

Psychological status, economic and educational conditions in the period of COVID-19 Pandemic in Yangon, Myanmar

Hsu Htoo^{1*}, Khin Hnin Thet^{2*}, Phyoe Marnn³, Thida¹, Khin Kaung Thar¹, Aye Moh Moh¹ and Thaw Tar Oo⁴

¹Department of Zoology, East Yangon University, Myanmar ²Department of History, Mawlamyine University, Myanmar ³School of Environment, Northeast Normal University, China ⁴Department of Myanmar, University of Distance Education, Myanmar hsuhtoo95@gmail.com

Available online at: www.isca.in

Received 17th January 2021, revised 25th May 2021, accepted 29th August 2021

Abstract

COVID-19 pandemic is dreadful and a lot spreading rates in Yangon, Myanmar. COVID-19 pandemic was first reported by official in Wuhan City, China, in December 2019 and only on 23rd March, 2020, two COVID-19 patients were found in Yangon, the second Capital City of Myanmar. Yangon was the first place that found COVID-19 patients and became the most COVID-19 patients in Myanmar and also Yangon have the most population of migrant workers and then a lot of job opportunities for youths of Myanmar. The educational level of Yangon is the best in Myanmar. During COVID-19 periods, even some private schools and some Universities of Yangon have online teaching system, students and their parents don't like online teaching system and most students want to study physically and some students of private schools left the schools. So, private teachers neither were fired job nor got their salaries since 30th June. Except office servants of some companies related to commodity and technology, other migrant workers faced with releasing their salaries and allowances including work overtime and their apartments. 50 percentage of migrant workers lose their jobs and 75 percentage of population of Yangon felt depression in Myanmar. In Yangon, public psychological status, economy and education suffered in high percentage while COVID-19 period.

Keywords: COVID-19, Yangon, Myanmar, Migrant workers, Public Psychological, Economy, Education.

Introduction

The Novel Corona virus Disease (COVID 19) is becoming a cure threat to public psychological status, Education of every level of students and Economic condition on the world. As of 13th January 2021, out of 89 707, 115, 566, 186 COVID-19 patients, 566, 186 have been confirmed coronavirus disease 2019 (COVID-19), and 1,940,352 have died on the world. In First wave of COVID-19, most of Myanmar people want to follow the precaution rules of COVID-19 and Myanmar is a poor country and there are a lot of migrant workers and a lot of expatriates in Yangon, Myanmar and moreover, Inequality standards can be found in Yangon and even general workers and intermediate levels of people want to follow COVD-19 precaution rules, for their daily activity works, they took public buses with crowd. For that reason, Yangon cannot control populations of COVID-19 patients. The metro area population of Yangon is approximately 54.4 million in 2019, 2020 and 2021. Out of 131, 737 COVID-19 patients in Myanmar, Yangon had 85696 COVID-19 patients on 13th January, 2021. COVID-19 disease can cause just only a few people and so Myanmar people are decreasing worried about infecting and spreading of it. Although, they are not afraid of COVID-19, by force law of Government, some business could not run before COVID-19 and especially, private schools of Yangon cannot run and they cannot give monthly salary to their teachers and staffs.

