

Study of Covid-19 Pandemic's Effect on the Mental Health of Migrant Workers

Akshat Tripathi¹ and Pulkit Verma²

¹Research Scholars, Department of Genetics, Aligarh University, Aligarh, Uttar Pradesh, India

²Research Scholars, Department of Genetics, Aligarh University, Aligarh, Uttar Pradesh, India

¹Corresponding Author: akshattripathi023@gmail.com

Received: 20-08-2023

Revised: 05-09-2023

Accepted: 25-09-2023

ABSTRACT

The COVID-19 epidemic has significantly changed social and professional settings in a number of ways. Social distancing laws, mandatory lockdowns, isolation periods, fear of getting sick, suspension of productive activities, loss of pay, and anxiety about the future all have an impact on residents' and employees' mental health. Pre-existing psychological morbidities, high prevalence of pre-existing physical health morbidities like respiratory disease, tuberculosis, and HIV infections, adverse psychosocial factors like lack of family support and caretaker throughout the crisis, and their limitations to follow the principles and rules of Anxiety, depression, PTSD, and sleep disorders are among the mental issues linked to the health crisis that are more likely to affect healthcare workers, particularly those on the front lines, migrant workers, and workers who interact with the general public. This occupational group is made even more prone to the occurrence of psychiatric illnesses by the blow of economic limitations brought on by labor shortages, the lack or suspension of activity safety and health-related basic regulations with associated activity dangers, and other factors. This review establishes the framework for a deeper comprehension of the psychological situations of workers during the pandemic, integrating individual and social perspectives and offering insight into doable individual, social, and activity approaches to the current "psychological pandemic."

Keywords: Anxiety, COVID-19 Pandemic, Corona Virus, Migrant Workers, Mental Health

I. INTRODUCTION

In December 2019, Wuhan, Hubei Province, China, reported a respiratory disorder outbreak linked to a novel coronavirus called severe acute respiratory syndrome (SARS) COVID-19. Over the ensuing weeks, infections spread throughout China and other countries, resulting in a pandemic (Zu et al., 2020). A massive virus cluster that causes illness may be COVID-19. It includes everything from the typical cold to more serious conditions like severe acute respiratory syndrome (Shubhi and Archana, 2020).

As of right now, there is no medicinal cure for the condition (Hevia and Neumeyer, 2020). The COVID-19 pandemic, a sickness that is fast spreading, has caused a number of unfavorable psychological reactions and feelings in the population that is at risk. As a result, in addition to its negative impacts on physical health, the COVID-19 pandemic may also result in long-lasting psychological symptoms such as psychoneurotic manifestations, anxiety disorders, and depression (Qiu et al., 2020; Tandon, 2020).

The sudden nationwide travel bans, the lack of work that left people with no money to cover their daily food costs, and the quarantine laws all contributed to the high levels of tension that eventually led to socially irresponsible behavior and panic attacks among internal migrant workers during India's lockdown. An example of this is the recent attempt by stranded internal migrant workers to flee to bus and train stations while disobeying lockdown orders to return to their home states. As a result, there is a constant risk of infection, quarantine, stress, and disregard for safety precautions. These migrant workers' anxiety levels are rising, prompting some of them to walk thousands of kilometers on foot to return to their homes without any food or lodging along the journey.

According to the G.O.I., 2020's list of psychological issues among migrants throughout the COVID-19 pandemic, internal migrant workers experience high levels of anxiety and worry. These employees need psychosocial care. Due to the significant economic burden of unemployed migrant workers, rural India may become particularly vulnerable to suicide in the near future as a result of the ongoing reverse migration of many migrant workers to their native villages (Nelson, 2020). Reports of migrant workers suffering from severe nervous breakdowns and depressive psychotic diseases have begun to appear in print media (Shastri, 2020).

II. POPULATION INTERNAL MIGRANT WORKERS

It is crucial that migrants, regardless of their migration status, be included in efforts to avoid COVID-19 unfolding as the globe faces it and governments work to stop it. The 164 million migrant workers worldwide are already at risk, but the most vulnerable ones are now most likely to be negatively impacted by changes in global communities, economies, and supply chains. India's economy was significantly impacted by the estimated 100 million internal migrants employed by Indian companies, according to an official employment estimate (Deshingkar and Akter, 2020). Internal migrants are employees who have moved as individuals or in groups, typically temporarily or seasonally, in search of employment in metropolitan centers of various Indian states or other countries. According to Zeitlyn et al. (2014), temporary, unskilled work with low earnings, job insecurity, and economic fragility are the main interactions between rural and urban migrant workers. These work settings are peculiarly characterized by these features. They are vulnerable to the negative psychological effects of multiple stresses brought on by interactions between a variety of variables, including chronic financial hardship, disease caused by a lack of resources, cultural grief, the loss of spiritual practices, and social protection systems. They may also experience language barriers, identity changes, abuse, and poor access to care, in addition to poor living conditions and financial limitations. Many temporary specialists are out of work as a result of the COVID-19 imprisonment in India. As a result of the COVID-19 pandemic, Indian migrant workers have endured a number of hardships, including lost opportunities for employment, food shortages, and uncertainty about their futures due to the closure of factories and other industries.



