



Psylens
Lets scan through...

— An e-Magazine of Psychology Association —



Volume 6 Issue 1 July 2020

PANDEMIC & MENTAL HEALTH

Special issue

Dear Members of the Psychology Community:

Greetings...

PsyLens team presents before you the Volume 6, Issue 1, July 2020; in addition to the simplified, condensed version of research works conducted worldwide in various fields within Psychology, the present issue of PsyLens also shares few perspective articles on the impacts of Coronavirus across segments.

COVID 19 pandemic is getting direr day by day that no part of the world/no segment of the society is spared its consequences. This special edition of PsyLens will take you into a journey on the impacts of the lockdown in different fields, mental health issues, social crisis created by the COVID-19 pandemic, co-ordinated efforts across disciplines and nations to handle this common enemy, and the changes that this "new normal" brought-in, and the possible future, post pandemic.

We wish you a fruitful learning experience.

Stay Safe.... Stay Healthy....

Warm Regards,
Team PsyLens

CONTENT



01
Fake News &
COVID-19

05
Vaccine
Nationalism



08
Hopeful Tourism Post
COVID 19



12
Healing with
Yoga & Ayurveda



17
COVID 19 &
Hoarding





23
Synergyzing 2C's
Responses



27
Nurses-The selfless
eager beavers



31
The Invisible Killer



35
Grief amidst
Pandemic



41
COVID 19: Plight of
Elderly



45 Kerala's COVID-19 Model



53 Locked In



59 Why People don't Comply?



63 Outside-In & Inside-Out



68 Consumer Behavior in the next normal

FAKE NEWS & COVID-19



The current scenario with COVID-19, has been witnessing the spread of much fake news that has the potential to trigger health anxiety, distress and fear. The World Economic Forum had declared the spreading of misinformation as one of the top 10 global threats to humanity in 2018. The propagation of unverified information triggers health anxiety and impairs the

ability to make the current situation's judgments.

So there arises a need to curb the spread of such messages. Before which, an understanding of why that is happening becomes necessary. Cyberchondria is a condition where one makes online health-related searches that trigger anxiety and fear about health.

The reactions that are present when a person is feared and anxious are similar even when that person is being overloaded with information.

A lot of misinformation is shared on social media that could be a result of a lack of critical thinking, lack of online experience or even laziness. The information that is shared is usually based on its relevance, shock value and believability of the content but not its source of origin. This certain behaviour is reinforced by the polarizing effect of social media too. There is evidence of a surge in the

Google search related to COVID-19 pandemic ever since February 2020.

The factors that could have caused this are the threat caused by the pandemic and the plethora of non-focused and unclear information in its regard.

This very uncertainty could provoke cyberchondria in some, wherein individuals seek for information that reinforces their beliefs. In the course, they are exposed to so much information that results in an overload. So, the behaviour of sharing unverified information and behavioural symptoms of cyberchondria is studied



concerning the factors that influence them. Thus, health factors (such as severity and susceptibility of the disease) and information factors such as (information overload and information trust) are considered for their effect on the sharing of misinformation and cyberchondriasis.

The results suggest that the sharing of COVID-19 related misinformation did not depend on the threat caused by the pandemic but because of the trust in social media. The information overload apparently reinforced cyberchondria that leads to sharing unverified news. Therefore, information trust and information

overload are positively correlated with misinformation propagation and cyberchondria, as did the severity and susceptibility of the disease.

Variations in the effect by gender and age elements were observed, with females being more likely to have cyberchondria and males having more tendency to share unverified information.

Older people are less predisposed to have cyberchondria and share fake news which could be because of self-regulation and not being heavily impacted by information overload.



The implications of this study can be used to understand the pattern of how users propagate fake news, factors that contribute to it and ways to curb it. This gives all of us a much needed yet important message to limit our exposure to pandemic-related information. Health organizations can recommend users only a

certain amount of COVID-19 news in a sustainable manner to prevent propagating misinformation and increasing the number of people with cyberchondriasis. This can also be helpful to social media companies to take up a significant role to prevent the sharing of fake news.

Condensed by
Ashika A
Department of Psychology



VACCINE NATIONALISM

The COVID 19 pandemic paused the entire world and people are stuck indoors, but it accelerated the chores of the frontline workers and the scientific community around the world. While the frontline workers are struggling to save people's lives, Scientists are working to develop an effective vaccine, because it is the only way to de-escalate the tensions associated with the pandemic and it is the only hope left to eradicate the virus.