In Yangon, some migrant workers went back their home towns because even their boss did not fire them because of Myanmar Labor Law but their boss cannot give salary to them and they didn't get any shelter from their jobs and other allowances. Some migrant workers got half of their monthly salary and if they are infected COVID-19, they could not report to Hospitals not to stop their daily work owing to their boss's request to them and their respective bosses tried to cure COVID-19 disease by asking medicines for other patients from Hospitals and their respective private nurses and Medical Doctors. In Yangon, 65% of parents wanted their children to be good in Education and they took online classes of some famous private schools till they could pay the course fees. Owing to decreasing benefits of their business, most parents in Yangon have not supported their children for their course fees since second wave of COVID-19 in Myanmar¹⁻⁴. Thus, COVID-19 pandemic becomes critical war for economy and Educational Status in Myanmar. Since COVID-19 vaccine has been observed, some countries, especially American and Japan give entry visa to their Scholarship Students and migrant workers however, China have still cancelled entry visa to their Scholarship students and international scholarship students of China from many countries are still waiting to study physically in China and to continue their research, they are waiting for their stipends. In this COVID-19 pandemic time, their stipends can support the scholarship students to take some researches of them and those students can support their family's daily expenditures. If even COVID-19 pandemic cases finish, educational and economic conditions are necessary to re-cure to run before COVID-19 for basic class people and middle class people of Myanmar. In Bago Division in Myanmar, the famous industry "Innle Shoes" has closed on 31st December 2020 and 1000 general workers become jobless and they started feeling stress. In Myanmar, people are deeply worried about their incomes⁴. Government servants and farmers did not have many difficulties in COVID-19 period. Although people meet in global pandemic and disasters, people need to take foods and their daily commodities to hold on for dear lives and thus business of stable food productions (in order to rice, vegetables and meats) and commodity production can run without much difficulties. During COVID-19 period, inequality of people standard in Myanmar can be clearly seen on Facebook Media. While basic class people and middle class people in Myanmar felt anxiety and stress for their daily expenditure, some singers, actress and actors sold precious jewels and expensive cosmetics by using Social Media and few people could order their sales during COVID-19 period. Myanmar need necessary many technicians in different fields to be developed country⁵⁻⁹. During COVID-19 period, 80 percent of students don't want to study hard to be technicians in different fields and they misunderstand that just only singers, actors and actress can be rich in their lives. They don't want to open the schools and University. Just only 20% students are waiting for reopening schools and University.

Statements of Problems: People in Yangon have many difficulties to follow the COVID-19 precaution Method for population of people. Some apartments with five to seven floors have been built in areas of 40 square feet with many families in those areas and one apartment and others are so close in 1.5 ft differences¹⁰. For transportation system, most people are taking by public buses with more than 50 people. The vital problem is that people in Yangon cannot stay with social distance. Some people didn't want to report when they are infected COVID-19 because of their employments. Many expatriates are main spreaders of Corona Virus to Local people. There is no enough quarantine center for contact persons^{4,11}.

Purpose of Study: The purpose of this study is to collect the exact and true research data for prospecting situation of people's health, economy and education and the researchers will continue to re-cure bad situations of Myanmar due to COVID-19 after analyzing the data of this study. Moreover, the conditions of the second capital city of Myanmar, Yangon and some rural township of Myanmar will compare to find good ways to manage the bad conditions after COVID-19^{4,12}.

Background Objective: People in Yangon, Myanmar were used in this research because Yangon is the highest number of COVID-19 patients in Myanmar. Yangon Quarantine Centers were focused to analyze psychological status of the patients and their family, method of cure COVID-19 disease and difficulties of COVID-19 patients while they stayed there.

This study is prior to problems of Migrant workers and private teachers in Yangon in COVID-19 pandemic period. The study period was based on COVID-19 second wave in Myanmar in the reasons of higher number of COVID-19 patients than that of COVID-19 first wave⁴.

Literature Review: This paper studied the overviews of the mental health, impacts on education and economy, the conditions of quarantine centers of Yangon, increasing numbers of COVID-19 patients. In detail, this study starts with the overviews in depression, stress, anxiety, nervousness of people and study situations of students how many percentage of people, following the precaution methods of COVID-19, how to spend the time in "Stay at Home" period and the Ranks of the numbers of COVID-19 patients of Yangon, Myanmar⁴.

Role of Psychological Status of People in Yangon during **COVID-19 Period:** In Myanmar, the inequality state of people can be clearly found by researchers in Yangon. In Yangon, only migrant workers and some basic standards of people felt anxiety, stress and even depression. Few wealthy people in Yangon thought that COVID-19 can give their leisure time and they could bear their business loss during COVID-19 period. Some migrant workers went back their native townships and some are very difficult in living expenses and they decided to stay in quarantine center as contact persons and some quarantine centers was in wrong infrastructures for patients and the rates of spreading COVID-19 raise more and more daily¹. According to our result of this study, 43% of people in Yangon cannot be afraid of their death and crisis of COVID-19 lead them till depression. 56% people don't want to do any work and they are waiting for winning government lottery to be rich and they become lazier and lazier and lead to crazy issues¹³. To relax their psychological status, they spent their time for Social Media and their positive attitudes disappeared day by day. The quarreling cases can be observed on Social Media and this condition is becoming bad prospects to destroy Myanmar Tradition and culture. COVID-19 destroyed peaceful and honest consciences of people by carrying crisis to Myanmar ^{14,15}.

