FACTORS CONTRIBUTING TO FEAR OF COVID-19 AND ITS CONSEQUENCE IN MENTAL HEALTH

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ABSTRACT:

The goal of the study was to find out how participants' fear of COVID-19 affected their mental health in Rajshahi, Bangladesh. During the COVID-19 pandemic, online surveys were conducted among the demographic subgroups (gender, educational background, socioeconomic status, marital status, occupation, family types, residential area, getting out of the house or not, income level, health condition, and contamination history) from Rajshahi division residents aged 16 to 51. The cross-sectional review was directed on 641 people and the example included 51.3% female and 48.7% male. The FCV-19 scale, the GHQ-12 scale, and the personal information form were used to collect pertinent data. The t-test, ANOVA, and Pearson's correlation tests were used in SPSS to analyze the data. Gender, marital status, outing during COVID-19 situation, and income status were significantly correlated with the mean scores of respondents' COVID-19 fears. The current review tracked down the apprehension about Coronavirus adversely impacted emotional wellness. The vulnerable groups must be taken into consideration by healthcare providers.

KEYWORDS: *Fear, COVID-19, Fear of COVID-19, Mental health.*

INTRODUCTION :

The World Wellbeing Association has previously proclaimed that Coronavirus is a worldwide pandemic (WHO, 2020). Mental health issues are linked to the spread of COVID-19. Additionally, many psychological symptoms and distress are experienced by individuals (Bao et al., 2020). Along with the fear of contracting the current highly contagious virus, the fear of losing loved ones, the spread of false information about COVID-19, the lack of medical support, which results in a lack of adequately equipped units to treat patients, and the lockdown-related issues (such as prolonged home isolation, social distancing, fear of unemployment, food insecurity, etc.), are being investigated for connections to mental health issues like insomnia, anxiety, phobias, trauma, and depression, among others. (Ahorsu and others, 2020; Brooks and co. ,2020; de Lima and other, 2020; Hossain and other, 2020a; Naser and co., 2020; 2020, Pakpour and Griffiths; Pakpour and others, 2020; Rahman and other, 2020; Sakib and co., 2020; Tasnim et al., 2020). Anxiety and depression are helped by the fear of COVID-19 (Belen, 2021). Zeynep and others, 2021) exhibited a review and tracked down anxiety toward Coronavirus firmly connected with nervousness, horrible pressure, misery, and sleep deprivation. The feeling of hopelessness is linked to the fear of COVID-19. Going against the norm, it is adversely connected with

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care (Saricaliet. al., 2020). COVID-19, on the other hand, poses a greater threat to people who are more outgoing. Around then the people who are less sincerely stable they experience more gloomy inclination (Basileyo and Garcia, 2021). Mertens et. al., (2020) said that fear of COVID-19 is predicted by the risk for loved ones, health anxiety, and information from traditional and social media. Pramath and co. 2022) suggested that a low fear of COVID-19 has a positive impact on mental health. Akninet al. In the early months of the pandemic, anxiety, depression, and distress increased, according to (2022).

METHODS AND MATERIALS

The snowball sampling method was used to get the sample. The respondent was asked to send the questionnaire via email, social media, and the internet to a friend or family member. The Rajshahi people participated in this collection process from November 15, 2020 to December 22, 2020. The purpose was stated in the questionnaire's introduction (Google Form), and consent was obtained from the respondent. The information will only be used for research and will be kept private. We worked with 641 normally distributed data out of 650 that were collected. The subject ranged in age from 16 to 51.

