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COVID-19: Psychological impact of quarantine in children due to pandemic: A case study in Doda of Jammu and Kashmir

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Abstract

The emergence of coronavirus disease (COVID-19) from Wuhan city of China engulfed almost the entire world and created a global pandemic. Several countries declared this pandemic as national emergency, forcing millions of people to go into lockdown. This sudden social isolation has caused enormous disruption of daily routine for the global community, especially children. To minimize the transmission of this virus all the educational institutions were closed and moved to online learning to encourage and adhere to social distancing guidelines issued by the authorities from time to time. This abrupt change in the learning environment, restrictions in social interaction and other activities caused unusual situation in the development of child brain. Therefore, it is important and obligatory for the scientific community and healthcare workers to access and analyse the impact of Covid -19 pandemic on the mental health of children. The present article is a case study and was conducted in Doda of Jammu and Kashmir regarding the impact of quarantine on the children.

Keywords: Children, COVID-19, mental health, pandemic, psychological impact, quarantine

Introduction

Quarantine is separation, isolation and restriction of movement of people who are exposed to the infections and communicable disease, but do not have confirmed medical isolation. The objective of the quarantine is to prevent or minimize the transmission of all infectious agents from the infected one (MOHFW, 2020a) ^[6]. However quarantine was scientifically used by United Kingdom in response to plague, but this word was first used by Venice (Italy) in 1127 in response to Leprosy (Newman, 2012) ^[8].

The quarantine has been widely used worldwide as a tool to restrict the transmission of COVID-19. This unpredictable, fast spreading has been causing universal awareness anxiety and distress and forced the whole world for isolation or lockdown and as result have psychological impact on the health of people especially children (Kluge, 2020) ^[4].

The threat of a public health crisis in the form of a pandemic with the advent of the 2019 novel Corona Virus (2019-nCoV) also dubbed as SARS-CoV-2 has spread fast from its provenance in Wuhan, City of China to the entire world in a matter of weeks (Roy and Chaube, 2021) ^[10]. On the emergence of SARS-COV2 first time in Wuhan city of China in Dec. 2019, and within short span of time encroached new territories all over the world.

The clinical manifestations range from abnormal Computer Tomography scans of the chest in asymptomatic or mild cases (Kumari and Shukla, 2020) ^[5] to severe respiratory distress in acute cases according to a report by European Centre for Disease Prevention and Control. According to that report, the most common symptoms were headache (70.3%), loss of smell (70.2%), nasal obstruction (67.8%), cough (63.2%), asthenia (63.3%), myalgia (62.5%), rhinorrhea (60.1%), gustatory dysfunction (54.2%) and sore throat (52.9%); fever was reported by on 45.4% of the 1420 patients observed (Roy *et al.*, 2020) ^[11].

To restrict or minimize the transmission chain, Govt. of India imposed nationwide lockdown on 23rd of March 2020 (Wikipedia, 2020) ^[18]. With the enforcement of lockdown, large no. of students, migrant workers with their families, and others moved back to homes from cities. Such exposed and susceptible individuals might acted as spreaders at their native

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places, and it was difficult to track them, therefore the Ministry of Health and Family welfare in its advisory directed all the states and Union Territories to keep such individual either at home quarantine or in administrative quarantine centres for 14 days from the last exposures (MOHFW, 2020b) [7]. The quarantine requirements following exposure to COVID-19 were designed to minimize transmission to the community as well as to protect household members.

In order to reduce the general risk of transmission of COVID-19, WHO has recommended some precautionary measures such as avoiding close contact with people suffering from acute respiratory illness, regular hand washing with soap and water for 20 second or hand sanitizer particularly after direct contact with sick people or their environment, maintaining cough etiquette, and avoiding unprotected contact with farm or wild animals etc. (Verma and Prakash, 2020a) [14].

For the normal growth and development of mental health social interaction are important component. The risk of psychiatric disorders increases whenever children are separated from their parents and dear ones (WHO, 2004) [17]. The age of initial separation is known to be relevant for the psychological development is very important. Biomedical as well as electronic wastes as a result of COVID-19 and lockdown effects are other big problems for us (Verma and Prakash, 2020b) [15].

The study focus on the understanding compliance and psychological impact of quarantine in children and students community during the pandemic.

