

THE IMPACT OF COVID-19 ON SOCIAL LIFE OF PEOPLE IN LUCKNOW CITY, UTTAR PRADESH

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ABSTRACT

The COVID-19 pandemic has caused deep stress all over the world. Despite recent speculative suggestions of poorer psychological state in all ages in India since the beginning of the pandemic, there are no systematic efforts to help the consequences. The present paper reports on the social impact on those Indians who could also be notably liable to negative emotions due to the impact of corona virus on their lives. One thousand five hundred and seven people from North Indian town of Lucknow of Uttar Pradesh State reported on their personal experiences on being infected by the corona virus and the impact of the pandemic and its' restrictions across life domains, their major worries, social restrictions, and levels of negative effect on mental state. The participant's major worries centered on educational attainments, social and recreational activities, and physical health. More females than males were disturbed regarding educational attainment and physical health whereas most males were troubled about their social and recreational activities. Thus, individuals and patients of Lucknow City in the present sample report important impact of the pandemic on varied aspects of their life and areas that were notably disturbed included educational attainments, social and recreational activities and physical health.

Keywords: *Social, Covid-19, Education, Family, Youth.*

INTRODUCTION

A person's social life consists of the assorted bonds they bind with others, like family, friends, members of their community and even strangers. It is often measured by the length and quality of the social interactions they need on a daily basis, head-to-head as well as on-line. Since humans are social animals, therefore the tenor of one's social life is among the foremost vital influences on one's mental and physical health. Humanity's survival, as a species, to a great extent hinges on its capability for social living. COVID-19 (Corona virus) has affected not only the day-to-day life and social interaction among people but has also been responsible for pulling down the economy worldwide. This pandemic

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has affected thousands of peoples, and as per UN many have either been very sick or been killed. The foremost common symptoms of this infection include fever, cold, cough, bone pain and respiratory issues, and ultimately resulting in respiratory disorder. This, being a replacement infective agent for humans, vaccines are not accessible to everybody. Thus, the stress is on taking intensive precautions like following intensive hygiene protocol (e.g., frequently washing of hands, avoiding of face-to-face interaction, etc.), social distancing, and sporting of masks, and so on. This virus is spreading exponentially region wise. Countries have taken measures, such as banning of gatherings of individuals, to stop and also to break the COVID spread graph. Several countries have taken measures for protection of their population by imposing strict quarantine measures to manage and to stop further spread of this extremely disease.

COVID-19 has rapidly affected our day to day life, businesses, disrupted the world trade and movements. Identification of the disease at an early stage is vital to control the spread of the virus because it very rapidly spreads from person to person. Most of the countries have slowed down their manufacturing of products. Various industries and sectors that have been severely affected by the spread of this disease include the pharmaceuticals industry, solar power sector, tourism, information and electronics industry. Thus, this virus significantly causes a knock-on effect on the daily life of citizens, as well on the global economy.

Emergencies and pandemics are renowned to have a massive scale psychosocial impact. The psychological impact might embrace emergency or pandemic-induced distress (e.g., concern of the virus, death anxiety, subtle anxiety that is future familiarized, grief, physical isolation of people, families or communities resulting in non-pathological distress and psychological state issues in an exceedingly little minority), worsening of pre-existing issues (e.g., severe mental disorders, alcohol abuse) and humanitarian aid-related issues (e.g., anxiety because of a scarcity of knowledge concerning food distribution). Emergency-induced social and economic issues (e.g., forceful decline of financial gain generation, financial condition, family separation, disruption of social networks, destruction of community material, resources and trust, increased violence against ladies and girls) and humanitarian aid-induced social issues (e.g., undermining of community structures or community's existing support mechanisms) are other problems arising out of this pandemic. Though emergencies are doubtless to have an effect on, but bound groups of people like ladies, children, elderly, poor, migrants, frontline employees, marginalized and people with pre-existing vulnerabilities, etc., are undoubtedly going to be disproportionately full of the emergencies (IASC 2007, 2015). Epidemics are extremely impactful health emergencies which threaten people's lives and as a result of high casualties and deaths also endanger the protection and traditional functioning of a community. Psychosocial impact created by the epidemics will exceed the individuals' and community's management capability, usually resulting in high levels of distress, the results of which may last longer even