Vaccine nationalism is a serious concern in the present scenario because many countries expressed

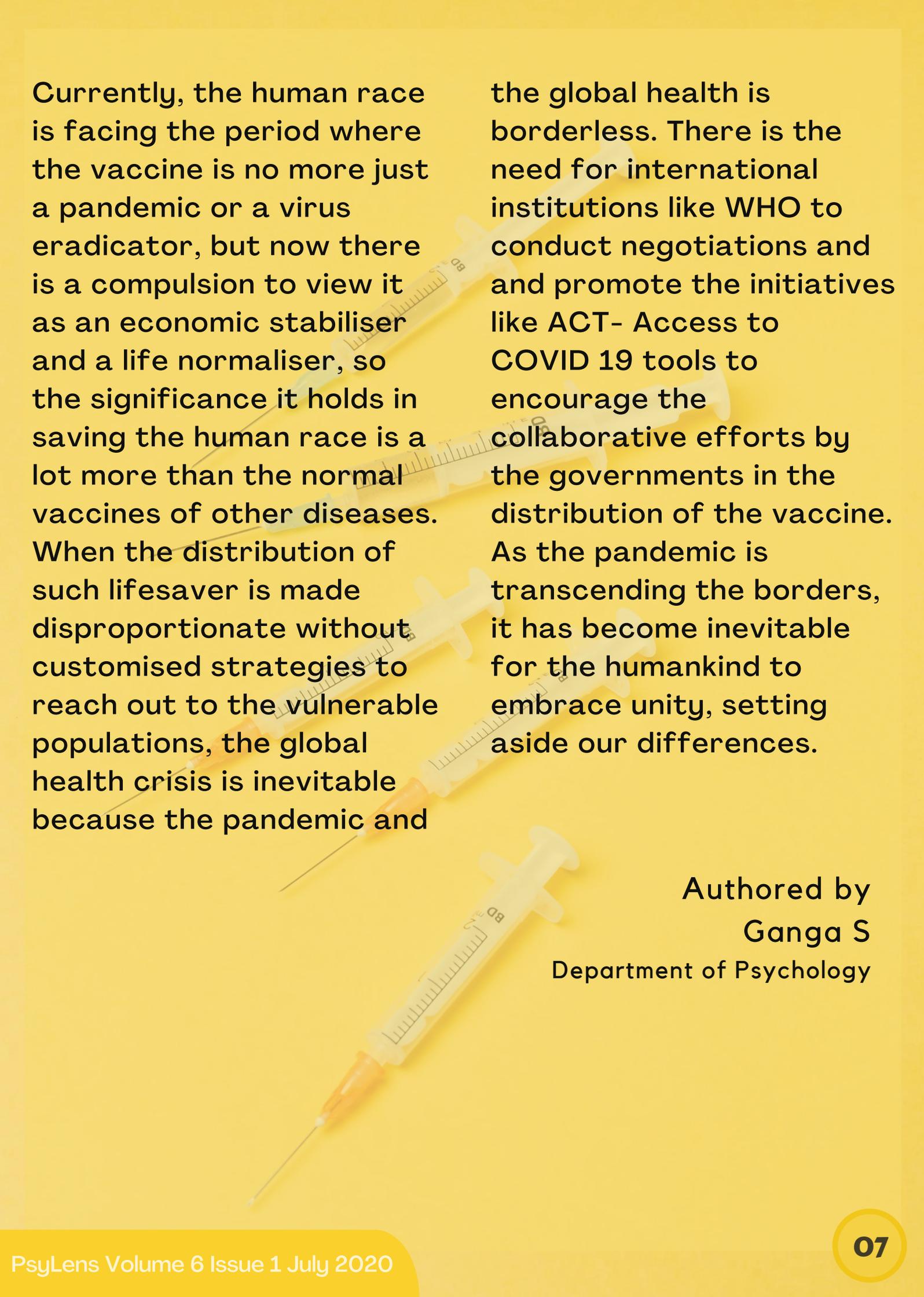
their move towards securing the vaccine for their citizens. This could be evident when the United States, in March, approached Germany's pharma company 'CurVac' for inquiring about securing exclusive rights for the yet to be developed vaccine, but American officials denied acquisitions (Gregory.A, 2020). On May 13, 2020, Bloomberg reported an interview with the French pharma giant, Sanofi's CEO, who said, "The U.S. government has the right to the largest pre-order because it invested in taking the risk", this is because of the investment

of Biomedical Advanced Research and Development Authority (BARDA) of the US to the Sanofi (Paton. J, 2020).

