN. Retrieved 4 April 2020.
21. ^ Zhu H, Wei L, Niu P (2 March 2020). "The novel coronavirus outbreak in Wuhan, China". *Global Health Research and Policy*. 5 (1): 6. doi:10.1186/s41256-020-00135-6. PMC 7050114. PMID 32226823.
22. ^ Jiang S, Xia S, Ying T, Lu L (May 2020). "A novel coronavirus (2019-nCoV) causing pneumonia-associated respiratory syndrome". *Cellular & Molecular Immunology*. 17 (5): 554. doi:10.1038/s41423-020-0372-4. PMC 7091741. PMID 32024976.
23. ^ Chan JF, Yuan S, Kok KH, To KK, Chu H, Yang J, et al. (February 2020). "A familial cluster of pneumonia associated with the 2019 novel coronavirus indicating person-to-person transmission: a study of a family cluster". *Lancet*. 395 (10223): 514–523. doi:10.1016/S0140-6736(20)30154-9. PMC 7159286. PMID 31986261.
24. ^ "Novel Coronavirus (2019-nCoV) Situation Report – 1" (PDF). World Health Organization (WHO). 21 January 2020.
25. ^ "Novel Coronavirus(2019-nCoV) Situation Report – 10" (PDF). World Health Organization (WHO). 30 January 2020.





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