after the ending of the epidemic (Johal et al., 2016). As an example, studies on psychosocial effects of happening of severe acute metabolic process syndrome (SARS) have shown negative psychological outcomes like higher depressive levels among those that were impacted by the pandemic (Ko et al., 2006). Literature on psycho-social impact of VHF happening and Nipah virus too shows comparable trends. Survivors of these outbreaks report experiencing concern for death, stigma from community, discrimination and also violence in some cases, expertise anxiety, grief and disapproval (Van Bortel et al., 2016; Zacharias et al., 2019). Physical isolation of people, families or communities exposed to virus will produce an extra risk for psychosocial issues (IASC, 2015). With the above background on COVID epidemic in mind, the present investigation was conceived with the following objectives in mind:

- To understand the factors related to observing or otherwise of social distancing and its impact in curtailing the spread of the epidemic.
- To study the difficulties faced by some people in implementing measures such as social distancing, self-isolation and travel restrictions. Impact of reduced manpower across all economic sectors, job loss and faculty closure.
- To evaluate the extent of disruption of traditional life of kids and minimized demand for related commodities.
- To understand the impact on demand for medical providers.
- To know the influence on buying and storage of food products. Impact of COVID on poor, homeless people, refugees, and migrants.
- To have an idea about the economic and health impacts of COVID.

MATERIALS AND METHODS

The study was conducted on the Covid-19 patients of the Lucknow City. The research sample consisted of 500 individuals from different zones of Lucknow City who suffered from and survived from covid-19. The targeted population was filtered through data provided by hospitals related to covid-19 patients and we used reports of national and international platforms for further references.

Study Area: Lucknow is that the capital and biggest city of the Indian state of Uttar Pradesh. It continues to be a vital center of governance, administration, education, commerce, aerospace, finance, prescribed drugs, technology, design, culture, tourism, music and poetry. Lucknow sits on the northwestern shore of the Gomti watercourse. As of 2008, there were one hundred and ten wards within the town. Morphologically, three clear demarcations of the city exist, namely the Central City District, that is a totally engineered up space including Hazratganj, Aminabad and Chowk; a Middle Zone that surrounds the inner zone with cement homes; an Outer Zone mainly consisting of slums. As per probationary reports of Census of India, population

of Lucknow in 2011 was 2,817,105 (1,460,970 males and 1,356,135 females). Although Lucknow City has a population of 2,817,105 but its urban/metropolitan population is 2,902,920 (1,509,451 males and 1,393,469 females). Lucknow District is divided into 4 tehsils: Lucknow, Malihabad, Mohanlalganj, and Bakshi Ka Talab. These tehsils are then divided into 8 community development blocks (Vikas Khand).

The present research study was conducted on 500 individuals of different age groups in Jankipuram, Faizullaganj, Daliganj, Gomtinagar, Takrohi, Krishna Nagar, Balaganj, Chawk, Hazaratganj, Indiranagar, Alambagh, Sarojini Nagar, Nilmatha and a few other areas of Lucknow City's five demographic zones.

Tools and Techniques: The tools and methods used to collect data for this study included In depth Interview, Google form entry and Tele calling with recordings of audio,

In addition, secondary technical data, viz., name, demographic entry and phone number, etc., was obtained from hospitals and local NGO. Excel data entry was used for records.

Analysis: Qualitative analysis is extracted, as outlined in a variety of text books, from interview transcripts and is usually dependent on the researcher's integrative, analytical and sense making skills or 'understanding a phenomenon'. Qualitative information analysis provides an understanding of the objectives by revealing patterns and themes in information. An analysis usually starts off with the gathering of quality information and knowledge. The knowledge collected is then organized and analyzed to draw conclusions on the analysis topic. Method of analyzing and organizing the information collected throughout analysis is termed as data analysis within the world of analysis. Because of the unstructured nature, analyzing qualitative information may be generally confusing. Therefore, information is completed and displayed with variety of numeric graphs. Transcripts from interviews, audio/video recordings associated notes from an observation are a number of the samples of qualitative information that have been employed in this study.