On May, AstraZeneca, a pharmaceutical company in Cambridge said that the first 30 million doses of the vaccine it produces will be available to the UK because of the country's \$79million investment in pharma (Marley. S, 2020). And India is not an exception, "A majority of the vaccine, at least initially, would have to go to our countrymen before it goes abroad," said Poonawalla, the chief executive of Serum Institute of India, which is the world's largest vaccine producer (Siddiqui. Z, 2020).

Added to this, India, the United States and the UK decided not to join the Access to COVID 19 Tools (ACT) initiative by WHO, which aimed at collaboration among the governments to develop and distribute the vaccine (Weintraub. R, 2020).

When the world faced the H1N1 virus in 2009 something similar happened. As the vaccine for the H1N1 virus developed within seven months, most of the high income nations signed pre purchase agreements and thus resulted in the vaccine distribution according to the richness of the nation, instead of the distribution in respect to risk of transmission (Weintraub. R, 2020).



Currently, the human race is facing the period where the vaccine is no more just a pandemic or a virus eradicator, but now there is a compulsion to view it as an economic stabiliser and a life normaliser, so the significance it holds in saving the human race is a lot more than the normal vaccines of other diseases. When the distribution of such lifesaver is made disproportionate without customised strategies to reach out to the vulnerable populations, the global health crisis is inevitable because the pandemic and

the global health is borderless. There is the need for international institutions like WHO to conduct negotiations and promote the initiatives like ACT- Access to COVID 19 tools to encourage the collaborative efforts by the governments in the distribution of the vaccine. As the pandemic is transcending the borders, it has become inevitable for the humankind to embrace unity, setting aside our differences.

Authored by
Ganga S
Department of Psychology

HOPEFUL TOURISM POST COVID-19



The world is currently facing an unimaginable crisis and almost every aspect of life has slowed down because people have been put under lockdown to stop the spread of the virus. The global tourism industry worth USD 8.9 trillion, accounting for 10.3% of worldwide GDP in 2019 has been put to a halt, thus leading to a fall in the economy and a loss of jobs for millions of

people. Amidst this chaos, many news has popped out in the social & traditional media as of how wildlife or aquatic animals are regaining their position in the Earth. For instance, the video of dolphins coming back to the canals of Venice which is considered an “Over tourism Icon” was widely shared by people around the world. Even in India, approximately 7 lakhs

olive ridley turtles have laid eggs on the coast of Odisha which is a massive number when compared to previous years and it happened due to decreased human activities in the beaches (Dar, 2020).

The appearance of wildlife has been stated by many people as the Earth is undergoing a “healing process,” but many environmentalists mentioned that this change was temporary due to pause in human activity and things will begin to change when the lockdown ends. On the other hand, various media sources were concerned if these claims were true. In the middle of these arguments what has largely gone

unexplored is the clear desire for environmental reparation that people express.

Previous year, the news about climate change was everywhere with huge strikes happening across the world. In present, just a few months after the global climate strike of 2019; planes were grounded, consumption was slowing down, the tourism industry was nothing but dead, and the carbon emissions were dropping not because of the actions taken by countries but due to a temporary cessation of human movements due to the pandemic. These led to discussions on the intersection between climate change and

the pandemic, most of which focused largely on practical concerns such as the global movement of people or goods and their impacts on carbon emissions. But the affective dimension and how these collective emotional responses can be used for future action were given least attention.

The present fixation on environmental healing seen in tourist social media can be viewed as a response to a widely felt *‘Ecological Grief,’* which indicates the feelings of loss and distress concerning experiences of climate change and environmental degradation. In the context of Ecological grief, animal reclamation in the urban spaces could be viewed as a notion of

environmental hope that is rich with meaning and symbolism.

The idea that the Earth can heal itself in the absence of human interference has brought comfort to millions of people and expresses a desire for environmental reparation. From a psychodynamic perspective, *‘Reparation refers to the desire to repair, make right, and restore which arises out of experiences of guilt, loss, and ambivalence.’*

These expressions of hope for environmental reparation could thus be connected to feelings of loss and guilt associated with ecological grief.

Tourism researchers are now beginning to turn their attention to how the psychology of environmental distress is impacting the tourist decision-making process and their experiences, especially about sustainable tourism.

