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An inquiry into the psychological repercussions considering COVID-19 pandemic

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Abstract: It has been pandemic due to COVID-19; the entire globe has been transformed into quod as no one is permitted to go out of their places. All the institutions whether offices, educational institutions or other institutions except medical and grocery stores, were closed due to lockdown under government guidelines. The pandemic and lockout of COVID-19 has triggered a feeling of panic and uncertainty across the world. This pattern has escalated the symptoms of mental health effects for children and teenagers in the near term and in the long term. Many predictor variables such as the stage of development, academic background, post psychiatric disorder, being socially poverty-stricken, or being quarantined due to illness or threat of infection decide the quality and extent of the effect on children. The concerned government, hospitals, educational institutions, organizations, and even individuals ought to look at psychiatric involvement during difficult circumstances and take the required steps. In addition to teaching people to remain alone, educating and training them to face the mental health challenges they may experience over time is important. In this paper an attempt has been made by me to critically analyze as to how this pandemic led lockdown and social distancing affected the health (mental and physical). Along with this, it will also be evaluated that how COVID-19 lockdown affected our civilization, how it bothered on the people of our society of different age groups i.e., children, adolescent, adult or old aged individual and how COVID-19 scenarios has significant concern of ethics for medical professionals as well as for the patients.

Keywords: pandemic; psychological on physical health; lockdown; social distancing

1. Introduction

It is the time when the whole world is facing bizarre circumstances that arose due to pandemic. "Pandemic is said to a disease outbreak that spreads across countries or continents. It affects more people and takes more lives than an epidemic". And such a pandemic is COVID-19, which is declared to be a pandemic by the World Health Organization (WHO). It was realized ultimately that it is a severe illness and unfurled rapidly from one person to another. And it was the reason that all the countries decided to put their nation in lockdown. The whole civilization has been instructed to follow government guidelines, i.e., social distancing, wearing mask, washing and sanitizing hand and being quarantined or isolated if not feeling well, etc. A three-week national lock-down was announced by the Prime Minister of India from midnight on 25 March 2020 to 14 April 2020, reasoning that it was a necessary and efficient step to interrupt the COVID-19 period of contamination (Barrios and Hochberg, 2020).

Social distancing is a vital method of stopping the outbreak loop. Due to the lock-down, there is a substantial decline in growth rate and an increased doubling of case times. The COVID-19 pandemic has posed major risks to the existence and overall well-being of people across the world, in addition to different psychiatric disorders

such as stress, nausea, and panic disorder. Different public health interventions, such as quarantine of sick or at-risk individuals, avoidance of physical interaction, and simple sanitation, such as daily hand washing, have been recommended to minimize the incidence of illness in order to address the problems presented by the pandemic (Brooks, 2020). While isolation helps to achieve infection prevention, decreased exposure to relatives, peers, and other social support networks lead to behavioral disorders such as anxiety and depression that exacerbate loneliness.

The Government of India has explicitly noted that it cannot be waged separately. However, every single person needs to participate in this fight against the pandemic by carrying out all the required steps, especially social distancing. In order to protect the psychological state and confidence of all people, the government of India is operating on many platforms. In this respect, the central government has taken steps and has established that laws and measures are filtered into the state and local regime. Probably predictably, a broad variety of signs of mental stress and disorder, including major depression, fatigue, pressure, anxiety, frustration, nausea (Barry, 2010), mental weakness, distress, and indications of post-traumatic stress, are likely to occur in individuals who are quarantined.

The report indicates that severe depression and irritability clearly stand out as being very normal. The COVID-19 pandemic has developed our everyday lives with astounding obstacles and mammoth disturbances. It may have overbearing emotions of despair and panic as we unexpectedly lose control of our lives and prospects. We can undergo five emotional response stages during the lockdown, including denial, indignation, sorrow, approval, and hope. As these are tied to a strong sense of loss, they are remarkably close to the phases of mourning. Responses to a disaster vary: certain individuals will show no illnesses; few will have serious reactions, and others will be in between. Furthermore, in some kind of chronological order, individuals may not feel emotions, and can even switch back and forth between the levels. The consequences of lockdown arising due to COVID-19 can be discussed from various distinctive aspects (B. Chen et al., 2019).

