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## Impact of COVID-19 on human behavior's

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### Abstract

Human beings are inherently social, not solitary, creatures. Touch is their language of comfort and communication in their social structures - this crisis that we are living through puts them in a vacuum, plagues them mentally and survives on pathological and psychologically induced fear. It has been proved that when people's actual or achieved social contact falls below their desired level they begin to feel lonely thus degrading mental and physical health through disruption of recuperative behaviour. As governments tackle this virus beyond borders an innate danger is being exposed to people thus increasing suicidal tendencies, antisocial behaviour, aloof and depressive performances as the body fights physically and mind bears the impact mentally beyond repair. The question is how to curtail a phenomena that leaves both mind and matter at war?

**Keywords:** Virus, depression, anxiety, social dilemma, contact

### Introduction

Humankind is going through a never seen unprecedented experience with the rapid transmission of Coronavirus pandemic. According to the World Health Organization, the problem does not lie in COVID-19 on its own but rather in the sentiments fear, panic, terror as well as feelings of hopelessness caused by the spread of this virus, and blatantly amplified by the media, which has been presenting the situation as if it were the end of the world. Daily reports of increasing infections, visuals of graveyards and guidelines off isolation across the world raise our anxiety and, in cases of personal loss, plug us into grief. Human beings are inherently social, not solitary, creatures. Touch is their language of comfort and communication in collectives their social structures - this crisis puts them in vacuum, plagues them mentally and survives on pathological and psychologically induced fear. It has been proved that when people's actual or achieved social contact falls below their desired level they begin to feel lonely thus degrading mental and physical health through disruption of recuperative behaviour.

This is unquestionably a period where people are experiencing an enormous amount of stress, given the large demands the situation is placing on our daily lives—the changes in our routines and structures that we typically rely on, and the uncertainty surrounding how long this is going to last and what the ultimate impact is going to be on our families, our communities, and our workplaces. When our environment is inherently ambiguous—open to interpretation and unknown outcomes—our interpretations matter. They matter a lot. Ambiguity breeds anxiety; more so when the “facts” change hourly.

COVID-19 pandemic brought not only unforeseen novel challenges to human beings by endangering mortality for risk groups, but also emotional, behavioral and psychological impact to the entire population.

At the present, statistics taken from the WHO Coronavirus Disease (COVID-19) Dashboard by September 5th announce 26.5 millions of confirmed cases worldwide, with over 871 thousand deaths. However, as the global authorities seem to focus on the infectious aspect of the world wide pandemic but during this ongoing health crisis, those affected by emotional, behavioral and psychiatric disorders tend to be more numerous than those affected by COVID-19. As a matter of fact, the fear of contracting COVID-19 seems not to be as significant as the inflated concerns about the psychological and social impact of the pandemic, as reported in a United Kingdom survey (Mental health COVID-19, 2020) [1].

The term “social isolation” comes together with a negative connotation for many as it leads to subjective feelings of solitude that may accompany the social distancing measures with, especially for those who are already at enhanced risk of suffering from loneliness like the mentally weak and old-aged.

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## Reported Behavioral Changes and Attitudes

### Fear and Uncertainty

Unlike other previous virus outbreaks of the 21st century, such as SARS and MERS, which were primarily disseminated in hospital environments (Bai *et al.*, 2004; Cauchemez *et al.*, 2016), COVID-19 is unrepeatably unique in the way that it has spread far beyond health centres', cannot be contained within limits and borders. Even though fear is an essential adaptive mechanism that every species accustoms oneself with as to cope with threats in the environment, but it unknowingly triggers Defence responses (Bavel *et al.*, 2020). In fact, previous studies showed that fear positively associates with depression, anxiety, perceived infect-ability and germ aversion (Ahorsu *et al.*, 2020) [3].

Furthermore, another detrimentally serious consequence of fear is the stigmatization, discrimination and prediction of prejudiced views on those infected or exhibiting symptoms of COVID-19 (Ahorsu *et al.*, 2020) [3].

### Domestic Violence

The "stay home" recommendations falls as a vulnerable factor as it is imperative to remember that home is not always a safe place for everyone. For many it a *foundation for distortion of power and abuse*, which are heightened by forced proximity, as aggressive methods are unleashed on domestic members especially women. (Bavel *et al.*, 2020; Usher *et al.*, 2020). This cycle of abuse works in duality as the psyche of fear and threats about contamination can even be used as a coercive mechanism to maintain the abuse. Indeed, in the United Kingdom, a domestic abuse organisation reported that calls to its domestic violence helpline increased by 25% in the 7 days following the announcement of tighter social distancing and lockdown measures by the government (Bradbury-Jones and Isham, 2020). In Australia, some police departments reported a 5% increase in domestic violence-related calls, while Google announced a 75% growth in internet searches for domestic abuse support (Usher *et al.*, 2020).

### Health seeking behaviour

As people perceive themselves being at risk of getting infected an initial impression to get tested even if they have slightest of symptoms becomes eminent.. Such behaviour can overwhelm any health system with limited resources and a huge rich- poor disparity.

### View from social dilemma theory

"**Social dilemma theory**" has been widely used in order to understand socio- psychological thoughts and behaviour of individuals making situation in which the individuals' personal interest is in conflict with collective interest. Under this condition, the theory argues the dominant strategy will be that individuals tend to maximise self-interest by behaving selfishly or opportunistically thus making an unethical choice rather than making a cooperative one which is a less preferred option. However, if all individuals involved make a defecting decision, all will suffer eventually as history depicts.

Contextualizing the theory into the current situation of the COVID-19 pandemic to analyse and explain the public behavioral reactions amid the crisis, it is revealed that the pandemic indeed leads to a social dilemma (situation). During the pandemic outbreak, most individuals, generally, are inclined to behave selfishly and opportunistically to maximise their personal interest/gain while compromising others. The following three real phenomena, are common across all nations leading to a 'fight for survival' which include:

1. Competition over daily essentials;
2. Self-honesty of individuals, and
3. Adherence to existing government policies and measures enforcement.

Sometimes, the above behaviour can be rationalized as 'self-protective modes', but inadvertently, individuals are likely to behave self-interestedly focusing narrowly on their own basic needs. As asserted by Kochaki and Desai, the pandemic outbreak is deemed as a severe threat, causing uncertainty, worries, anxiety, and fear among individuals as to whether there will be enough supply of necessities to sustain their livelihood and how long the pandemic will last; thus, people are motivated to behave selfishly and even engage in self-interested unethical acts so as to self-protect and restore the threatened self.

### A collective crisis heightens sensitivity to social interactions

This is a situation that can have both positive and negative effects as a consequence function of it being a collective crisis. On the positive front, there is a realisation that we're in it together, and we see many amazing examples of people supporting one another. On the negative side, we see some people respond to this with a sense that they need to "protect their own," and it is "us versus them."

Baruch Fischhoff, Professor at Carnegie Mellon University, quoted in The Atlantic that, "children learn many of their own fears and anxieties from what they hear and what they see". The recommendation for parents here is to be aware of the emotional information and the factual information about the coronavirus that is being transmitted to children, as they are apt to learn from whatever information happens to be around them.

### Conclusion

This global threat affects the whole society; mentality with so-called "this is your problem, not mine" is not valid. Governments should urge people to become their monitors (eyes and ears) keeping informal surveillance on other individuals who may break the law or behave selfishly and unethically; individuals need to come together in times of need and need a vision beyond their personal greeds that is what the time demands.

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