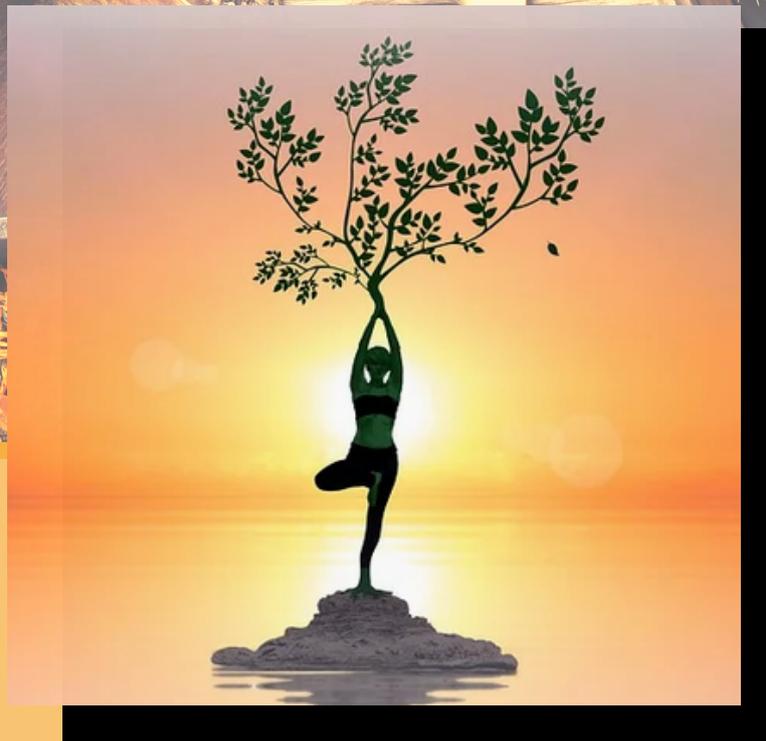
Understanding these psychological and emotional dynamics may help in gaining more insights regarding tourist consumer behavior,

including the persistent attitude-behavior gap to sustainable tourism. Thus, in the post COVID era, tourism should be designed with the view of healing the mother earth as well as the ecological grief of people, contributing to the project of Hopeful tourism.

Condensed by
Mathiyoli PM
Department of Psychology



HEALING WITH YOGA & AYURVEDA



The novel Coronavirus disease (COVID 19) is a respiratory pandemic, caused by SARS-CoV-2 affecting the human population through transmission from one person to another. The symptoms include fever, cold, loss of taste, cough which may lead to respiratory distress and organ failure. As it is a new virus and the development of vaccines

and medicines are underway, the use of Traditional Indian medicines in the treatment and prevention process could act as a helping hand.

According to Acharya.Y (1992), the concept of an epidemic (*Janapadodhwamsa*) is described in Charaka Samhita (classic of Ayurveda): *Vimana sthana*, chapter-3 and it define

strong immunity as the capability to prevent disease and detain its progress to maintain homeostasis.

A recent article on Ayurveda and Yoga for COVID-19 Prophylaxis (Girish Tillu et al, 2020) focuses on using Ayurveda and Yoga as an add-on therapy for disease prevention, health improvement and enhancing the overall quality of life.

The major emphasis on Ayurveda is because, unlike the allopathic treatments which focus on assailing the virus or immunizing against it, Ayurveda and Yoga pay particular attention to the human

body (*host*) and suggest measures for a healthy lifestyle.

The comprehensive approach of Ayurveda towards health promotion (*Swasthavritta*) comprises personalized interventions such as therapeutic cleansing procedures (*Panchakarma*) and Immunomodulators (*Rasayanas*), which are described as follows:

a) Local prophylaxis for COVID 19 deals with barricading the viral invasion into the body, through eyes, nose, and mouth as they are the major entry routes of the virus. The general preventive measures

described in Ayurvedic texts for respiratory disorders are:

1) Medicated water consumption- It is prepared by adding some spices such as dry ginger (*Zingiber officinalae*), Yashtimadhu (*Glycyrrhiza glabra*), Coriander (*Coriandrum sativum*), Cinnamon (*Cinnamomum verum*) to boiling water.

2) Gargles (*gandusha*) and Mouth rinses (*kavala*) - It is made by adding turmeric, licorice, neem, catechu barks, and natural salt into the water to cleanse the mouth and throat. *Glycyrrhizin* is an active constituent of licorice which is more effective than common antivirals in

preventing the replication of SARS associated coronavirus (Cinatl.J et al,2003).