2. Eventual outcome on health

The pandemic of COVID-19 has resulted in drastic human suffering globally and faces an unmatched risk to the health, food provisions in addition the world of business. The monetary and social harm caused by the contagion is extremely damaging: large numbers of people are at risk of slipping into food insecurity, whilst by the end of the year, the number of slum dwellers, measured at almost 690 million at present, could grow to 132 million. Lock-down limitations also have possible detrimental impacts, such as heightened fatigue, decreased physical activity, restricted supply, and access to a range of healthy foods and health resources. In fact, lock-down stress and anxiety have the possibility to inflict induced hyperplasia ‘carbohydrate cravings’ resulting in elevated calorie consumption, contributing to a hazardous circular loop. Regrettably, this nutrition desire is also associated with a higher risk of obesity and other chronic disorder and has often been connected with a higher jeopardy of more harmful complication of COVID-19. In most environments, COVID-19 induced lockdowns are typically characterized by reduced mobility and impaired food

system and usability (J. Chen et al., 2019). In particular, the safety measures and travel constraints of COVID-19 can impair the ability to sustain regular exercise and healthier lifestyles, including decreased intake of varied and balanced diets. Although not well understood, this may have consequences for health conditions and diet.

2.1. Physical health

The COVID-19 pandemic and subsequent lockdown introduced in multiple countries have resulted in collateral damage to patients who do not have the illness. The lockdown reduced availability of medical services for regular treatment. That's because there is a scarcity of transportation system to hospitals across the country; since personal transport is limited or forbidden; as patients are frightened to go somewhere, particularly to hospitals, because of the possibility of COVID-19 infection; because clinics and hospitals are closed down or only allow emergencies; and healthcare experts do not want to danger infectious disease. Examples of collateral loss to physical well-being include late care of chronic heart disease, untreated cardiac attack, and delayed treatment for cancer. Some patients perish as a result (Duan and Zhu, 2020). Evidently, non-emergency hospital attention is limited or inaccessible for a variety of traumatic and problematic conditions, from roots dental diseases to bleeding hemorrhoids, and from unstable hypoglycemic regulation to urinary infections.

COVID-19 and the subsequent lockout can also have consequences related to delayed physical health threats. People stuck inside during lockdown would get very little workout as an example. They waste a lot of time watching movies on TV or on smartphones. They're going to snack more and eat more. They'll be gaining weight. It is notoriously difficult to shed weight that is added. This suggests that a high number of health complications, including diabetes, asthma, coronary heart disease, stroke, knee osteoarthritis, Alzheimer's disease, and multiple forms of cancer, are at greater risk for people who gain weight and do not lose it afterwards. Since these detrimental health effects appear years or decades later, based on the person's age, and since these health conditions may often be the product of several possible contributory factors, nobody may consider how the threat may have been applied to weight gain during the lockout of COVID-19 (Hays, 2005).

2.2. Mental health

The lockout can also have adverse consequences on mental health. Medical professionals have recognized for at least 100 years that anxiety has a negative effect on psychological wellness. The cumulative effects of anxiety, as shown by life changing event research, have been known for at least 50 years. Anxiety has an impact on both major and minor psychiatric illnesses and psychosomatic ailments. The signs may be prolonged; that is, the risk of mental illness may persist for years, even years, after the stress has ceased. This suggests there is an environmental influence onto neural pathways with insecurity (Kumar, 2008). The correlation between early life traumatic events and the risk of mental disease in later childhood and adolescence and in adult life is a classical indication of imprinting of security vulnerabilities; with

respect to anxiety, this risk can be greater than and separate of the risks involved with a polygenic hazard ratio.

People are uncomfortable and depressed as indications of collateral harm to personal and psychological wellbeing, and the pressures related to work instability, company setbacks, decreases of capital, enforced behavioral changes, and other causes can induce the onset of anxiety and depression or exacerbate existing disorders. Pressured, extended community connection can strengthen intimacy, but it can also disrupt family distance. Absence of availability to alcohol and misuse of drugs can lead to life-threatening withdrawal syndromes. Furthermore, many patients with severe psychological illness will also not be able to acquire their medications during the lock-down; this is particularly true for those in disadvantaged aspects of society who rely on free medication from health care facilities that are now locked (Lins, 2013). There is a significant risk of recurrence in people that are unable to sustain their treatment.

Ultimately, patients who are presumed or proven to have COVID-19 and who are quarantined or isolated are likely to be afraid of death if they need critical treatment, particularly if they need ventilatory assistance. These patients may be at increased risk of getting a diagnosis of post-traumatic stress.