Economic Conditions in Yangon in COVID-19 First Wave and Second Wave: In our study area, the main categories of economic status were engineers, security workers, teachers, self -employments, sales, civil servants, communication officers, travel and tours and scholarship student of China and those of other countries, also. For civil servants got their full monthly salary in whole COVID-19 period. 75% of private teachers got their full salary for first three months of COVID-19 first wave and in Second wave, their school did not give their salaries and their respective chairmen of schools told them that they would give their salaries when their schools reopened. By Labor Law of Myanmar, owners of self-employment, Managing Directors of companies and Chairmen of Private Schools cannot dare to fire their workers and they don't want to give compensations to workers by firing their jobs and so they requested their workers not to take monthly salaries and after COVID-19 period, they

will take their workers back to continue their works after three months of COVID-19 First wave. Engineers of Private Company lose 31% of their salaries in First wave and 50% in Second wave of COVID-19. Some industries and some companies closed since First wave of COVID-19 and so security workers of Yangon face with jobless and even airport securities lose 31% of their salaries. During COVID-19 period, Communication and Telecom business lose just only 7% because people in Yangon were using Social Media for relaxing and Wifi was using for online teaching and some works for business. In Travel and Tour section, Yangon Bus Service (YBS) cannot be banned to transport and people in Yangon can take taxi and YBS within Yangon-area. However, Travel and Tours for hotels and owners of high ways express faced with 71% of loss in First Wave and even 100% of loss in Second Wave. The scholarship students expect that China can support their families in whole COVID-19 period and when COVID-19 vaccine was observed, they had to go back their Universities to continue their study. For China Scholarship Student, their China Universities gave their stipends in First wave of COVID-19. In COVID-19 Second wave, they are waiting hopefully for their future study and their stipends to do some researches and they lose 100% of their stipends but they are still learning their lessons by online education systems 14-16

Education of Yangon in First Wave and Second Wave of **COVID-19:** The numbers of Private Schools in Yangon are the highest numbers in Myanmar. 65% of private schools are more qualified than other private schools in Myanmar. The parents of children in Yangon hope their children to be successful in Education before COVID-19. Some migrant students used to stay in Yangon to be qualified students and to be improved their educational skills as scientific technology, Master Course in their related field, different languages and MBA courses. The most private schools taught daily lessons by online teaching in First Wave of COVID-19, however, after three months of Covid-19 First wave, some business could run and thus, some parents could not afford to support their children's education except wealthy persons of Yangon. For that reasons, some private schools cannot run because of leaving school of some students. 72% of students of Yangon could not study their lessons in Second wave of COVID-19^[17,18]. This case can be different levels of educational skill in same Grade after COVID-¹9. 28% of students of Yangon are still studying by online education under control of their parents. Most students become lazy to study and they are spending their time with Social Media such as Facebook, Tiktok and online games.

Methodology

Study area: This research focused on Yangon, the Second Capital City of Myanmar, bordered by the Gulf of Martaban in Lower Myanmar. The area of Yangon is 10,277km² with 14th area rank. Yangon region is situated in 16.8409° N, 96.1735° E. There are a lot of travel and tours business in Yangon.

Method: The google questionnaires were used to collect some data and the researchers collected the data and informations from Quarantine Center, Doctors, nurses and Military officers from Military hospital and the metal problem questionnaires were analyzed by medical doctors. Managers of some offices, CEO of Companies, Chairmen of private schools, some office staffs, private teachers and some basic class persons were interviewed for economic status. Some photos were taken for exact information.

Results and discussion

Table-1: Gender and Age group of respondents

able-1. Gender and Age group of respondents				
	Age Groups	No. of Males	No. of Female	Total
	Below 30	400	600	1000
	30-39	200	800	1000
	40-49	155	528	683
	50-59	210	50	260
	Above 60	35	22	57
	Total	1000	2000	3000

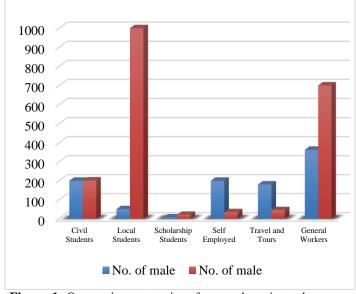


Figure-1: Occupation categories of respondents in study area.