3) Nasal oil application- The application of medicated oils such as butter oil, sesame oil and coconut oil on the nostrils may prevent the entry of pathogen. Traditional Chinese medicine has already proposed the application of nasal oil in preventing SARS-COV-2 infection (Fan.W et al, 2020).

4) Inhalation of steam with aromatic oils may provide adequate clinical relief in broncho constriction, nasal and throat congestion.

b) Systemic prophylaxis mentioned in Ayurveda are non-pharmacological in nature and are essential for maintaining overall health through diet, sleep, mental relaxation, and Yoga.

c) Rasayanas as immunomodulators

The botanicals used in Rasayana therapy such as Ashwagandha (*Withania somnifera*), Guduchi (*Tinospora cordifolia*), Shatavari (*Asparagus racemosus*), Amla (*Embelica officinalis*), Yashtimadhu (*Glycyrrhiza glabra*) are very effective in immunomodulation and immune homeostasis restoration (Balasubramani.S.P et al,2011).

Several clinical, In-vitro, and animal studies performed by Singh.N et al (2011) have found that the aqueous extract of Ashwagandha (*Withania somnifera*) possesses a wide spectrum dose dependent role in maintaining immune homeostasis.

d) Yoga for mental well being-According to Maxwell.L et al (2015), mental health conditions such as depression, stress, anxiety, loneliness may increase the risk of acute respiratory infections. Yoga breathing techniques (*pranayama*), postures (*asanas*), and procedures (*yogic kriya*) have been found to possess a

credible role in improving physical as well as mental health.

The impact of COVID 19 is drastic and breathtaking because of a large number of fatalities, especially in technologically and medically advanced countries due to a lack of proper treatment in Modern Western Medicine.

In such a scenario, the use of traditional treatment methods like Ayurveda would be effective and act as a preventive measure, just as the saying goes, '*Prevention is better than cure.*'

Condensed by

Arun R

Department of Botany
Bharathiar University



COVID-19 and HOARDING

The entire world is in the grip of COVID-19 pandemic and the number of positive cases keeps on accelerating exponentially. To scale back the spread of COVID-19 infection, the government in various countries has implemented lockdown and other social distancing measures. In this uncertain situation, people started hoarding goods or things, where they involve in acquiring possessions more than the actual requirement and feel difficult to discard them regardless of their actual value resulting in the piling of goods (Hombali, A., et al., 2019).

When the lockdown measures were announced, the hoarding behaviors of people became evident by the overwhelmed crowds in the stores across the country. This behavior is not strange but an expected one during various periods of evolution in humans as well as other species (Bergstrom, T.C, 2014).

What makes people hoard during these uncertainties?

"Indecisiveness"- an inability to organize and categorize objects resulting in piling and lack of confidence in dealing

with uncertainties results in hoarding.

As the COVID19 created an uncertain situation that the human race never experienced in this century, people started hoarding as it helps to feel confident and perceive that the situation is under control. At the same time, when people encounter others hoard things more than they do, it creates a feeling of inequality and thus reflects in more hoarding behavior than the normal (Chen, Y., et al., 2020).

COVID 19 also blew up a lot of fake news and misinformation thus decision making becomes difficult. This made people use heuristics to make decisions with the readily

available information which in turn resulted in people rushing to the stores buying groceries, medicines, sanitizers, and other basic requirements as much as possible (Baddeley, M., 2020).

During this period of COVID-19 pandemic, the majority of those who are involved in hoarding are older adults who show increased involvement in self isolation as they are more prone to COVID-19 infection.

Besides age, personality traits play a determinant role in predicting the response of people to the pandemic. Individuals higher in conscientiousness tend to involve hoarding toilet papers, hand sanitizers as they tend to

expect to be well organized and disciplined. Even though toilet papers are not directly involved in saving lives, it tends to serve as a subjective symbol of safety.

In addition to conscientiousness, individuals with increased emotionality perceive increased threat of COVID-19 infection which again resulted in the evolved instinct " Hoarding" (Garbe, L., Rau, R., Toppe, T., 2020). Thus the fear of scarcity of the object triggers hoarding and panic buying behavior among people(Bonneux, L., Van Damme, W., 2006). Thus hoarding is not because of shortage but because of contagious fear.

