

Women Are Not Ok: Anxiety Spectrum Disorder And Women During COVID-19 Pandemic

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ABSTRACT

COVID-19 pandemic outbreak has affected the general/physical and mental health worldwide to a great extent. Several studies have indicated that men and women will develop some type of anxiety disorder during their lifetime. The impact of gender is profound as it increases the likelihood of developing an anxiety disorder more in women compared to men. However, the same impact could be seen during the pandemic too in women. Considering the current situations the study has focused to explore the emergence of Anxiety Spectrum Disorder and Behavioural Changes during the COVID-19 Pandemic in women and also to provide an intervention plan for effective management. Hamilton Anxiety Rating Scale was used to screen out anxiety, and then an interview schedule was used where the open-ended items of Anxiety spectrum disorders were included. The scale was administered on 40 women within the age range of 30-50 years from India, out of which 35 women were selected with Anxiety spectrum disorder and then continued with further interviews. Content analysis was done with the gathered data. The findings indicated that women reported several worries, especially about the stigma of COVID-19 infection, support for infant care, and access to infant health services. Psychiatric illness in the form of Anxiety Spectrum such as Obsessive-Compulsive Disorder (OCD) like continuous hand washing, several doubts about the illness and secondly Panic attacks was found. Most importantly predisposing factor played an important role. Patient-tailored psychological support should be a mainstay of comprehensive antenatal medical care to avoid anxiety- and stress-related complications.

Keywords: COVID-19 Pandemic, Coronavirus, Anxiety, Mental Health, Women,

Introduction

Anxiety is an emotion characterized by feelings of tension, worried thoughts, also feeling of dread, fear, or apprehension, often with no clear justification. Anxiety is at once a function of biology and philosophy, body and mind, instinct and reason, personality and culture. Even as anxiety is experienced at a spiritual and psychological level, it is also scientifically measurable at the molecular level and the physiological level. It is produced both by nature and nurture. It's not only a psychological

phenomenon but also a sociological phenomenon.

The end of 2019, was marked by Coronavirus (COVID-19) pandemic outbreak which has changed the way of living across the globe. These changes have triggered numerous pandemic-related psychological responses, which often received less scientific attention than the general medical complications. Cases and studies suggested the potential female gender-related impact on the psychological outcome. The general level of stress and anxiety in the population around the world has also

increased since the beginning of the pandemic. Additionally, other psychological symptoms such as depression, fear, stress and sleep problems are being seen more frequently occurred during the COVID-19 pandemic (Torales et al., 2020). An incidence of depression, anxiety and post-traumatic stress disorder symptoms between 10% and 18% were reported during and after the Severe Acute Respiratory Syndrome (SARS) epidemic (Wu et al., 2005). A study of 253 individuals from one of the regions most affected by the COVID-19 pandemic in China reported a 7% incidence of post-traumatic stress symptoms 1 month after the outbreak of the pandemic (Liu et al., 2020).

Moreover, the phenomenon of health anxiety is manifested consisting of distressing emotions, physiological arousal and associated bodily sensations, thoughts and images of danger and avoidance and other defensive behaviour. This phenomenon is experienced on an occasional basis by many in their daily life and this can be noticed in increasing amounts among the population due to the pandemic. For some with high health anxiety during the pandemic may cause crowding in the health system by making frequent visits to physicians and hospitals. Since anxiety and depressive disorders are more prevalent in women (Alexander et al., 2007), women are estimated to be more affected during pandemics (Ozdin et al., 2020). Psychological symptoms in terms of Obsessive-Compulsive Disorder and Panic Attacks are reported in women due to the surge of the current pandemic all over the world.

Anxiety Spectrum Disorder in Women

Sex differences are prevalent as early as age 6, when girls are twice as likely as boys to have an Anxiety Disorder. In the National Comorbidity Survey, the prevalence rates for panic disorder in women and men were 5% and 2%, respectively. Agoraphobia, which often coexists with Panic Disorder, has a lifetime prevalence rate of 7% in women and 3.5% in men. Prevalence of Trauma is increased in young women as well, and is experienced earlier in life; 62% of sexual assaults are inflicted on females ≤ 18 years of age, and 29% occur in children < 11 years of age. Comorbidity of anxiety in women complicates other medical conditions as well. For example, panic disorder is highly comorbid with

Coronary Heart Disease (CHD), which remains the leading cause of death in women in developed countries. Fluctuations in reproductive hormone levels during the female life cycle is thought to be responsible for modulating anxiety. Hormonal changes during pregnancy, such as increased prolactin, oxytocin, and cortisol, may contribute to the suppression of stress response that occurs during this period. Despite a large and growing body of literature on anxiety disorders in general, the available data relating to women and girls falls short of informing aspects of diagnosis, treatment, and prevention that may entail sex differences and hence an additional work is required to understand the biological and psychosocial causes of these differences.