Out of 3000 people, 100 (3.3%) people are excellent, 1200 (60%) are good, 600 (33.4%) are fair and 100 (3.3%) are poor in physical health during First Wave of COVID-19. Out of 3000 people, 100 (3.3%) people are excellent, 840 (28%) are good, 261 (8.7%) are fair and 1801 (60%) are poor in physical health during Second Wave of COVID-19. The conditions of physical health of people in Second Wave are worse than those of First Wave.

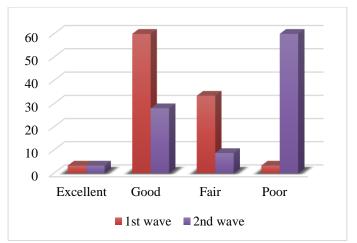


Figure-2: Physical health conditions during First Wave and Second Wave of COVID-19 in Yangon in percentage.

Out of 3000 people, 300 (10%) people are always taking care of their health, 212 (7.07%), 503 (16.77%), 1985 (66.16%) are often, sometimes and rarely care of their health respectively in First Wave of COVID-19. Out of 3000 people, 311 (10.37%) people are always taking care of their health, 311 (10.37%), 528 (17.6%), 1850 (61.66%) are often, sometimes and rarely care of their health respectively in Second Wave of COVID-19.

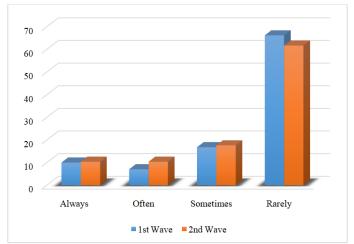


Figure-3: The issue of physical health care during First Wave and Second Wave of COVID-19 in Yangon in percentage.

Out of 3000 people, 100 (3.33%) people never follow the precaution rules of COVID-19 pandemic, 119 (3.97%) people sometimes follow the rule, 1081 (36.03%) often follow and 1700 (56.67%) strictly follow the rule in First Wave of COVID-19. Out of 3000 people, 2105(70.17%) people never follow the precaution rules of COVID-19 pandemic, 816 (27.2%) people sometimes follow the rule, 58 (1.93%) often follow and 21 (0.7%) strictly follow the rule in Second Wave of COVID-19. In second wave, people are familiar with threats of Covid-19 and most of the people don't want to follow precaution rules of COVID-19.

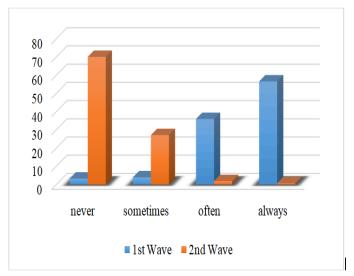


Figure-4: Percentage of following precaution method by respondents during First Wave and Second Wave of COVID-19 in Yangon in percentage.

Out of 3000 people, 100 (3.3%) people felt emotional problems severely, 200 (6.7%) moderately effected, 2018 (67.3%) fairly effected and 682 (22.7%) were not affected in emotional problems during First Wave of COVID-19. Out of 3000 people, 500 (16.7%) people felt emotional problems severely, 1200 (40%) moderately effected, 778 (25.93%) fairly effected and 682 (17.37%) were not affected in emotional problems during Second Wave of COVID-19.

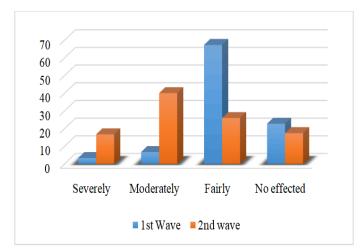


Figure-5: Emotional problems during First Wave and Second Wave of COVID-19 in Yangon in percentage.