Hoarding behavior has been observed not only among individuals but also among various countries.

Economic times reported that Kazakhstan being the World's largest shipper of the wheat flour has banned the export.

Vietnam has rejected rice export contracts. The flow of sunflower oil has been decreased in Serbia. China has brought rice more than the actual requirement even though they have stocked rice that can be consumed for nearly 1 year. Russia has also taken actions in the supply of wheat. If this condition prevails there may begin food nationalism which tends to disrupt the interrelated international system.

Doing such acts doesn't bring any benefits either to the country or to the global community. By hoarding food supplies the country's farmers, as well as foreign customers, face the consequences. This act of hoarding will cause damage to the reputation and reliability of the country. This, in turn, reflects a rise in the price of the goods which again result in hoarding on an individual level.

The probability of hoarding fruits and vegetables is less as they get spoiled to a certain extent. Many countries have piled hand sanitizers, medicines, and personal protection equipment. This has created a shortage of those goods globally. In order to meet the demand

of personal protective equipment, the World Health Organisation has insisted on the government of various countries across the world to increase production by 40%.

Exaggerated misinformation plays a major role in triggering panic buying. Thus to decrease the rate of hoarding, officials need to be careful not to create panicky behaviors among the public while conveying the level of severity of the pandemic to the public.

As various factors are associated with hoarding, it is difficult to completely stop the public from hoarding things. To face the situation, the supply chain needs to be

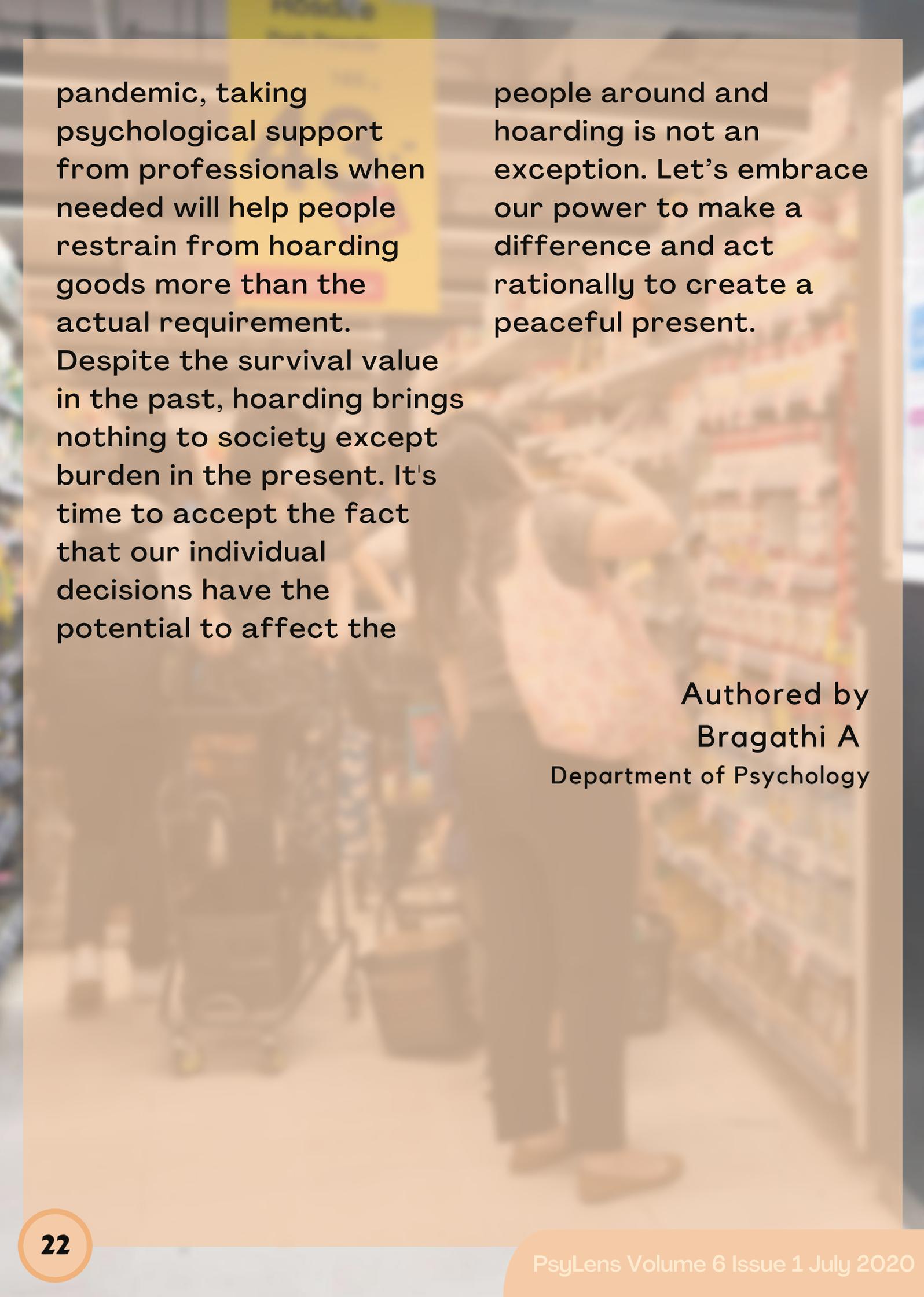
maintained and restrictions on buying goods need to be implemented.