3. Consequences on various component of civilization

Loneliness, tension, and misery, whether encountered by the hardships of distressed businesses, extended isolation from co-workers and clients, or alienation and distance from a diverse range of trade partners, are measurable. Evidently, it's a peculiar way to be trapped in our residences to make it obvious that even our regular rides to work or the supermarket are basically social efforts. The interpretation has been modified by COVID-19. The UN leader has drawn a crucial difference between a health problem and a 'human crisis' to help the influence of the disaster that has stunned the world. "Trashing societies at the root is the corona virus outbreak" The deprivation and its economic effects in the month of March alone created a destructive blend. The world is struggling and has been reduced to its knees by the most developed states; it is just the degree of suffering that makes the difference. The intensity of the intervention must correlate to the massive, organized and systematic scale of the situation, with the World Health Organization coordinating domestic and international approaches. In terms of outcomes, control, and treatment, pandemics have always had consequences on social society, even where all parts of the political, fiscal, and health system have a role to play (Temin, 2016). This time is no different and there must be coordination with multilateral and global help at regional and local levels to jointly build plans for coping with world affairs once the lockdown is lifted.

"Imagine that everyone quits working, right now! What happens? Civilized life quickly melts away. Food vanishes from the store shelves, gas pumps dry up, streets are no longer patrolled and fires burn themselves out. Communication and transportation services end and utilities go dead. Those who survive at all are soon huddled around campfires, sleeping in tents, and clothed in rags."

Regardless of the degree of the virus effects on the actual population of the countries, this has had a huge impact on international and national economies. There

is no border, no ideology and the novel corona virus travels throughout cast and creed. In fact, it is extremely infectious and readily unstable. Planet has never been prepared for this kind of pandemic, where we are in a race to create an antidote against its spread. Furthermore, lockout was accepted as the only means of regulating the transmission of the pandemic. In India's clutter many problems have been found, which have caused disastrous implications for people's life, relating to social, academic, financial, political, farming, mental and many others (Ghani et al., 2005).

3.1. Society

The pandemic outbreak of COVID 19 hits all portions of the society and tends to impact communities, especially people who are poor, especially to the detriment of participation of these social classes in the most disadvantaged circumstances. For instance, marginalized people are particularly vulnerable to the possibility of the infection and they will not be able to defend themselves securely. Social distancing creates new preservation patterns and even a fresh method to near and dear's communication. It causes differences between families and friends. The cellular telephones and the cloud network hold people close. Gradually, people adapt themselves to remain at their places and modify existing customs to continue engaging on their homework. Is it not a modern type of segregation if we examine the act of "social distance"? Actually No, citizens of the Creamy Layer used to be socially remote from outcasts in the Indian culture after the Vedic era, not to impure the Upper Caste population (Anderson, 2005). On the same trend, all democratic laws that eradicate segregation and promote inclusion seem to be missed in modern society due to COVID 19, as individuals are told to retain social distance.

There were numerous influences on COVID-19 and not just on society as a whole. Both rural and urban have been negatively affected from an industrial point of view. Everyone sees the migrant workers' dilemma, would it be the same when COVID-19 finally ends? Naturally not. Migrants depend on everyday wages and rarely have any assets they can spend in emergencies. Most of people have given up considering this planet lovely. Owing to the lack of availability of employment and capital in the towns, those who didn't have many assets left with them began to migrate to their homes. Rolling with their son, pregnant mom, thousands of miles barefoot. No one can feel the pain, as they are not struggling with same.

3.2. Workplace

COVID-19 might have a tremendous effect on the results of the employment market. For us all, the present scenario is the same as nightmare because the revenue is absolutely interrupted and most of the firms have withdrawn their workers from work so that they do not have to spend in the nation for the period of COVID-19. Some study showed that 28.64% of individuals thought that the drop in resources contributed to a rise in job intensity, thereby affecting the overall quality of job performance. It is much more difficult to ensure that each and every student is employed in the current scenario. In the population of the world of 3.3 billion, more than 4 out of 5 persons (81%) are affected directly by complete or partial suspensions at the office. This eliminates full-time jobs. Wages aren't set. When they avoid working only to provide

for themselves or their children, it is also likely to have an influence on employees (Bajaj and Sharma, 2018). Due to temporary job cuts, COVID-19 has already demonstrated its effect on the manufacturing industry. The Secretary-General said:

“The world of work cannot and should not look the same after this crisis. It is time for a coordinated global, regional and national effort to create decent work for all as the foundation of a green, inclusive and resilient recovery.”

A panoramic perspective of the private lives of our friends, consumers and even our superiors is provided by working from home. One found being welcomed into counterparts' private establishments in unimaginable ways with any video call. The private relationships of our coworkers have been evident through video meetings. Although during video calls with consumers a limited degree of decorum is retained, participants are gradually getting informal with their coworkers. As a friendly team-building exercise, some participants also mentioned hosting digital “Pyjama Mondays”. When firms attempt to mitigate delays to keep things going as near to low as reasonably practicable, working from home is becoming the modern trend. But for most of us remote working, it might easily widen the gap for both “work” and “home”.