OBJECTIVE

The objectives of the study are mentioned below:

1. To explore the emergence of Anxiety Spectrum Disorder and Behavioural Changes among women during the COVID-19 Pandemic.
2. To study the impact of Anxiety Spectrum Disorder on women during the COVID-19 Pandemic.
3. To provide an intervention plan for effective management of Anxiety Spectrum Disorder

MATERIALS AND METHODS

The study comprise of both primary and secondary data. The research population in this descriptive population consisted of women aged 30-50 years of age living in various states of India. Data were collected through an online platform, individuals agreeing to participate were asked to complete the questionnaire through social media (WhatsApp, Facebook, and Email). Hamilton Anxiety Rating Scale was administered to 40 individuals from whom 35 individuals were selected having moderate to severe levels of anxiety and then with the informed consent, the selected individuals open ended interview was conducted consisting of Anxiety spectrum disorder. The interview lasted for 45-60 minutes. The interview was conducted at the convenient times of the participants.

KEY FINDINGS

The abrupt infection of the virus has impacted billions of lives across the globe. Massive

mental and socioeconomic disequilibrium has affected our daily lives. It has been established that the pandemic outbreak has increased the level of mental health disturbances in the general population and is more profound in women than men. This study aims to investigate the emergence of Anxiety Spectrum Disorder and behavioural changes during the COVID-19 pandemic and its impact on the society. To objectify the first objective i.e., to explore the emergence of Anxiety Spectrum Disorder and Behavioural Changes during the COVID-19 Pandemic in women it was justified and found that women, individuals living in urban areas, with a COVID+ patient among friends or relatives, previously or currently in receipt of psychiatric treatment and with at least one accompanying chronic disease, were more severely affected. The study also showed that women with past or present psychiatric illnesses and with chronic diseases have a higher sensitivity to and awareness of sensations in their bodies and for which health anxiety may be higher in women and individuals with a history of psychiatric disease (Bobevski et al., 2016). The increase in health anxiety is linked to an increased risk that reflects the psychological distress in people during the COVID-19 pandemic.

Moreover, the female gender has been identified as the most potent predictor of symptoms of post-traumatic stress disorder in pandemics (Liu et al., 2020). During this pandemic, anxiety disorder is at three-fold higher levels in women than in men (Y. Wang et al., 2020). Significantly, due to COVID-19, the level of anxiety were found to be in high range in the pregnant ladies because of the factors like social distancing, limited support from relatives and friends. Besides, financial burden and limited healthcare support were also responsible for adding more anxiety in the life of the pregnant women. Moreover psychological studies revealed that newly born babies delivered by mothers suffering from anxiety may have a high possibility of developing psychological illness.

Secondly, the intensity of anxiety was further heightened by domestic issues as home was unfortunately not always a safe place for a woman. In society with patriarchal culture, women are expected to experience higher degrees of unpaid care work, economic burden and domestic violence in this period of social isolation. A lack of adequate domestic and

emotional support have numerous consequences on women's mental health. The risk of anxiety, is much higher in women and it was like adding fuel to the fire. Intimate partner violence (IPV) includes physical or sexual violence, emotional abuse and stalking were also high during the pandemic. Victims of IPV are at increased risk of comorbid mental health disorders adding more anxiety to their life. While Male violence may even have seemed legitimate for some people, as at it can be normal for a man to behave aggressively in the abnormal situation, women on the other hand are accused of having over-reacted or their requests for help in the face of violence have sometimes been simply ignored which further adds the amount of anxiety in their life. Thus the phenomenon of Covid 19 have created a kind of intersectional hurdles for women.

The third objective is to provide an intervention plan for effective management that is through the necessity of proper information and promotion of COVID-19 preventions by general and mental health care professionals. Mandatory screening for depression in pregnancy in India is also important for assessing both depression and anxiety. As clinically significant distress may manifest as anxiety, and generally easily missed as depression screening only. Anxiety in pregnancy is a robust predictor of postpartum depression, and Cognitive Behavioural Therapy (CBT) is an effective causative treatment. Moreover for obsessional rituals in OCD, can be worked through with a combination of response prevention and exposure to any environmental cues that increases the symptoms.

CONCLUSION

Thus, it can be concluded that the pandemic has an adverse effect on women. It has not only impacted their social life but have disturbed their psychological wellbeing as well. Individuals with a past or present psychiatric illness, and also with comorbidity of chronic diseases have a higher chance of developing anxiety spectrum disorder. Therefore, Priority must be attached to psychological support measures for members of these groups.

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