RESULTS

The present study explores the physical, emotional and regulatory impact on society due to confinement and social distancing methods employed to combat the threat of transmission of covid viruses. To reduce the impact of these measures on society, the govt needs to review its strategy and find ways to minimize the psychosocial and other effects. On the positive side, self-isolation and staying indoor of people, as a consequence of comprehensive government rules, on-line entertainment has seen a surge in numbers of users that has helped many corporations to increase profit.

Analysis of Social factors: Figure-1 shows the duration of anxiety and

nervous feeling among respondents, during or after Covid-19 scenario. Most respondents often felt nervous or anxious for several days; some of them answered more days than not and a few of them answered nearly every day.

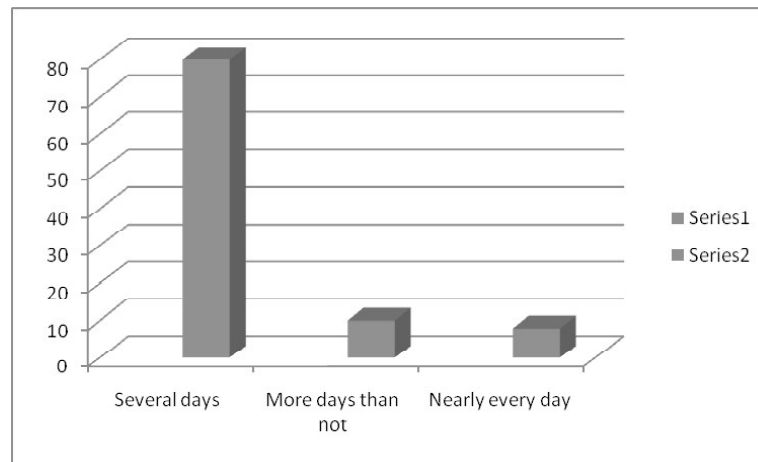


Figure-1: Duration of anxiety and nervousness among respondents

Figure-2 shows the duration of a feeling of hopelessness and depression among respondents, during or after Covid-19. It is evident that most respondents often have felt down, depressed, or hopeless for several days. Some of them answered more days than not and a few of them had these feelings nearly every day. All of this affected their social life badly.

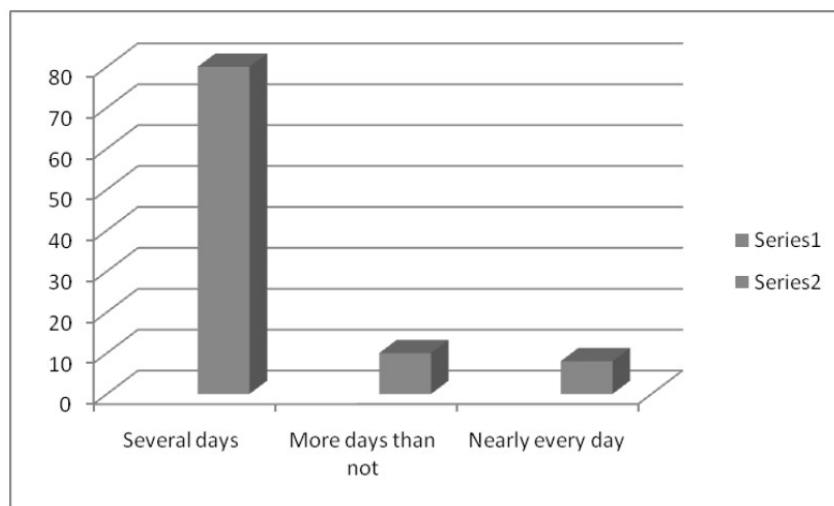


Figure-2: Duration of feeling of hopelessness and depression among respondents

During the COVID-19 scenario, respondents often felt having little interest or pleasure in doing routine things. Most of them answered that they had this feeling for several days, while in some of them this feeling lasted more days than not and a few had this feeling nearly every day (Figure-3).