Out of 3000 people, 1674 (55.8%) people feel nervous, 1034 (34.47%) feel most of the time, 100 (3.33%) feel sometimes and 192 (6.4%) feel rarely nervous in First Wave of COVID-19. Out of 3000 people, 800 (26.67%) people feel nervous, 1581 (52.7%) feel most of the time, 419 (13.97%) feel sometimes and 200 (6.66%) feel rarely nervous in Second Wave of COVID-19.

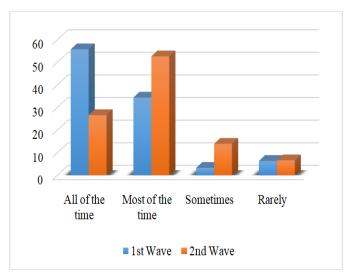


Figure-6: Nervousness Status during First Wave and Second Wave of COVID-19 in Yangon in percentage.

Out of 3000 people, 1008 (33.6%) people feel stress, 252 (8.4%) feel most of the time, 1700 (34.1%) feel sometimes and 780 (23.9%) feel rarely stress in First Wave of COVID-19. Out of 3000 people, 482 (16.07%) people feel stress, 800 (26.67%) feel most of the time, 1711 (57.03%) feel sometimes and 7 (0.23%) feel rarely stress in Second Wave of COVID-19.

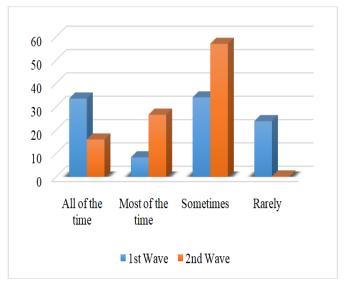


Figure-7: Stress of respondents during First Wave and Second Wave of COVID-19 in Yangon in percentage.

Out of 3000 people, 268 (8.93%) people feel anxious, 528 (17.6%) feel most of the time, 1194 (39.8%) feel sometimes and 1010 (33.67%) feel rarely anxious in First Wave of COVID-19. Out of 3000 people, 1518 (50.6%) people feel anxious, 1100 (36.67%) feel most of the time, 301 (10.03%) feel sometimes and 81 (2.7%) feel rarely anxious in Second Wave of COVID-19.

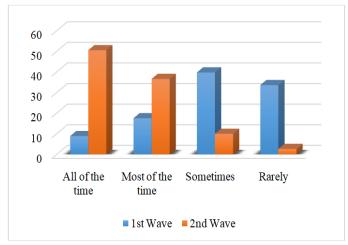


Figure-8: Anxiety of respondents during First Wave and Second Wave of COVID-19 in Yangon in percentage.

Out of 3000 people, 50(1.67%) people feel in depression, 100 (3.33%) feel most of the time, 700(71.67%) feel sometimes and 2150(71.67%) feel rarely in depression in First Wave of COVID-19. Out of 3000 people, 200 (6.67%) people feel in depression, 101 (3.37%) feel most of the time, 1191(39.7%) feel sometimes and 1508 (50.26%) feel rarely in depression in Second Wave of COVID-19.

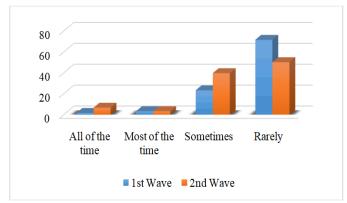


Figure-9: Depression status of respondents during First Wave and Second Wave of COVID-19 in Yangon in percentage.

Out of 3000 people, 30 (1%) people are spending their time by taking religious patterns such as meditation, reading the doctrine of their respective religions and wishing to their Buddha or their respective Gods. 1800 (58%) are studying, 120 (4%) are watching entertainments on TV channels and 1050 (35%) are using internet for Facebook, TikTok, Instagram, Bigo Live in First Wave of COVID-19. Out of 3000 people, 90 (3%) people are spending their time by taking religious patterns such as meditation, reading the doctrine of their respective religions and wishing to their Buddha or their respective Gods. 750 (35%) are studying, 120 (4%) are watching entertainments on TV channels and 2040 (58%) are using internet for Facebook, TikTok, Instagram, Bigo Live in Second Wave of COVID-19.