Source: <https://www.newsecuritybeat.org/2021/11/security-implications-asia-pacific-states-restrictions-internal-migration/>

Factors that may affect the propensity of interior migrant workers for undesirable mental state manifestations are worth taking into account in the Indian context, given the backdrop of the COVID-19 pandemic.

2.1 Existing Mental Health Conditions

Even prior to COVID-19, migrant employees had a higher prevalence of psychological state concerns than non-migrant employees (Virupaksha et al., 2014; Firdaus, 2017). Rural to urban migrants are less psychologically stable than both residents in the communities of destination and their rural counterparts in the communities of emigration. This shows that the experience of migration has a negative effect on psychological well-being (Li et al., 2009). Also, people who have had psychiatric conditions in the past are more likely to have severe psychological problems (Ho et al., 2020; Zhong et al., 2013). This is likely because pre-existing or latent health problems contribute to acute outbreaks. It is likely that the COVID-19 pandemic and the nationwide lockdown would delay the onset of the disease and mental condition and worsen symptoms in cases where they have already been diagnosed. Any simple respiratory complaint will make people more anxious, and given the current situation, COVID-19 is expected to have a very serious impact. Patients with psychoneurotic compulsive disorder, especially those with checking, billboard, and laundry compulsions, are at higher risk. The fixation with contamination and laundry compulsivity might increase if personal cleanliness standards were raised.

The effects of quarantine will be entirely different from what is reasonable. Worry, rage, anxiety, and terror over a worse consequence will be sparked, along with emotions of boredom and loneliness and guilt over not being there for family. These problems will manifest in a person with a history of mental illness with renewed severity and may lead to posttraumatic stress disorder or even dangerous ideas and attempts. The level of anxiety is so high that it can lead to psychosis and ism delusions (Brooks et al., 2020).

Due to the risks associated with both compliance with prescribed medications and the provision of standard therapy, patients with bipolar illness and schizophrenia are likely to experience relapses. For people with substance use disorders, this time period could be fatal because the lack of drugs or other substances will cause severe withdrawal symptoms and medical emergencies like delirium or seizures, which could be serious due to inadequate access to emergency services that are in short supply (Xiang et al., 2020).

2.2 Family Assistance and Caregiver in a Crisis

Due to the fact that the majority of male migrant workers don't appear to live with their families, their loneliness predisposes them to mental illnesses like depression (Zhou et al., 2020). Losing loved ones to the epidemic, feeling powerless to meet the health needs of the family and remaining away in remote areas can all add to the stress.

2.3 Community Exclusion

Strict social conventions that distance people from one another could exacerbate issues with caste, religion, stigma, or patriarchal views, such as social exclusion. With social identification serving as the primary axis of their exclusion, social exclusion indicates disadvantages intimately associated with constrained teams and categories of people. People with coronavirus, those who have recovered from the virus, and their families have experienced stigma and neglect from their community throughout the COVID-19 pandemic. Common people frequently experience animosity from their neighbors. Housing societies may identify instances of antagonism when residents have a recent history of international travel (Prachee and Vaidya-Kannur, 2020).

Members of social and non-governmental organizations (NGOs) that performed community work were also mistreated. Social exclusion has a negative impact on migrants' psychological states (Li and Rose, 2017). Due to socio-environmental challenges such as rank loss and discrimination, internal migrant workers have a significant frequency of anxiety, psychotic disorders, and post-traumatic disorders (Mucci et al., 2019). In addition to the problems brought on by the pandemic, public health measures such as mandatory quarantine or isolation inside temporary government shelters upon return to their original locations and social isolation increase the feeling of loneliness, leading to mental health issues and even the possibility of suicide (Nelson, 2020).

2.4 The Nervous System and Mental Health

Within the current COVID-19 pandemic, neurological complications have become a significant cause of morbidity and mortality. Numerous hospitalized individuals show neurologic symptoms, ranging from headache and loss of smell to dementia and disabling strokes, in addition to metabolic deficiency. In the future, COVID-19 is also projected to take a toll on the neurological system. According to Holmes et al. (2020), SARS-CoV-2, like other coronaviruses implicated in the previous epidemics in 2003 and 2012, may be biologically neurotropic and clinically neurotoxic, leading to neurological and mental health disorders.