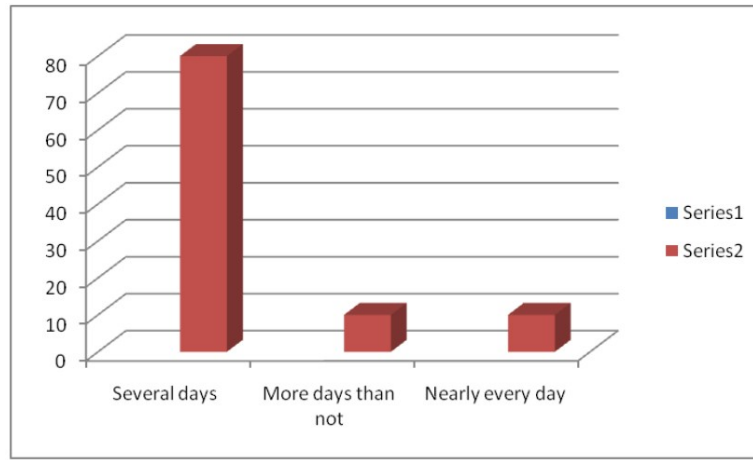


Figure-3: Duration of feeling of having lost interest in doing routine things

COVID-19 and Social Stigma: The stigma is directed not solely towards people who have recovered from COVID-19, but also for people who are undergoing treatment, are likely to be affected or have succumbed the disease and their families. The forcefulness of social stigma is also faced by frontline staff, medical practitioners, nurses, police personnel, etc. They had even been forced to depart the neighborhood and denied access to their homes and therefore their families felt vulnerable. The insurmountable atrocities that they had been undergoing to win this race against the virus are neglected. Instead, social stigma has overcome the goodwill of these for whom they were fighting. Even the mental state practitioners were often labeled as doctor for the mad person. Social stigma have also been witnessed towards the marginalized people such as the homeless or the migrant laborers. On returning home after months of being stranded in numerous parts of the country, the staff and their families are singled out, sneered at, and vexed by the community members.

The consequences of the social stigma

Figure-4 shows how the respondents have been feeling over the last few weeks and whether they have recently been able to concentrate on whatever they were doing in a manner as in the past. A few of them answered better than usual but most of them answered same as usual. Some of them felt less than usual and none of them felt much less than usual.

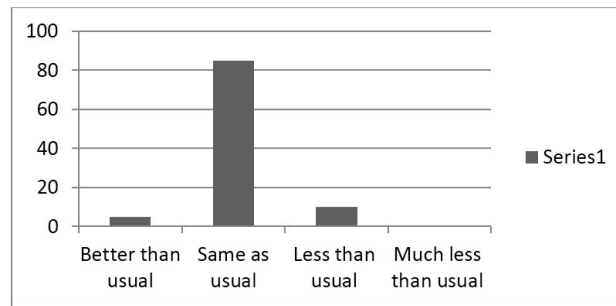


Figure-4: Nature of feeling over the last few weeks

Figure-5 displays the level of worry or sleep loss due to the COVID-19 situation. Most respondents recently lost sleep or worried no more than usual while some of them felt that they worried rather more than usual and none of them answered much more than usual.

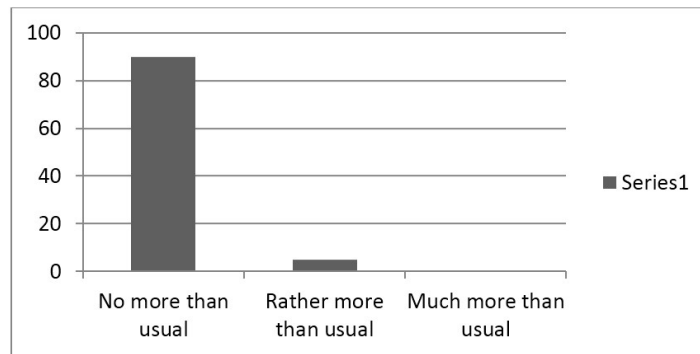


Figure-5: Level of worry or sleep loss among the respondents

When the respondents were asked whether they recently felt that they were playing a useful part in things in the same manner as before, most of them answered same as usual while some of them answered more so than usual and a few of them answered less so than usual; none of them answered much less than usual (Figure-6).