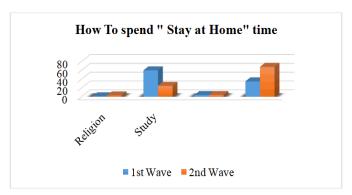


Figure-10: The issue of "how to spend their time in "Stay Home Period" during First Wave and Second Wave of COVID-19 in Yangon in percentage.

Discussion: In this study, comparisons of psychological status, economic and educational Conditions of COVID-19 First Wave $(23^{rd}$ March 2020 to 19^{th} August 2020) and COVID-19 Second Wave (10th August 2020 to 13rd January 2021) were focused. Myanmar Government asked some rich men to donate COVID-19 vaccine for Public of Myanmar and Myanmar government could order COVID-19 vaccine from India on 24th December 2020. Myanmar expects to start vaccination for medical staff in February 2021. People in Myanmar are more worried about their daily expenditure than COVID-19 pandemic and so Myanmar is necessary to get COVID-19 vaccine as soon as possible. The consciences of people in Myanmar need to be relax to reduce their negative attitudes, becoming from COVID-19 crisis. After COVID-19 crisis, some jobless people will become good prospects to over their poverty and for their hope, some business men need to run their works as usual. If even COVID-19 crisis is over, Yangon is necessary to reform dreadful infrastructure of education, psychological health and economic state coming out from COVID-19 pandemic. In Yangon, most people just trying for their income and they don't want to spend their time with their respective religions. In the COVID-19 Second Wave, people of Yangon are familiar with COVID-19 and they are not worried about COVID-19 pandemic and they easily break down COVID-19 precaution method, however they become depression, anxiety for their incomes. Fortunately, the numbers of COVID-19 patients started to rising in first weeks of Second wave and in September, the number of COVID-19 patients started increasing till our study period by the data of Ministry of Health and Sport, Myanmar. So, just only COVID-19 vaccine is best way to control the number of COVID-19 patients.

Conclusion

No one hoped global pandemic as microbiological Weapons and for that reason, some don't know to collect money in Bank to use in crisis time of World. Unfortunately, when the world met the global pandemic such as COVID-19, most people cannot control their psychological status and they have no way to solve their daily expenditures. For this COVID-19 pandemic period,

volunteer sprits of donors and volunteers can be clearly seen, however they cannot donate every one, they are ready to support COVID-19 patients and contact persons. By unhealthy mental state, people disappear their positive attitudes and they felt angry and moreover, high poverty can impact on human mindset to be dishonest⁵. Even scientists always study to guess the future of our world but they are not God and so some crisis of world can become, unfortunately and so everyone in Myanmar needs to prepare some necessary things, especially healthy body, collecting money because Myanmar is one of poor countries till Myanmar be a developed country, everyone in Myanmar is deeply necessary to try to improve life and to have unity and more volunteer sprits to face every crisis challenge to Myanmar such as COVID-19.⁶

Acknowledgement

We express our deepest gratitude to Daw Aye Aye Than, Department of English, Bago University for her optimistic encouragement. Our sincere thanks go to Dr Min San Oo, nurses and medical staffs, No.3, Military Hospital, Inndine Township in Myanmar, for analyzing our psychological questionnaires. I am extending my thanks to Dr Moe Myat Sandi Phyo for her suggestions has been very helpful in various phases of the completion of the project. We also thank to Ministry of Health and Sports, Myanmar for updated news of numbers of COVID-19 patients.

References

- B. Gavin, J.H., D. Adamis and F. McNicholas (2020). Caring for the Psychological Well-Being of Healthcare Professionals in the Covid-19 Pandemic Crisis. *Irish Medical Journal*, 113(5), P51.
- Roy, D., Tripathy, S., Kar, S. K., Sharma, N., Verma, S. K., & Kaushal, V. (2020). Study of knowledge, attitude, anxiety & perceived mental healthcare need in Indian population during COVID-19 pandemic. *Asian journal of* psychiatry, 51, 102083.
- 3. Mazza, C., Ricci, E., Biondi, S., Colasanti, M., Ferracuti, S., Napoli, C. & Roma, P. (2020). A nationwide survey of psychological distress among Italian people during the COVID-19 pandemic: immediate psychological responses and associated factors. *International Journal of environmental research and public health*, 17(9), 3165.
- 4. Phyoe Marnn, H.H., Phyo Moh Moh Zin, Thu Zar Win, Nizeyimana Jean Claude, Haider Ali, Yousef A.Al-Masnay, Bazel Al-Shaibah, Izhaar Malik and Ali R.Al-aizari (2021). COVID-19 Pandemic Impact on Public Distress, Economy and Education of Bago Division in Myanmar. *Technium Social Sciences Journal*, 15.
- **5.** Holger Cramer, R.L., Jost Langhorst and Gustav Dobos (2013). Yoga for depression: A systematic review and meta-analysis. *Depression and Anxiety*, 1-16.

