

Fear of Covid-19 In Relation To Depression and Stress among Indian

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Abstract:

The purpose of the study was to examine the relationship between fear of COVID-19, depression and stress among Indian. The sample consists of total 104 (40 female & 64 male) with in age range of 20-40 years. Generalized fear of COVID-19 scale (Ahorsu, et. al., 2020), Perceived stress scale (Cohen, Kamarck, & Mermelstein, (1983) & Patient Health Questionnaire (PHQ-9) (Spitzer, Williams, Kroenke, et al., 1999) were used. The data were analysed by using descriptive statistics i.e. Mean and SD, Pearson's Product Moment correlation and step wise multiple regression analysis. The results revealed that fear of COVID-19 have a significant positive relation with depression and stress. Depression was found to be significantly positively correlated with stress. The step wise regression analysis found fear of COVID-19 is a predictor of stress.

Keyword: - Fear of COVID-19, Depression & Stress.

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INTRODUCTION

COVID-19 is a disease caused by a new strain of coronavirus. 'CO' stands for corona, 'VI' for virus, and 'D' for disease. Formerly, this disease was referred to as '2019 novel corona virus'. Most of people who are infected with the COVID-19 experienced mild to moderate respiratory illness and recover without special treatment. Some of people, who have underlying medical problems like diabetes, cardiovascular disease, chronic respiratory disease, and cancer, are more likely to develop serious illness. There are various Signs and symptoms of COVID-19 which may appear two to 14 days after exposure. Common signs and symptoms includes: Cough, Fever, and Tiredness. Early symptoms of COVID-19 may include a loss of taste or smell. Other symptoms can include: Shortness of breath or difficulty breathing, Muscle aches, Chills, Sore throat, Runny nose, Headache, Chest pain. Because of chronicity of covid-19 person may develop fear about the various that lead to over thinking which may create overburden on the individual and then he may feel stress and have negative mood. Person feels stress when he or she has excessive pressure from the environment or other types of demand placed upon them. It arises when they worry that they can't cope. Stress can be defined as any types of change causes physical, emotional, psychological strain. Stress is our body's response to

anything that requires attention or action. Stress occurs when the pressure is greater than the resources. There are various types of stress depending upon its intensity. Earlier study, Hall et al. (2008) reported that in times of an epidemic, people tend to experience fear of getting infected with the virus/disease resulting in anxiety, stress, and depression. Similarly, Shete and Garkal (2015) concluded that a high level of stress has been observed in post graduate medical student. The study further concluded that there are various factors which affect the level of stress like age and gender. It is surmised that people facing a pandemic with no vaccination would result in fear of the unknown (in this case, the coronavirus) making them anxious, stressed and depressed (Xiang et al. 2020).

On the other hand, Depression is a mood disorder that causes a persistent feeling of sadness and loss of interest. Also called major depressive disorder, it affects how person feel, think and behave and that lead to a variety of emotional and physical problems. Person may have trouble doing normal day-to-day activities, and sometimes he/she may feel as if life isn't worth living. There are various causes of depression, including complex interaction between social, psychological and bio-logical factors. Life event such as childhood adversity, loss and unemployment contribute to end may catalyze the development of depression. There are various studies related to stress and depression in relation to fear of covid-19. In a

recent study, Shahid, et al. (2020) revealed that females have high level of depression, anxiety and stress than the male counterparts. Pfefferbaum, et al. (2020) reported Public health emergencies may affect the health, safety, and well-being of the individuals and their communities. These effects may translate into a range of emotional, unhealthy and noncompliance with public health directives behaviours reactions. In another study, Rumeysa, et al. (2020) found that stress and depression has been reported by the women and youth when their working hour increased due to covid 19 situation. In significant study, Rehman, Shahnawaz and Uniyal (2020) revealed significant differences between males and females on stress, anxiety and depression among COVID-19 patients. The mean values of stress, anxiety and depression were found to be higher than males. However, no significant difference was observed in both males and females who reported mild stress, moderate anxiety, and mild depression. On Similar line, anxiety and depression reported by the people who were suffering from Pandemic and Lockdown (Grover, et al., 2020).

