

COVID-19 Trauma In Youth Of Kashmir

Since the World Health Organization declared COVID-19 a pandemic on 11 March 2020,⁵ the new coronavirus spreading has been the focus of attention of scientists, government officials and populations. One of the main concerns is the impact of this pandemic on health outcomes, especially on mental health. Stay-at-home orders, quarantines, and social distancing have all had considerable impacts on the day-to-day lives of people of all ages. Youth are a particularly vulnerable group during public health crises, including youth with pre-existing mental health concern.

Years of strife left a generation traumatized. India's clampdown disrupted daily life. Now the battle against the coronavirus has further isolated and scarred a people with little access to help. Doctors and researchers and Mental health workers say the Kashmir Valley is witnessing an alarming increase in instances of depression, anxiety and psychotic events.

The COVID-19 pandemic has caused stress, anxiety and worry for many individuals, arising both from the disease itself and from response measures such as social distancing and lockdowns. Common causes of psychological stress during pandemics include, fear of falling ill and dying, avoiding health care due to fear of being infected while in care, fear of losing work and livelihoods, fear of being socially excluded, fear of being placed in quarantine, feeling of powerlessness in protecting oneself and loved ones, fear of being separated from loved ones and caregivers, refusal to care for vulnerable individuals due to fear of infection, feelings of helplessness, lack of self-esteem to do anything in daily life, boredom, loneliness, and depression due to being isolated, and fear of re-living the experience of a previous pandemic.

Loneliness is considered as a key risk factor of lockdown for the mental health and wellbeing of people of all ages especially young population. Emerging evidence suggests that the proportion of adults experiencing loneliness is highest amongst young adults, with another survey identifying that 50% of 16-24 year-olds have experienced lockdown loneliness. Emerging evidence from the COVID-19 pandemic also suggests several other factors influencing the mental health and wellbeing of children and young people including worries and concerns around their education (all ages), missing school (all ages), transitions and being away from school (primary school age), academic pressures (secondary school age), their career (young adults), and uncertainties about the future more generally (young adults). It has similarly been reported that lack of contact with others, boredom, not being able to attend school, financial worries and general uncertainty about the future are key factors impacting mental health and wellbeing.

Business people owing a mountain of debt that is climbing higher and higher under a lockdown that has shuttered nearly everything in Kashmir.

Emerging evidence from the COVID-19 pandemic suggests that in general, many adults are feeling anxious or worried about the future. In particular, adults who are unemployed have reported not coping as well with a quarter of this group feeling hopeless with primary concerns around financial security. Parents who are working have also reported difficulties in balancing the needs of their child with the demands of working. Moreover, parents with children with special educational needs have reported that they were experiencing higher levels of stress and require more support to cope with changes in their children's behaviour. One study has reported that difficulties in relationships and conflict within the family home are problematic for children and young people, particularly those

with experience of the youth justice system. An important consideration about the impact of quarantine is the impact on both the relational family contexts in which children and young people are isolating, and the impacts on the mental health and wellbeing of parents/ caregivers more generally.

Frontline workers, such as doctors and nurses may experience additional mental health problems. Stigmatization towards working with COVID-19 patients, stress from using strict biosecurity measures (such as physical strain of protective equipment, need for constant awareness and vigilance, strict procedures to follow, preventing autonomy, physical isolation making it difficult to provide comfort to the sick), higher demands in the work setting, reduced capacity to use social support due to physical distancing and social stigma, insufficient capacity to give self-care, insufficient knowledge about the long-term exposure to individuals infected with COVID-19, and fear that they could pass infection to their loved ones can put frontline workers in additional stress.