Internationally, including India, the COVID-19 disease outbreak has flustered the economy and workplace. The majority of commercial transactions have come to a complete halt with the country lockdown. Although some segments have a smaller influence, such as education, milk products, FMCG, banking, telecommunications, farm commodities, industries such as aerospace, hospitality, transportation, manufacturing, retail, and micro financing organizations are experiencing the biggest scourge. Import-export has seen a major decline as the pandemic begins to affect world production and consumption (Basilaia et al., 2020). The technology sector, on the other extreme, is anticipated to see a positive change. In macro-economic terms, the effect of the COVID-19 outbreak is projected to be felt by the end of 2020.

3.3. Family

The family members have been forced to sit home and work remotely. You are expected to talk, relax and play each day together, something most households do not do because of their jobs and different activities. In some circumstances, the family circumstances were different when someone was planned to rush home and at strange periods when kids had to bed. Often, because of husband's business, certain children were able to visit their parents periodically or quarterly. So, for personal life and social construction, the lockdown seems fine. They take maximum sleep at work from home, when individuals are at residence at all hours, which is a fundamental necessity for excellent health and productive work (Colchester et al., 2016). Healthy sleep increases resistance, it is claimed.

They save time going around the workplace delivering more hours of service that ensures improved productivity and quality. Secondly, petrol is saved and thus air quality control is helped. Thirdly, there is no travel tension that implies greater efficiency. Numerous localities have reported an increase in domestic violence including spousal abuse as a result of the COVID-19 pandemic's closings. Escalating violence at home has led to economic variability, strain and misperception, with lawbreakers able to display huge quantities of the everyday life of abusive targets.

Lockdown due to COVID may increase overall childhood anxiety, parental partnership stress, or overall apprehension (Felix, 2020). It will be daunting to identify the “new reality” when classrooms and preschools are shut with a conclusion to this period remains still uncertain.

3.4. Educational institutions

Trying to move from the economy and family, the effect of COVID-19 on education has been ruthless, and its consequences will be seen in the coming years. Educational programs worldwide have been exaggerated by the COVID-19 pandemic, resulting to the nearly complete closing of schools, colleges, universities and other educational establishments. WB warns that the effect of education cuts on the competitiveness of this pupil community is to take a lifetime turn, as laid down in World Bank reports entitled “Beaten or broken: Informality and COVID”.

“According to UNICEF monitoring, 177 countries are currently implementing nationwide closures and 13 are implementing local closures, impacting about 73.5% of the world’s student population.”

School closures have far-reaching cultural and financial consequences for students, staff, and families. The impact on impoverished children and their societies was more severe, resulting in disruptions in education, ill health, childcare worries, and financial expenses for households who were reluctant to operate. The daily school session has been disrupted by the lockout. Students in public and private schools were mostly impacted as most of them have been cut off from their educators’ learning experiences. Via the attempts made by teachers, school administrations, local and national governments to deal with the complex conditions of e-learning, the disturbance of education and learning will have a medium and long-term effect on the standard of education (Jimoyiannis and Gravani, 2016). Numerous colleges have requested their faculty to continue to offer online courses and provide emails and other media with reading content. For even more advanced pupils, conventional classroom schooling is transformed into an e-class room. This is a worldwide tipping point with the introduction of this modern ‘e-education system’ and Work from Home ‘culture embraced’ by organizations and citizens.

Study and practices will be influenced by e-education. It is difficult to acquire realistic knowledge in actual experimental research during e-learning, such as the handling of tools and instruments, etc. Therefore, only for training, online presentations, model development, online design patterns and simulation etc. can the university graduate in science by e-education be useful. Healthy learners and finances may be stripped from most educational institutions, which may lead to deserted actual buildings. As a result, it is likely to decrease the number of outstanding research institutes, resulting in a decrease in efficiency (Li et al., 2013). However, via virtual Video clips and online sites, the publications of conventional scholars would be less successful than the ideas offered by a layperson. The funding trends for science would be influenced and updated, as well as the goals for future areas of research.

4. Ramification on different age group

4.1. Children

There is a serious rate that kids who slip far behind their schooling will miss out entirely and become victims of child slavery, child brides and other types of abuse. Save the Children reports that the biggest education disaster in humanity has been exacerbated by this pandemic, with about 9.7 million children this year not attending school. Girls are much more hugely influenced by the COVID-19 disease outbreak than boys. Some girls reported that they do several works in the home, and more than half said they spend a lot more time taking care of family. Where some of girls indicated that, contrary to boys, they have too many tasks to do to be able to understand.

“To protect an entire generation of children from losing out on a healthy and stable future, the world needs to urgently step up with debt relief for low-income countries and fragile states, so they can invest in the lives of their children. The needs of children and their opinions need to be at the centre of any plans to build back what the world has lost over the past months, to ensure that they will not pay the heaviest price.”