RESEARCH TOOLS

- **A personal information form:** The researcher created this form to gather the necessary information for the research.
- **The Fear of COVID-19 Scale (FCV-19S):** An adapted Bengali version of the FCV-19S scale (Sakib et al.,) was used to measure the level of COVID-19 fear. 2020), which was initially created by Ahorsu et. al. (2020), as referenced by Sarker et al. 2022). The FCV-19s is a 5-point Likert- type unidimensional scale with seven things (going from 1: Strongly disagree with point 5: Strongly concur), and its range of scores is from 7 to 35. The total score of the scale is calculated by adding all of the items together, and the higher the score, the more COVID-19 fear there is. Bangla's variation of the scale affirmed OK psychometric properties (Sakib et al., 2020). Sakib et al., (2020) reported that the FCV-19S in Bangla has an acceptable level of reliability (Cronbach's alpha: .871, corrected correlations between total items: between.72 and.80) and validity (CFA: WRMSR = 0.889, CFI = 0.946, TLI = 0.947, RMSEA = 0.071). In the study, Cronbach's alpha was 0.85.
- **Description of GeneralHealth Questionnaire (GHQ-12):** An adjusted Bengali variant of the GHQ-12 scale (Sorcar and Rahman, 1989), Refered to by Sarker et. al.(2022), which Goldberg first developed in 1972, was used to assess the participant's mental health. GHQ-12, while converting into Bengali, Sorcar and Rahman (1989) took on thescoring framework and they scored 0, 1, 2, and 3 for the positive things and converse score for negative things. It is a size of 12 things where 1 = not the slightest bit to 4=to an extraordinary degree. The likely score on this scale is 0 to 36. High scores are a mark of good emotional wellness. In this study, Cronbach's alpha was.86.

RESULTS AND DISCUSSION

The current study enrolled 641 individuals as respondents. What's more, the review assisted us with understanding the powerful element that influences dread of Coronavirus 19and its effect on psychological well-being. Distinct measurements (frequencies, rates), T-test, one-way ANOVA, and Pearson connection were utilized to break down the reactions of the subject.

Among the segment attributes, the most extreme mean scores of dread of Coronavirus with the housewife/househusband who have no work. COVID-19 fear had a mean score of 28.13, which is not statistically significant. In a similar vein, the person who has the COVID-19 virus also displayed a greater fear of the virus. The score, which was 26.69, was clearly significant. Negligible trepidation was found among the gatherings who had expanded their pay in the pandemic circumstance. They had a mean score of 18.00, which is statistically accurate.

There was a significant gender difference between males (M= 21.76; M= 23.36; SD= 5.62) and females SD= 5.70). The females are feeling more apprehension than their partners. The female is more susceptible to new dangers. Fear of COVID-19 was also influenced in large part by the state of one's

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marriage. The person who separated from his or her spouse displayed more fear (M=25.25; SD= 6.29). The only individual (M=22.34; The married ones (M=23.76; SD= 5.75) displayed significantly less fear than the single ones. SD= 5.35). Furthermore, the outcome was significant (P0.05).

The fear of COVID-19 was also influenced by the outing condition. The individual felt some little apprehension whose development barely different (M= 20.02; SD= 5.31). Furthermore, individuals who couldn't move out and remain at home had likewise a bigger trepidation (M= 22.88; SD= 5.65). Moreover, Cash played a fundamental part in feeling of dread toward Coronavirus. Those who are financially secure and saw an increase in their income as a result of the pandemic. They had negligible apprehension or uneasiness. The average score was 18.00, with a SD of 5.87. Conversely, the mean score of those whose pay had diminished and whose had not changed was 22.90 (SD= 5.59) and 22.44 (SD= 5.77).

CONCLUSION

The current review underscored the significance of psychological wellness. The continuous pandemic circumstance played had an adverse consequence in mental state. Also, this study will be useful for the separate individual who worked with psychological wellness. In terms of gender, marital status, income, outing during the pandemic, and contamination history, mental health caregivers must take vulnerable groups into account. People who have been separated or divorced may feel more vulnerable than those who are married or single. Fitzpatrick and colleagues, 2020) likewise tracked down a huge relationship among weak gatherings with dread of Coronavirus. At last the trepidation was high among them. Essentially, cash turned into a major issue.

People whose incomes had increased during the pandemic were less concerned about COVID-19. In actuality, people who become bound in the house face more psychological wellness issues than the individual who could go out. Individuals became exhausted remaining at home. Additionally, the history of contamination is the most concerning aspect. Whose relatives werebeing went after or themselves were more weak in this pandemic. The fear of COVID-19 increased as a result of this situation. which had a significant negative correlation with mental health. Each of the gatherings need more mental help, particularly ladies who were more weak in any unfortunate circumstance.

Furthermore, these investigations might investigate the ways of lessening dread of Coronavirus and psychological well-being issues by altering their ways of life and other related risk elements or ways of behaving. However, in-depth psychosocial research with nationally representative samples is essential for determining potential risks to mental health.

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