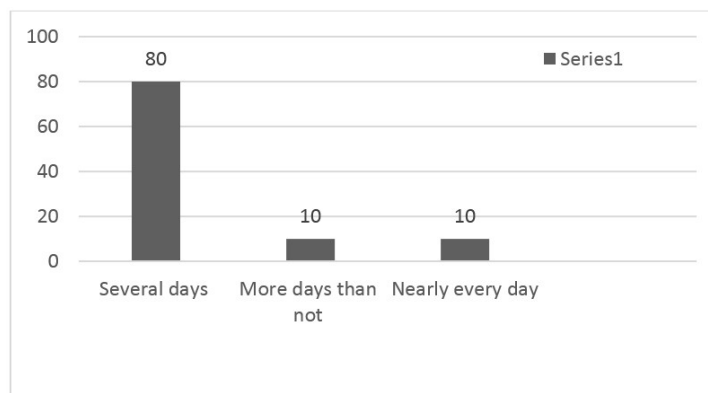


Figure-6: Feeling of being as useful as before

- Figure-7 shows the decision-making ability as before of the respondents. Most of the respondents felt that for most days they felt capable of making decisions about things in a manner as before while some of them answered more so than usual; a few of them answered less so than usual and none of them answered much less than usual.

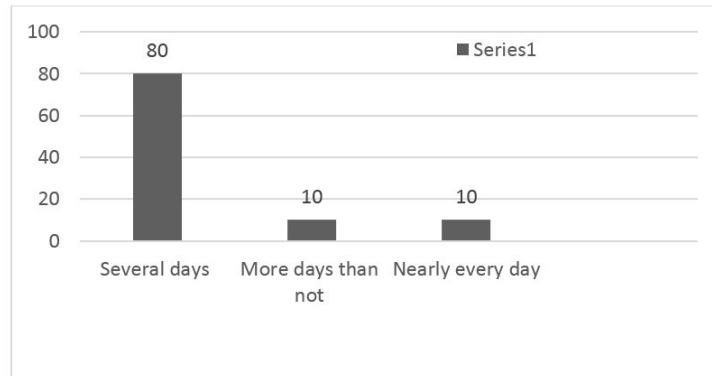


Figure-7: Ability to take decisions as before

As can be seen in Figure-8, most respondents recently felt constantly under strain no more than usual, while of them felt strained more than usual, and none of them felt much more strained than usual.

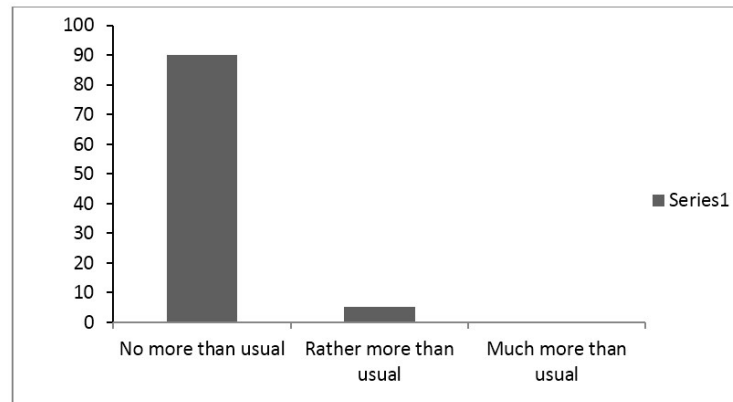


Figure-8: Level of being under strain

When asked about their ability to overcome difficulties (Figure-9), most of them answered it was same as usual. Some of them answered more so than usual and only a few of them answered less so than usual while none of them answered much less than usual.