There are growing demands to consider the implications of this lockdown and resulting education cuts during the COVID-19 pandemic on the psychological health and well-being of children and adults (Su et al. 2016). We need an awareness about what children and youth have encountered during the lockdown period¹ and also how young people will be better helped in the coming years to restore daily life, or the ‘new reality’. This awareness will guide the rehabilitation approaches adopted at the government level and with those actively engaging with children and young adults. In other nations, such answers are starting to be formulated. For illustration, a comprehensive behavioral and well-being rehabilitation system has been released by the Government with an emphasis on detection and control action, upheld by the values of collectivity (Bailey and Kurland, 2002), empowerment, group strategies, resource concentration, and funding for collaborative and professional services.

4.2. Adolescent

Factors that could impair the emotional health of adolescents during this time are deeply traumatic activities, prolonged home detention, brutal sadness, intra-family abuse, misuse of the Internet and media. Excessive psychological conditions such as Post-Traumatic Distress, Psychotic, and Mental Illnesses, and also identical products to mourning, may lead in the COVID-19 pandemic. Psychological illnesses in youth are at prospect of a split or improvement in their diagnosis and management; they may report elevated symptoms. The pandemic and lockout of COVID-19 may have a bad influence on teenage psychological health, but there is still little evidence on the long-term impact of this outbreak (Berke, 2003). The individual, family, and social problems of adolescents, and even some community communication skills, are variables associated with adolescent psychological health in moments of emergency. Adolescents are also fragile and need close attention by clinicians and adjustments to the healthcare system to enable, amid the lockdown, mental health assistance. In periods of pandemics, study on adolescent psychological conditions is important, since such a worldwide scenario may be extended or replicated.

Quarantine has detrimental and possibly lasting consequences, namely post-traumatic stress symptoms, uncertainty, and rage, on individuals' mental well-being. Duration without college are associated with reduced physical exercise in adolescent and teenagers, more media exposure, erratic sleep habits, and less healthy diets. There are mutual connections between cognitive development and social setting, and loneliness may have an effect on mental illness onsets during puberty. Adolescents are undergoing a new era of paranoia: anxiety over their families' well-being and jobs, the pervasive dilemma of suicide, abrupt alienation from peers, and interruption of education. High population of children encountered mild to very high ratings of depression and anxiety in a university study in during the first weeks of isolation.

4.3. Adults

Internationally, youth and teens' pre-lockdown learning mainly featured one-to-one interaction with their nobles and friendship groups. Gloomily, over 91% of the globe's college students have been adversely affected by the national suspensions of academic institutions. Children and youths' home confinement is linked with misperception and anguish due to disturbance of their education, physical action, and socialization experiences. The failure of a long-term stable classroom pays to disruption of agenda, hindrance as well as a dearth of novel proposals for contribution in numerous academic and extracurricular activities. Owing to not being capable of playing outside, not making peers and not contributing through in school events, some participants have reported lower concentrations of effects. Owing to the lengthy change in their schedule, these kids have become much moodier, attention demanding and more focused on their family (Eby et al., 2013). It is believed that once the lockdown is finished, kids may avoid attending school and may face trouble forming relationships with their teachers after the colleges restart. The limitation on travel put on them will also have a lengthy negative effect on their specific mental well-being.

"A study found that older adolescents and youth are anxious regarding cancellation of examinations, exchange programs and academic events (Lee, 2020). Current studies related to COVID-19 demonstrate that school shut downs in isolation prevent about 2%–4% additional deaths which is quite less if compared to usage of other measures of social distancing. Moreover, they suggest to the policy makers that other less disrupting social distancing strategies should be followed by schools if social distancing is recommended for a long duration. However, in current circumstances, it is controversial whether complete closure of school and colleges is warranted for a prolonged period."

It has been documented that impulse purchasing demonstrates innate preservation activity in moments of crisis. There has been an increase throughout the stockpiling activity of youth in the recent disease outbreak period. It is also observed that social distancing by young people is seen mainly as a social obligation, and if driven by positive social motives to discourage someone from being ill, it is practiced more frankly. Furthermore, the expanded usage of the rise of social media by youth addition to increased confinement at home tends to lead them to constantly use the network, access inappropriate information, and often raises their susceptibility to bullying or violence (Felstead et al., 2006). Best of all, where campuses are shut down, when

social and protective systems are not working normally, youth are rarely encouraged to disclose crime, neglect and damage whether they have dysfunctional homes themselves.