Cross cultural study also revealed that severe psychological distress (anxiety, stress, and depression) during Covid-19 among different national peoples. Psychological distress such as stress, anxiety, and depression very common (Wang et al. 2020), Moreover, stress, depression, and anxiety were also found to be common among people during SARS (Leung et al. 2003). Health care workers who were at high risk of contracting SARS appear not only to have chronic stress but also higher levels of depression and anxiety (McAlonan et al. 2007). In another study, longer durations of quarantine were associated with an increased prevalence of PTSD symptoms. Acquaintance with or direct exposure to someone with a diagnosis of SARS was also associated with PTSD and depressive symptoms (Hawryluck et al. 2004). Roy et al. (2020) found anxiety levels was observed high among people during pandemic situation. More than 80 % of the people were preoccupied with the thoughts of COVID-19 and 72 % reported the need to use gloves, and sanitizers. The perceived mental healthcare need was observed in more than 80 % of participants. There is a need to intensify the awareness and address the mental health issues of people during this COVID-19 pandemic. Gender difference has been study by Qiu et al. (2020), finding indicated Female respondents showed significantly higher psychological distress than their male counterparts. In an important study, Bakioglu, Korkmaz and Ercan (2020) revealed positive correlation between fear of COVID-19 and intolerance of uncertainty, depression, anxiety, and stress. Further, negative relationship was determined between the fear of COVID-19 and positivity. The study indicated that there was a mediating role of intolerance of uncertainty, depression, anxiety, and stress in the relationship between the fear of COVID-19 and positivity. Eliminating uncertainty from the fear

of COVID-19 will contribute to reducing depression, anxiety and stress, and increasing positivity.

OBJECTIVES

In the current study, an attempt has been made:

- To examine the relationship between Fear of COVID-19 and depression.
- To examine the relationship between Fear of COVID-19 and Stress.
- To examine the predictor of perceived stress among Indian.

HYPOTHESIS

- There will be positive relationship between fear of COVID-19 and depression.
- There will be positive relationship between fear of COVID-19 and perceived stress.
- Fear of COVID-19 will be the predictor of perceived stress among Indian.

METHOD

Sample:

The study was conducted through online mode; the Google form was created and circulated on different Whatsapp groups and person specific. The sample consists of 104 (64 males and 40 females). Their age ranged between 20-40 years.

MEASURE

The following psychometrics tools were used for the collection of data in the present investigation.

Fear of COVID-19 scale (Ahorsu, et al., 2020): The scale is a 7 item measure designed to assess the degree to which individual fear of COVID-19. Respondents relate each item on a 5- point Likert type scale. Answer included “Strongly disagree”, “disagree”, “neutral”, “agree” and “Strongly agree”. The minimum score possible for each question is 1 and the maximum is 5. A total score could be calculated by adding up each item score (ranged from 7 to 35).

Patient Health Questionnaire (PHQ-9) (Spitzer, Williams, Kroenke, et al., 1999): The PHQ-9 consists of 9 items indicating the criterion symptoms for DSM 5 major depressive disorder. Participants are asked how much each symptom has bothered them over the past 2 weeks, with the response patterns of “not at all”, “several days”, “more than half the days”, and “nearly every day”, scored as 0, 1, 2, and 3, respectively. The PHQ-9 can be scored as either a continuous variable from 0 to 27 (with higher scores representing more severe depression) or categorically using a diagnostic

algorithm for major depressive or other depressive disorder. The PHQ-9 has strong internal and test-retest reliability as well as construct and factor-structure validity.