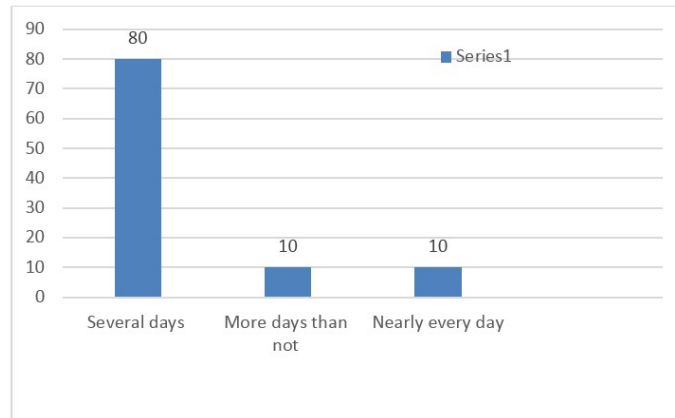


Figure-9: Ability to overcome difficulties

When the respondents were asked whether they have recently been able to enjoy their normal day-to-day activities in the same manner as before (Figure-10), most of them answered less so than usual while none of them answered more so than usual. Some of them answered same as usual and a few of them answered much less than usual.

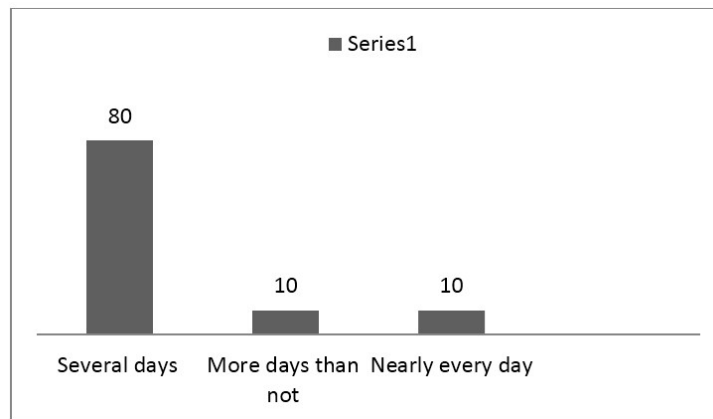


Figure-10: Ability to enjoy normal day-to-day activities in the same manner as before

Figure-11 shows the incidence of depression or unhappiness among the respondents as compared to pre-COVID situation. Most of the respondents have recently been feeling unhappy or depressed in a manner that was no more than usual. Some of them had these feelings rather more than usual while none of them felt these much more than usual.

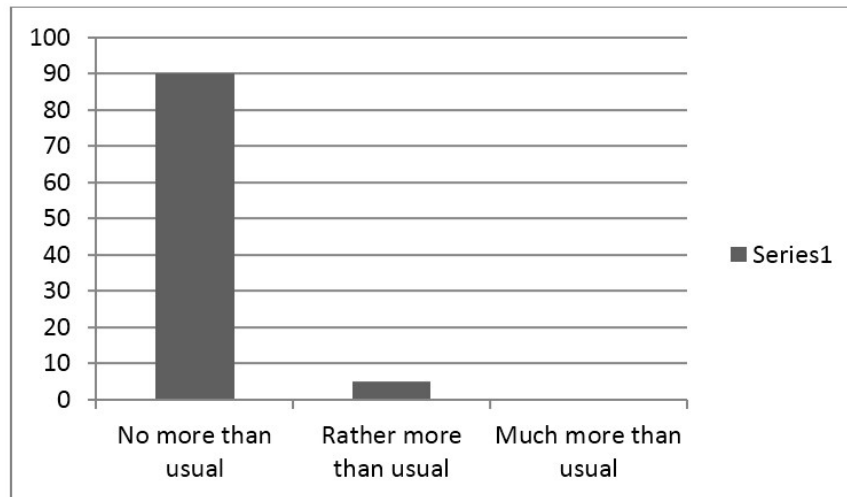


Figure-11: Feeling of unhappiness and depression among the respondents

Figure-12 shows the recent development of lack of confidence among the respondents. Most of the respondents were of the opinion that issue of losing confidence in themselves was in a manner that was no more than usual; some of them answered it happened rather more than usual while none of them felt that it was much more than usual.