4.4. Elderly people

With respect to elderly people and even those with chronic health problems, it can be particularly disturbing and very fear-inducing to have been classified as more susceptible to COVID-19, and to be informed that you're quite sensitive. For such groups, the psychological effects may also include depression and feeling depressed or frustrated. Its consequences may be more difficult for older individuals who can suffer cognitive impairment or Alzheimer. And certain older adults might already be socially withdrawn and alone, which may exacerbate psychological health. In a bright pace, also there are things which elderly people should undertake at this period alone or, if necessary, through the help of a caregiver to protect their psychological health (Friedman et al., 1998). These involve many of the techniques we encourage around the community, such as performing regular activity, sustaining rituals or developing new ones, and participating in events that offer a feeling of accomplishment. It's also necessary to retain community connections. Some older individuals may be aware of interactive techniques, and some may require advice about how to use them. Also, during that time, psychological disorders and behavioral counseling programs as well as other services applicable to this community continue to be available.

Strong initiatives being introduced globally to deter the dissemination of COVID-19, such as the avoidance of group interactions, social distancing, and loneliness, have further intensified psychological problems among the elderly, with recent indicators of the continuance of the pandemic. Definitely, these social interventions contribute positively to the efficacy of combating and preventing the transmission of diseases. However, since they are the age community who suffer social loneliness for the longest time, the mental wellbeing of the elderly demands more focus and care (Frone et al., 1997). Furthermore, as recent research on the elderly have demonstrated that social isolation is a 'severe public health problem' that raises the risk of physical, neurological, psychological, and mental health issues, the elderly's mental health problems triggered by COVID-19 should be examined and treated more carefully as a matter of public health.

Emotions like anxiety and rage can also be considered and studied for a better knowledge of the present social and mental consequences induced by the pandemic. Fear is a natural form of defense against potentially dangerous incidents that needs greater treatment and it can become a core aspect of multiple behavioral illnesses as persistent or inconsistent. Feelings such as panic and rage accelerate the amount of presentation of symptoms during a pandemic, such as COVID-19, and sustain elevated levels of anxiety and depression in sensitive demographic classes, such as the elderly and those with existing psychiatric illnesses, as well as stable individuals. In addition, previous outbreaks have demonstrated that such disorders need greater consideration because they can exacerbate depression, anxiety, Mental problems, psychological illnesses and, in extreme situations, can also lead to suicide. In fact, there was an

immense rise in the rate of suicide among the elderly during the SARS epidemic in 2003 (Greenhaus et al., 2006).

5. Factors affecting the mental health and wellbeing of children and young people

5.1. Loneliness

For the psychological health and well-being of adults and children, depression is considered an important contributing factor for lockdown. A quick analysis of the connections between depression and mental health represents a great opportunity for changes in isolation in children and young people to be related to psychological issues in children and young people. It is worth remembering, however, isolation experiences require some sort of impression management, and in the case of the UK, the mutual lockdown experience may to some degree alleviate the negative effects of isolation. Yet, growing research of the effects of the COVID-19 pandemic shows that children and young people are feeling isolation, amid the mutual experience of lockdown. Recent findings shows that the majority of people feeling isolation among students aged 18–24 is strongest among the general population, with another study describing that nearly half of 16–24 year-olds have encountered ‘lockdown isolation’ among the broad population. As the findings showed, this may be a result of the lack of social circle (Hill et al., 2011) encouragement at these significant stages of growth where peer engagement is necessary for brain formation, self-concept formation, and eventually psychological health and well-being.

5.2. Worries about school and the future

Recent findings from the COVID-19 pandemic also indicates many other influences impacting children and young people with mental health issues and well-being, such as: fears and worries about their grades, skipping school, changes and being absent from college, academic stresses, their jobs, and, more broadly, questions about the future. Likewise, in the context of children and young people already in touch with the juvenile justice, it has also been stated that the main causes influencing psychological health and well-being are loss of connection with each other, loneliness, inability to attend school, financial problems and general anxiety regarding the future.

5.3. Supporting mental health and wellbeing

Yet another research indicated that the majority of participant families confirm that their kids are in daily communication via video conference with friends and family and are having daily exercise, variables that can promote kids and adolescents people’s mental health and well-being (Kalliath et al., 2008). That wasn’t the situation, though, for pre-school age kids in one study, where respondents had questions about the loss of contact between their children and those outside the home.

6. Cure to overcome the consequences

The world, after the corona shutdown, is moving via a crucial and challenging period with limits on actions and interactions. There are more alerts from doctors, such

as those of an immunologist, as people around the world vowed to tackle the pandemic with social distancing and quarantined lives. COVID-19 is a worldwide threat that needs a worldwide obligation to provide reliable data to save human lives from new infections. Health policy and infection prevention measures are urgently required to restrict the international outbreak of the virus in order to reduce the damage associated with COVID-19. Remaining at residence and operating from home standards should be observed during the lockdown. Since yoga promotes immunity, it should be conducted, which is a need of the hour.