Materials and Methods

Ministry of Health and Family Welfare, Govt. of India issued guidelines regarding quarantine at homes and in the administrative quarantine centers which were modified from time to time during the COVID-19. It is the local public health official and the district administration that were responsible for the identification of potential COVID-19 cases. The migrant workers and particularly the student community studying outside the state and district were quarantined at the time of their return. The persons quarantined were provided food, mask and other basic requirements. The medical staff appointed at the quarantine centers and at the homes undergoes daily medical examination for appearance of symptoms or till the reports came. Quarantined persons were encouraged to remain in contact with their family members through phone or video calls to avoid loneliness and anxiety.

The study was conducted in the age range of 15 to 25 years who were placed either at home quarantine or administrative quarantine were interviewed regarding their experience about facility provided and psychological problems. A total of 74 students were interviewed some are school going either government or private and some are university and college students. During quarantine required behaviour included mask usage, living in separate room and restrictions of activities designed to prevent COVID-19 to the household and at the community level.

Results and Discussion

The age range of study group was between 15 and 25 years with a mean age of 18 years. Most of the adolescents were male 87% and rest 13% were females. Out of 87% (82.43%)

were quarantined in administrative quarantine centers and rest 17.56% were quarantined at home.

Most of the adolescents (86.48%) were of the view that quarantine is important to protect the members of the household and community, whereas (12.61%) were not in favour of the quarantine and that it would not protect them or their household members. Besides, 91.89% feel worry, 93.24% feels helplessness, 87.88% feared from quarantine, 79.72% feel isolation stigma 68.91% have anger, 86.48% have boredom.

The most difficult activity for children and adolescents to comply was not going out of the house to socialize (to visit to their friends and relatives). It was also observed that surprisingly some children who were quarantined complained that people reacted differently to them than the non-quarantined group. Another factor that leads to these situations were mainly associated with loss of parents job, non-availability of work, financial losses of family and unavailability of basic needs of life. To avoid the transmission or minimize the same separation, isolation and quarantines measures are required. Beyond the potential community protective effects attributed to quarantine, the risk to quarantined individuals needs to be identified (Sprang and Silman, 2013) [12].

Although ministry of Health and family welfare issued advisory for 14 days quarantine after the last exposure [MOHFW]. But it is obvious that implementation of quarantine for preventing transmission at community level will be only effective when quarantine guidelines will be adhered. But in the present study compliance with all requirements was low, thus indicates that quarantine in its present form would be of limited value in controlling transmission. Only 31 students complied in relation to preventing community transmission which is higher than the hold transmission. However it was observed that present study in relation to compliance of quarantine requirements are lower than the previous studies (Reynolds *et al.*, 2008) [9]. But compliance figure can be improved by awaring the quarantined persons about the disease and better understanding of quarantine measures. The study also reveals that common problems for children were to restriction in their movement and not going to socialize. It also influenced the overall attitude and knowledge of students (Srivastava and Reddy, 2020) [13].

It was also observed during the study children quarantined in administrative quarantine centers might be more susceptible to mental health problems than children's who were quarantined at home because of their higher risk of infection and fear caused by parental separation or separation from their loved ones. Almost similar observations were made by Wang *et al.* (2020) [16]. Moreover, study also revealed children's and adolescents shows a more psychological problem which were quarantined whereas when non-quarantined persons were interviewed there is statistically significant difference in psychological problems. The subject shows emotional disturbance, depression, irritability, Insomnia, post-traumatic stress symptoms, low mood, anger and emotional exhaustion, such studies were earlier conducted and showed the similar results. Long term behaviour changes after the quarantine period such as wearing of mask, social distancing, regular hand washing have also been reported (Cava *et al.*, 2005) [2].

However, it is also noted that non- quarantined children and adolescents shows a higher level of stress during COVID-19 pandemic period. Studies also show that approximately 13 to 45 % of school children and adolescents in India have psychological distress (Bhad *et al.*, 2019) ^[1].

Conclusion

As new reports regarding COVID-19 emerged daily of the understanding of the disease; but its immediate and long mental health impacts in the children and adolescent are challenging to measure. Of course measures are being taken to prevent the virus from spreading and handling the uncertain situations pose risk to the psychological wellbeing of the children. The lockdown measures such as travel restriction, closing of educational institutions, restriction in social interaction and sports activities have led to the emotional distress, anxiety, fear, loneliness among the children and their parents/caregivers. Thus, there is a need to give attention to the children's who are most susceptible to mental health crisis through a collective approach by involving their parents, school administrators, counsellors, teachers, psychiatrist and psychologists.