Perceived Stress Scale (Cohen, Kamarck, & Mermelstein, (1983)): The PSS is a 10 item major designed to assess the degree to which individuals perceive their lives as stressful. Respondents rate each item on 5-point Likert type scale. Ranging from 0 (never) to 4 (very often). Higher scores indicate greater perception of lives stress; lower scores reflect lower perception of stress. The PSS showed adequate coefficient alphas (.84 and .85 for college sample: Cohen et. al., 1983); The PSS has been positively correlated with life-event scores, depressive and physical symptomatology, social anxiety and maladaptive health-related behaviours (e.g. increased smoking; Cohen, Sherrod and Clark, 1986). These pieces of evidence indicate the construct and concurrent validity for the PSS.

PROCEDURE

After establishing report and providing proper instruction, above mentioned psychometric devices were administered on target sample for obtaining the data. The answered questionnaires were collected and score as per online mode. The scores were statistically analysed using SPSS 10.0 version. Analysis were conducted for descriptive, correlation analyses and regression prediction.

RESULT

The present investigation was conducted to study fear of COVID-19, Depression and Perceived Stress among Indian. The obtained data were analysed by applying descriptive statistics, i.e. mean and SD and Pearson's Product Moment method of correlation. Regression analysis was conducted with Perceived stress as the dependent variable. Descriptive results revealed that participants scored moderate on the measure of fear of COVID-19 (Mean=17.65, SD=6.41) from a maximum of 35, low score on Depression (Mean=7.42, SD=6.12) from a maximum of 27 and low score on stress (Mean=14.98, SD=7.40) from a maximum of 40. The result of all these analyses are described as under:

Table– 1 Inter-correlation Matrix

	Fear of Covid-19	Depression	Perceived Stress
Fear of Covid-19	---	.47**	.24*
Depression		----	.49**
Perceived Stress			----
Mean	17.65	7.42	14.98
S.D	6.41	6.12	7.40

* Correlation is significant at the 0.05 level

** Correlation is significant at the 0.01 level

Table 1 shows the correlation between fear of COVID-19, depression and stress. Relationship between fear of COVID-19 and depression is found to be positive with a correlation coefficient of .47 which is significant at .01 level. Fear of COVID-19 is found to be positive

correlated with stress with a correlation coefficient of .24 which is significant at .05 levels. The correlation between depression and stress (.49) which is significant at .01 levels.

Table– 2 Summary of Stepwise Multiple Regression (Dependent Variable: Perceived stress)

Step	Variable	R	R ²	R ² Change	Beta	Std. Error	F	P
1	Fear of Covid-19	.24	.06	.06	.24	7.21	6.39	.01

Table 2 shows the results of step wise regression analysis. The predictor measure of fear of COVID-19 account for .06 of % variance in perceived stress (R=.24, R²=.06), F value is equal to 6.39 which is significant at .01 levels. It may be interpreted that people who are having fear of COVID-19 may report highly stressful.

DISCUSSION

The main objective of the present research was to explore the fear of COVID-19, Depression and Perceived Stress among Indian. As far as the relationships are concern, the fear of covid19 and depression positively correlated with each other. People with high fear of covid 19 have high level of

depression and stress. The findings of the current study shed light on how people are suffering from fear of covid 19 that lead to the stress and depression because of uncertainty and chronicity of covid 19. Thus hypothesis 1 and 2 which stating the positive relation between fear of covid 19, depression and stress is accepted and proved here. The present study is consistent with earlier study, as they found the

positive relationship between depression and stress (Bakioglu, Korkmaz, & Ercan, 2020).

Result also found that fear of COVID 19 accounts for 6 % of variance in perceived stress among Indian. So, the present study conclude that fear of COVID 19 is a potent predictors of perceived stress among Indian therefore we can't ignore its contribution in person life because of uncertainty and pandemic situation. Thus, the hypothesis 3 that stated the predictor of perceived stress among Indian is accepted here. Current findings are similar with the finding that showed people facing a pandemic with no vaccination would result in fear of the unknown making them anxious, stressed and depressed (Xiang et al. 2020).

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