As attempts proceed with thoughts and aspirations to resolve the challenges and economic effects, ecosystem, and wellbeing that emerge from this crisis, after this disease outbreak period, there must be consultations on trying to set out the outlines of time. This is a strenuous but not daunting job of placing a courageous face to this current layer of defense where the hazard crosses all boundaries and is an inevitable equalizer to the damage it does. The wave may not be enough to prevent a lockdown itself (Lowry et al., 2008). It has given the warning that we are obviously nowhere near where we need to be to combat the disease and its effects internationally efficiently. The revelation that many nations do not cooperate with the WHO criteria must be no less troubling, and that while \$5 trillion has been raised, the bulk of that funding comes from and for the developing world, namely \$2 trillion in favor of its own economy in the United States. We are all too very far where we need to be to effectively fight the disease and its consequences across the globe. Something that seems clear is that there would be a want of global solutions in the post-pandemic era, not that inter-connectivity is often a positive choice, but because of how our challenges are now characterized by common ground where protection has changed from comparative to actual eye. In a liberal elite debate, safety problems can no longer be conceived where the aspect of nutrition, wellbeing, employment is characterized by the same risks that contradict our comparative capacities.

It is highly necessary to identify and assess potential bacterial hazards. The proposal of the global science corps to make the international immune system a relevant policy issue for all nations is one that should be proposed in various posts. In addition, current public health apparatuses such as the World Health Organization (WHO) and individual organizations will need to introduce the concept of annual monitoring for all national governments, putting health welfare at the forefront of the political debate (Parasuraman et al., 2002). To prevent overlap, the operations of the WHO, the Food and Agriculture Organization (FAO) and private parties need to be coordinated and respond to the organizations' budget cuts. Transnational democracy can be a choice here to let any central government put "one world, safe health" within the emergency rule in order to address past inequality. Placing emergency management outbreaks for any country aims at achieving effective cooperation among different players, addressing, among others, public misconception. Govt. Both forms of religion, cultural, educational, science, sport, and political mass meeting activities in various regions of the globe have been cancelled by multiple nations. Media and information technologies provide society with government backing for the detection and monitoring of the outbreak of COVID-19.

Thus, the key prevention technique for COVID-19 may be to ban mass gathering. All preventative measures are taken by nearly all governments and large expenditures

for their countries are also sanctioned. Yoga is the best positive health approach that energizes our body in terms of strengthening our immune function, mind focus, and levels of trust. For immunity, morality and strong character formation, divine growth is important. There are a variety of online yoga classes offered by professionals, which productively prove the use of lockdown period. As time cures everything, there is no reason to talk about the consequences. We have different good lessons to benefit from this, if there are negative effects (Rotondo et al., 2008). The COVID-19 showed that creation has provided us with all the opportunities to lead a fantastic life and that she feeds us like a mother, and that people should love and nurturing her. At the level of biodiversity, unjustified growth and over-exploitation of environmental assets should be reduced. The easiest way to avoid and impair contamination is by regular hand washing or using an alcohol-based spray regularly to shield oneself and others from contamination, avoiding rubbing the skin and observing expectations of social distance (Ruderman et al., 2002). When anyone needs to go out of home due to an immediate task, use of the mask is helpful. Staying at home and operating from home should be practiced during the lockdown.

7. Ethics in COVID-19 scenario

From an ethical standpoint, it is critical to explore scientific papers that may enhance existing pandemic treatments and also know how to avert or develop optimal methods in the case of subsequent pandemics. However, it is critical to ensure that perhaps the pursuit of new knowledge is properly managed with the more urgent requirements for urgent health treatments necessitated by the epidemic. The execution of study must not obstruct the implementation of preventive health indicators or lead in the unintentional redirection of critical resources. The ethical norms that are accompanied in non-pandemic situations (in aspects of guaranteeing the safety of individual subjects, strict adherence to professional behavior, as well as devising scientifically sound research issues with cautious risk-benefit analysis) must be followed strictly in disease outbreak situations (Daugherty Biddison et al., 2019). On the other arm, definite study circumstances are probable to necessitate a fast-track evaluation of initiatives in order for studies to be executed successfully within the crucial time frame; ethics evaluation panels may need to adjust their standardized methods to satisfy such requests for fast-track feedback.