- **6.** Elizabeth Anderson, a.G.S. (2013). Effects of exercise and physical activity on anxiety. *Frontiers in Psychiatry*, 4(27).
- 7. Carpena, M. X., de Souza Tavares, P., & Menezes, C. B. (2019). The effect of a six-week focused meditation training on depression and anxiety symptoms in Brazilian university students with 6 and 12 months of follow-up. *Journal of affective disorders*, 246, 401-407.
- **8.** Paul Blenkiron, L.G. (2019). Patient-reported outcome measures in community mental health teams: pragmatic evaluation of PHQ-9, GAD-7 and SWEMWBS. *Blenkiron & Goldsmith*, 43, 221-227.
- **9.** Brown R. P., & Gerbarg P. L. (2005). Sudarshan Kriya yogic breathing in the treatment of stress, anxiety, and depression: part I—neurophysiologic model. *Journal of Alternative & Complementary Medicine*, 11(1), 189-201.
- **10.** Joy Kuttappan, N.S. (2020). Factors of Psychological Problems during COVID-19 and Recommendations.
- **11.** Chakraborty, K., & Chatterjee, M. (2020). Psychological impact of COVID-19 pandemic on general population in West Bengal: A cross-sectional study. *Indian Journal of Psychiatry*, 62(3), 266.
- 12. Ng, C., Chauhan, A. P., Chavan, B. S., Ramasubramanian, C., Singh, A. R., Sagar, R., ... & Isaac, M. (2014). Integrating mental health into public health: The community mental health development project in India. *Indian Journal of Psychiatry*, 56(3), 215.
- **13.** Gilbert, M., Dewatripont, M., Muraille, E., Platteau, J. P., & Goldman, M. (2020). Preparing for a responsible lockdown exit strategy. *Nature Medicine*, 26(5), 643-644.

- 14. Betty Pfefferbaum, D.S., Brian W. Flynn, Ann E. Norwood, and R.E.K. Daniel Dodgen, Darrin Donato, Brook Stone, Lisa M. Brown, Dori B. Reissman, Gerard A. Jacobs, Stevan E. Hobfoll, Russell T. Jones, Jack Herrmann, Robert J. Ursano and Josef I. Ruzek (2012). The H1N1 Crisis A Case Study of the Integration of Mental and Behavioral Health in Public Health Crises. Disaster Medicine and Public Health Preparedness, 6(1).
- **15.** Provisional Results (2014). Myanmar Population and Housing Census: Ministry of Immigration and Population, Union of Myanmar. *Census Report*, 1.
- 16. Banavaram Anniappan Arvind, G.G., Santosh Loganathan, Senthil Amudhan, Mathew Varghese, Vivek Benegal, Girish N Rao, Arun Mahadeo Kokane, Chavan B S, Dalal P K, Daya Ram, Kangkan Pathak, Lenin Singh R K, Lokesh Kumar Singh, Pradeep Sharma, Pradeep Kumar Saha, Ramasubramanian C, Ritambhara Y Mehta and Shibukumar T M, (2019). Prevalence and socioeconomic impact of depressive disorders in India: multisite population-based cross-sectional study. BMJ Open.
- **17.** Halder, S., Mahato, A., & Manot, S. (2020). COVID-19: Psychological impact and psychotherapeutic intervention. *EC Psychology and Psychiatry*, 9(2020), 32-35.
- **18.** Kim Usher, F., Navjot Bhullar and Debra Jackson (2020). Life in the pandemic: Social isolation and mental health. *Journal of Clinical Nursing*, 29, 2756-2758.