Economictimes have reported that in Japan the toilet paper rolls are chained to the wall in the public restrooms. In Australia, each person is restricted to one pack of toilet paper rolls. As a way of conveying the availability of toilet papers, in Japan 12 rolls of toilet paper have been kept in the display. It was also reported that not only toilet papers are hoarded but also the items that can be used as an alternative are hoarded.

If hoarding behavior continues without any restrictions, there are possibilities that various

global conflicts might arise. International organizations need to take action in order to maintain the supply chain and to promote cooperation among various countries. The government has to check the equal distribution of goods and create awareness among the public.

Besides these measures, steps need to be taken on the individual level. Being aware of what we buy and how much we buy, making a list of things that is necessary and sticking to the list while shopping, managing stress through meditation, exercises, and other relaxation techniques, referring authorized platform to collect accurate information regarding the



pandemic, taking psychological support from professionals when needed will help people restrain from hoarding goods more than the actual requirement.

Despite the survival value in the past, hoarding brings nothing to society except burden in the present. It's time to accept the fact that our individual decisions have the potential to affect the

people around and hoarding is not an exception. Let's embrace our power to make a difference and act rationally to create a peaceful present.

Authored by
Bragathi A

Department of Psychology

SYNERGIZING 2C'S RESPONSES



The world economy had slowed down plus every business and services (except healthcare sector), including climate change actions have been paused in order to respond to COVID-19. Like a spillover, COVID-19 is accompanied by big cyclones, large scale locust attacks and intense heat waves, all of which were due to climate change (Jitendra, 2020). While COVID-19 is attributed to

man-made destructions (Down To Earth, 2020), so is climate change. But, the latter may result in more adverse irreversible damage, if not acted upon now.

A research article by Jochen Markard and Daniel Rosenbloom has described the need to synergize responses to COVID 19 & climate change, and strategies that can be

employed to address both of them efficiently.

Deploying available resources to deal with COVID-19 successively makes countries resourceless to deal with climate change. Hence synergizing the responses to both is the only possible way.

The currently established systems at all levels and all dimensions (sociocultural, technological, industrial, institutional, political) are walking the carbon intensive pathway. The change in these systems has to happen at fundamental levels to achieve long term sustainability. Such changes are termed as socio technical transitions.

Historically, established systems are known to change under unexpected external shocks. COVID-19 provides one such opportunity to bring about the socio-technical transition towards sustainability. The strategies that could be employed for this include:

The first strategy would be to capitalize on the disruptive effects of COVID-19 such as the slowdown of economic activities, to cut down carbon lock-ins. Carbon lock-in is a condition where individual and group efforts towards sustainability are restrained from producing greater change because of the existing fossil fuel based fundamental energy systems.

Decelerated industrial activity may further be declined to enable major shifts to come upon.

The second strategy is to build policies directed towards promoting low carbon innovations in the place of carbon intensive ones. This includes shifting to green energy systems such as wind, solar energy and hydropower. Such shifts are also needed in other major areas like food, transportation and consumer markets. Consumers can direct the lifestyle changes occurring during this period to build eco friendly practices including alternate ways to meet various needs. Finally, principles of Sustainability Transition Policy (policy making with a sustainability

orientation) can be employed in the integration of the above said strategies to make it effective. It includes:

- 1) Decline and innovation going hand in hand where cutting down lock-ins is synergized with finding low carbon alternatives and re orienting business holders to it.
- 2) Phased transition, involving gradual growth of small innovations to big markets and a step by step decline of carbon intensive industries and practices, all the while watching over the corresponding effect on stakeholders.
- 3) Context sensitivity, which emphasizes the need for specific customized plans catering to specific

contexts such as sectors, industries and regions. It especially holds true in creating maximum opportunities in areas most hit by COVID-19.