2.5 Psychological Distress

Anxiety, depression in about 28% of cases, and self-reported mental stress in 8% of cases are the most common psychological reactions to the COVID-19 epidemic (Rajkumar, 2020). This is likely because people learn a lot about the virus during an epidemic from the media, which can make people more worried about their health (Asmundson et al., 2010; Sirri et al., 2001).

2.6 Adverse Occupational Health Scenario

Severe acute respiratory syndrome was widely viewed as a public health threat; however, it was less appreciated as an industrial disease in nursing. Among the activity teams in danger were HCWs, animal and food preparation handlers, transport staff (ranging from flight attendants to taxi drivers), and laboratory researchers operating with the SARS-CoV. A big issue for the numerous workers is the worry of job losses or loss of cash gain. This is often obvious from the economic consequence of COVID-19 wherever, in numerous countries, non-essential services are halted and lots of people dwell at home and avoid going out for buying or enjoyment. Self-employed staff, staff in an exceedingly gig economy, and people operating in entertainment, hospitality, tourism, and travel sectors, to call many, is vulnerable to loss of financial gain and job losses. Several governments have offered such groups stimulus packages in an effort to manage the economic consequences.

Companies and activity health departments may also have a role in managing such issues among employees who are under their supervision as well as in the national and international pandemic response. Therefore, when drafting COVID-19 epidemic policies, public health policymakers must give adequate consideration to the psychosocial issues affecting internal migrant workers. The discriminatory effects of the pandemic on the internal migrant staff will hinder our efforts to stop the spread of COVID-19, but they could also exacerbate already-existing disparities in mental health.

To lessen psychological distress and avert further mental health consequences, a comprehensive intervention system must be built in addition to screening for psychological stress and targeted intervention. To combat the rise in mental illnesses among internal migrant workers, manufacturing medical officers, general practitioners, trained community medical experts, and general public mental health services should all be combined with mental health professionals.

III. CONCLUSION

In the context of a global pandemic, organizational and job issues have a significant impact on psychological health. The work thus provides a very important objective towards which efforts ought to be directed to manage mental health problems connected with the COVID-19 pandemic.

Mental problems associated with the health emergency, like anxiety, depression, dangerous suicidal thoughts, sleep disorders, medicines, and alcoholism, affect a lot of workers, particularly those on the frontlines, migrant workers, and workers in contact with the general public, just like enforcement. These concerns are variously related to the high level of job strain, the concern of being infected and being a vector of the disease towards the family, and the discrimination and stigma that would arise.

In addition, unstable employment, prolonged confinement and isolation, abuse of workers' rights, and uncertainty about the future exacerbate psychological conditions, especially in younger people and those with higher educational backgrounds. Internal migratory workers may be a group at risk for COVID-19 pandemic-related severe, acute, and chronic mental health effects due to a variety of underlying factors acting concurrently to worsen physical, mental, and socioeconomic conditions.

In order to take action against the psychological consequences of the pandemic, it is necessary to raise awareness and psychological preparedness among internal migrants. Mental health may be a crucial aspect that needs to be addressed.

REFERENCES

- [1] Gao J., Zheng P., Jia Y., Chen H., Mao Y., & Chen S. (2020). Mental health problems and social media exposure during COVID-19 outbreak. *PLoS One*, *15*, e0231924.
- [2] Mucci N., Traversini V., Giorgi G., Tommasi E., De Sio S., & Arcangeli G. (2019). Migrant workers and psychological health: A systematic review. *Sustainability*, *12*(1), 120.
- [3] Government of India, Ministry of Health and Family Welfare. (2020). *Psychosocial issues among migrants during COVID-19*.
- [4] Ho C.S., Chee C.Y., & Ho R.C. (2020). Mental health strategies to combat the psychological impact of covid-19 beyond paranoia and panic. *Annals of the Academy of Medicine, Singapore*, *49*(3), 155–160.
- [5] Garfin D.R., Silver R.C., & Holman E.A. (2020). The novel corona virus (COVID-2019) outbreak: Amplification of public health consequences by media exposure. *Health Psychol.*, *39*, 355–357. doi: 10.1037/hea0000875.
- [6] Li J., & Rose N. (2017). Urban social exclusion and mental health of China's rural-urban migrants-A review and call for research. *Health & Place*, *48*, 20–30.
- [7] Li X., Stanton B., Fang X., Xiong Q., Yu S., Lin D., Hong Y., Zhang L., Chen X., & Wang B. (2009). Mental health symptoms among rural-to-urban migrants in China: A comparison with their urban and rural counterparts. *World Health Popul*, *11*(1), 24–38.
- [8] Hevia C., & Neumeyer A. (2020). A conceptual framework for analyzing the economic impact of COVID-19 and its policy implications. Available at: <http://www.latinamerica.undp.org>.