References

- Bhad P, Awasthi A, Passi GR. Relationship of Leisure Time Activities and Psychological Distress in School Children. *Indian Pediatr* 2019;56:686-688. <https://doi.org/10.1007/s13312-019-1603-6>
- Cava MA, Fay KE, Beanlands HJ, McCay EA, Wignall R. The experience of quarantine for individuals affected by SARS in Toronto. *Public Health Nurs* 2005;22(5):398-406. [10.1111/j.0737-1209.2005.220504.x](https://doi.org/10.1111/j.0737-1209.2005.220504.x)
- Humphreys KL. Future Directions in the Study and Treatment of Parent-Child Separation. *J Clin. Child Adolesc. Psychol* 2019;48(1):166-178. [10.1080/15374416.2018.1534209](https://doi.org/10.1080/15374416.2018.1534209).
- Kluge HHP. Statement-Physical and mental health key to resilience during COVID-19 pandemic 2020. <https://www.euro.who.int/en/health-topics/health-emergencies/coronavirus-COVID-19/statements/statement-physical-and-mental-health-key-to-resilience-during-COVID-19-pandemic>
- Kumari T, Shukla V. COVID-19: Towards Confronting an Unprecedented Pandemic. *International Journal of Biological Innovations* 2020;2(1):1-10. <https://doi.org/10.46505/IJBI.2020.2101>
- MOHFW. Guidelines for Quarantine facilities COVID-19 2020a. <https://www.ncdc.gov.in/showfile.php?lid=552>
- MOHFW. Advisory for Quarantine of migrant workers 2020b. <https://www.mohfw.gov.in/pdf/Advisoryforquarantineofmigrantworkers.pdf>
- Newman KL. Shutt up: Bubonic plague and quarantine in early modern England. *J Soc. Hist* 2012;45(3):809-834. [10.1093/jsh/shr114](https://doi.org/10.1093/jsh/shr114).
- Reynolds DL, Garay JR, Deamond SL, Moran MK, Gold W, Styra R. Understanding, compliance and psychological impact of the SARS quarantine experience. *Epidemiol Infect* 2008;136(7):997-1007. [10.1017/S0950268807009156](https://doi.org/10.1017/S0950268807009156)
- Roy N, Chaube R. Environmental Impact of COVID-19 Pandemic in India. *International Journal of Biological Innovations* 2021;3(1):48-57. <https://doi.org/10.46505/IJBI.2021.3103>
- Roy N, Pal A, Chaube R. Covid 19: A Systematic Approach to Combat the Deadly Virus. *International Journal of Biological Innovations* 2020;2(2):88-94. <https://doi.org/10.46505/IJBI.2020.2202>
- Sprang G, Silman M. Posttraumatic stress disorder in parents and youth after health-related disasters. *Disaster Med. Public Health Prep* 2013;7(1):105-110. [10.1017/dmp.2013.22](https://doi.org/10.1017/dmp.2013.22).
- Srivastava B, Reddy PB. Assessment of KAP (Knowledge, Attitude and Practice) of University students towards Prevention of COVID-19. *International Journal of Biological Innovations* 2020;2(2):117-125. <https://doi.org/10.46505/IJBI.2020.2206>
- Verma AK, Prakash S. Impact of COVID-19 on environment and society. *Journal of Global Biosciences* 2020a;9(5):7352-7363.
- Verma AK, Prakash S. E-wastes and their impact on environment and public health. *International Journal of Applied Research* 2020b;6(9):164-168. <https://doi.org/10.22271/allresearch.2020.v6.i9c.7111>
- Wang G, Zhang Y, Zhao J, Zhang J, Jiang F. Mitigate the effects of home confinement on children during the COVID-19 outbreak. *Lancet* 2020;395(10228):945-947. [https://doi.org/10.1016/S0140-6736\(20\)30547-X](https://doi.org/10.1016/S0140-6736(20)30547-X)
- WHO. The importance of caregiver child interactions for the survival and healthy development of young children: A review. *World Health Organisation* 2004, P102.
- Wikipedia. COVID-19 coronavirus lockdown in India 2020. https://en.wikipedia.org/wiki/COVID-19_lockdown_in_India