Several clinical ethical concerns have also surfaced as a result of the pandemic reaction. This is known as “losing the wood for the trees”. In those other terms, macro-issues including such lock-down, detachment, quarantine, isolation, travel restrictions, as well as other preventive services receive so much emphasis that their effect on individuals is overlooked. Clinical ethics relates to two categories of people: those who have been infected with the COVID-19 virus and those who have diseases that are not caused by the COVID-19 virus (Randolph et al., 1998). It will try to identify key ethical issues and explore the significant moral anguish that healthcare professionals experience while dealing with ethical dilemmas. It will also propose that authorities should establish and run ethical discussions to assist healthcare professionals in dealing with the moral anguish that they would encounter.

The COVID-19 epidemic has exposed the worldwide healthcare system's alarming lack of preparation in the face of a large, catastrophic medical event. The healthcare professionals, such as physicians, nurses, technicians, and many others, are not in a position to handle the aforementioned significant ethical problems. During such a public health risk, most of these arise from a contradiction between their duty to the particular patient and their duty to the community. Ethical discomfort among medical professionals is a result of these ethical problems. Furthermore, health care professionals are faced with a difficult decision regarding whether or not to become whistle-blowers about the absence of PPE, the shortage of acceptable duty hours, as well as the distress of vulnerable groups as a result of non-COVID 19 treatments not being available (Malinauskienė et al., 2016). They are likely to suffer retaliation, which may include service cancellation in certain cases. It is necessary to address the moral anguish that healthcare professionals are likely to experience. Support must be provided through psychotherapy to confront anxiety emerging while dealing with patients all through outbreaks, furthermore to the countless information sessions on training health professionals to handle crucial care of a patient with COVID-19, contagion preventative health and control practices within the healthcare and separation hospital setups. A nurse in Italy as well as the finance minister of a German state are two instances of people who committed suicide as a result of the pandemic's anxiety and unsolvable ethical anguish. An ethical hotline inside the hospital environment may give assistance to healthcare providers in resolving ethical concerns. Every healthcare practitioner or team facing a moral dilemma should have access to Medical Ethics Discussions, which may be conducted over the telephone or via video calls.

8. Conclusions

The associated social exclusion interventions appeared to worsen symptoms of depression and some cognitive disability in the population of adults with Down syndrome, considering the undoubted significance of the lockdown in minimizing the transmission of the COVID-19 disease outbreak. Threatening activity, instead, was less incidental and may be attributed to the spike of unpleasant and psychological distress (Shelton, 2006). In view of this data, it would be necessary to examine the potential existence of long-term consequences on human health of people with Down syndrome in future research and how the alterations to their practice have impacted not only other people with Identification, but also their providers. Doing this could lead to greater knowledge and new ideas into alternative solutions for assistance and recovery. Despite the fact that the amount of COVID-19 exposure amongst youths is low, their circumstance makes them more vulnerable to the discomfort they are experiencing. The majority of cross-sectional studies have been conducted to determine the impact of COVID-19 on kids and young people, as well as to lock them down. The results of these research show that various factors of uneasiness influence the kind and intensity of this impact, including age of maturity, educational status, pre-existing mental illness, worse productivity, or confined due to infection/infection threat.

Researchers propose that young children display more moodiness, interrupted sleep, nightmares, weak appetite, inattention, and severe complications with parting. Disinfection steps such as long-term closing of schools and recreation centers together subject children and young people to the worsening impact on the achievement of schooling, psychology and wellbeing as they encounter isolation, fear and confusion. They are put at greater risk from obsessive use of online games and social networking (Shorthose, 2004). There are no differences in the setting for children and youth with psychological problems. There may also be an uptick in signs and behavioral disorders. There is a large probability of derailment from counseling and special education for children who undergo instruction, therapy, and other therapies. Children who are financially impoverished are particularly vulnerable to exploitation and violence. Quarantined children are at greater risk of having a greater risk of psychological wellbeing disorders. Through leveraging both face-to-face and multimedia channels, there is a need to increase the accessibility of children and youth to psychiatric services (Wayne et al., 2020). Psychiatrists, psychologists, pediatricians, community volunteers, and NGOs are expected to collaborate with this collective framework of citizens. ‘Tele compliance for psychological health’ is important and open to the general public. It will be important for the most disadvantaged and impoverished section of the population to escape psychiatric disorders before and during the pandemic. Early detection, development and services relevant to the national healthcare community should be the central focus of the medical system and decision making in order to achieve the desires of the population.

The most severe issues in COVID-19 Scenario were medical ethics throughout outbreak circumstances come from an emphasis on the woods rather than the trees. Particular patients, their interests, beliefs, and well-being are often overlooked when infection control is prioritized. When preparing treatment during an outbreak, this should be carefully weighed and evaluated.

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