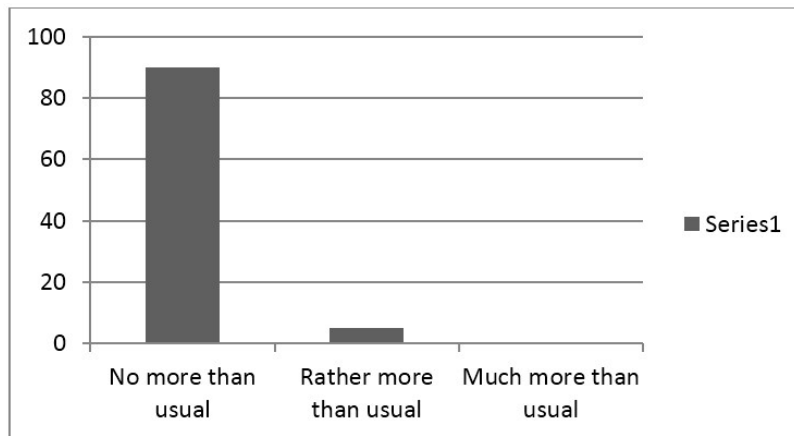


Figure-12: Development of recent lack of confidence among the respondents

When asked whether they were having a recent feeling of being a worthless person, most of them answered it was no more than usual whereas some of them answered rather more than usual and none of them answered that the feeling was much more than usual (Figure-13).

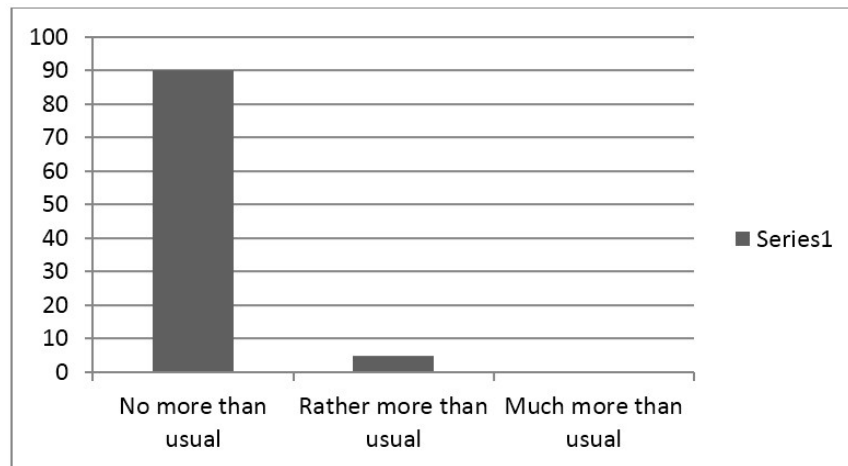


Figure-13: Development of feeling of worthlessness among the respondents

Whether the respondents recently have been feeling reasonably happy in the same manner as before, most of them answered no more than usual, some of them answered rather more than usual and none of them answered much more than usual (Figure-14).

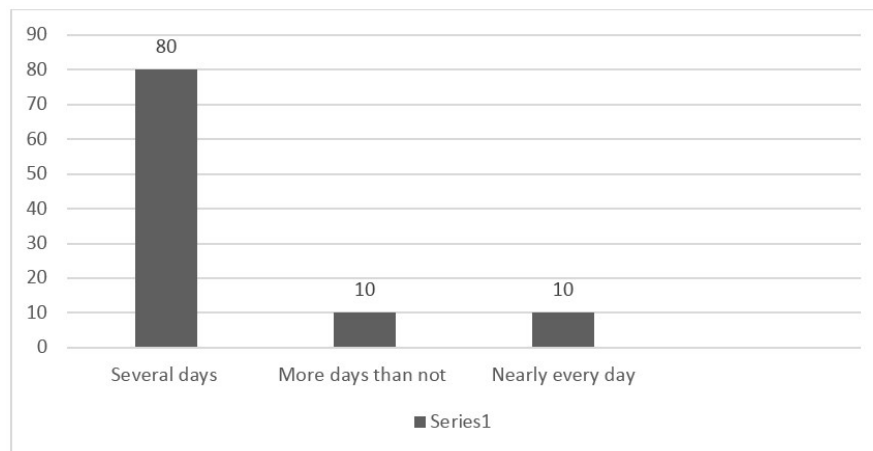


Figure-14: Feeling of being reasonably happy

The study tried to have an idea of the conditions of families before and after the pandemic and the disruption caused by it within the social, economic and health standing of the respondents. We tried to ascertain minor activity vicissitudes also had some after-effects on our thoughts throughout this period. For example, while shopping for daily needs, somebody at a store might have obtrusively asked you to keep distance, implying that you may be the carrier of the infection. When you turn over your card to obtain your purchases, the market keeper asks you to enter the PIN by employing a tooth pick. Such changes do leave some kind of impression on our minds. Even merely while walking on

the streets and finding every other's cloaked faces, one thing that brings a way of threat that the other person may well be a carrier of the virus. These are some instances that most people will relate to during this world of the 'new normal'. As per the World Health of Organization, there epidemic situation can be associated with an upsurge in social problems, psychological disorders, depression amongst youngsters, suicides, etc.

Social distancing and associated necessary norms set a definite variety of challenges inside a family and among people. Around eighty six per cent households had a concern and fear about losing their lives, with virtually seventy nine per cent respondents voiced their concern of being stressed because of being isolated, which may also be may be one of the main explanation for increase in cases of tension and depression. While handling such challenging conditions, it's our human tendency to look for a network, and care and responsibility from others, particularly in rural Asian countries, with its tradition of consolidated care and support from neighbors. The impact of the epidemic on vulnerable segments, primarily ladies and kids, was large not only among in Asian countries but also globally. COVID-19 has modified the planet from varied points of view. Few ramifications of this epidemic on humans have left a blemish on the lives of each individual. As a consequence, the issue of well-being, decline of the labor-intensive economy, inadequacy of medication, sanitizers, poverty and joblessness has, no doubt, become the overwhelming focus of each and every one.

DISCUSSION

The COVID infection could reduce someday. However, the result of this uncertainty can create a possible threat to social relations. Major metropolitan cities in Asian countries still struggle to contain the virus. The sole possible manner of defeating the pandemic is containing and eradicating it for our survival. There is a degree of urgency to create a system of 'living cooperation' to beat the increasing anxiety of social-distancing and isolation. Any human investment (or investments in human values) in social relations will definitely amendment or minimize the state of socio-psychological insecurity that has entered social life these days. The following points emerge in connection with the psycho-social aspects and control of the spread of the pandemic:

- Social distancing is critical to scale back measures to reduce and eventually stop the sickness.
- Some persons with disabilities might have difficulties in implementing measures to stay virus free, as well as to maintain personal hygiene and make suggested frequent cleanup of surfaces and houses. For such individuals, cleanup of homes and laundry will be difficult, because of physical impairments, environmental barriers, or interrupted services.
- Youth getting disproportionately laid-off.
- Social distancing and self-isolation, travel restrictions, reduced manpower

across all economic sectors, can lead to job loss or faculty closure.

- Disruption of traditional life of kids minimized demand for commodities and product made for kids, particularly for outdoor and those requiring close contact.
- Increase in demand for medical providers, enhanced demand in food sector, and even enhanced domestic violence.
- Panic-buying and storage of food products by people. Poor people, homeless people, refugees, and migrants are disproportionately stricken by the health and economic impacts of COVID.

Apart from the above mentioned issues, social trauma suffered by patients may also include loneliness, social stigma, fear of death, family survival tension, livelihood tension, alien behaviour by society, government apathy, boredom of daily routine, etc. Presently, some of the major impacts of COVID-19 in everyday life that have far reaching consequences in society can be summarized as under:

- Service sector has not been able to provide their best services.
- Cancellation or postponement of large-scale sports tournaments has taken place.
- Disruption of celebration of cultural, spiritual and gala events.
- Undue stress among the population.
- Social distancing with our peers and members of the family.
- Closure of hotels, restaurants and spiritual places.
- Closure of places for entertainment and diversion, such as motion-picture shows, play theatres, sports clubs, gymnasiums, swimming pools, and so on.
- Postponement of examinations, etc.

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