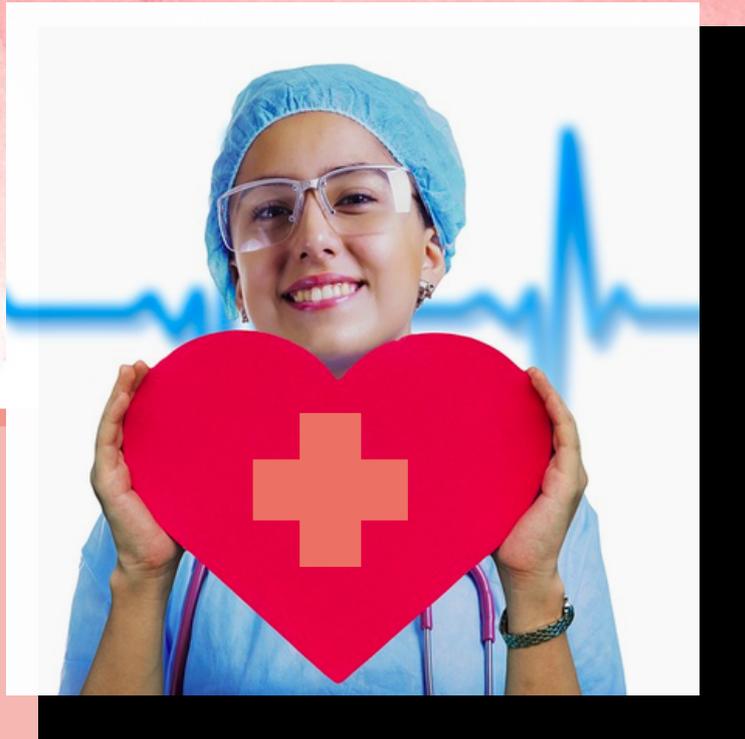
4) Monitoring the advancement of transition, to look out for wrong moves like adopting a solution that provides short term benefit but curbs long term sustainability.

5) Political relevance, that ensures support of stakeholders, especially the coordination of political, business and innovation leaders who will then guide others in the change.

This policy orientation is viewed as an ongoing, lasting process of policy making with downfalls, learning and adaptation. It also proves to be a viable alternative to existing policies that focus more on economic progress than sustainability. As the necessary shifts in major areas of energy, transport and food have already started and the resources are being depleted faster than its replacement rate, all thanks to COVID-19, it is high time for everyone to deal with both the pandemic and climate change.

Condensed by
Sathiyakala A
Department of Psychology

NURSES-THE SELFLESS EAGER BEAVERS



The entire world has been shuddered by the widespread of novel SARS-CoV-2 (Severe Acute Respiratory Syndrome Coronavirus-2) which has affected many lives, causing death in extreme cases. Lockdowns are put into effect by the government, with relaxations to few services, to control and prevent the spread of the virus.

Healthcare workers are efficiently and tirelessly working in treating and curing COVID infected individuals, which might cause psychological distress and burnout. A study conducted by Tung-Ping-Su et al., in 2007 has found the incidence of depression, insomnia and post-traumatic stress disorder in nurses who treated SARS affected patients.

On contrary, a study done by Michelle Honey in the year 2012 has found that although nurses experienced several challenges in the treatment of influenza affected patients, most of them eventually reported positive experience and growth due to collective anti-epidemic efforts.

A qualitative study done by Niuniu Sun (2020) focuses on the psychological experiences of nurses involved in the treatment of COVID-19 patients in China.

Firstly, Nurses from the Department of Infectious diseases undergone a brief training on COVID-19 and those from other

departments undertook a one-week training (Pre-job training, adaptive training by nursing other patients in the infection department, and negative pressure ward training) before treating COVID 19 infected patients. Later, Semi-structured interviews were conducted on 20 nurses and Colaizzi's phenomenological method was used to analyse the subjective psychological experiences of nurses and to determine the shared patterns of experiences and feelings to safeguard the authenticity of the collected data.

The researchers arrived at 4 themes through the analyses of the collected data, namely-

1) A significant amount of negative emotions in the early stage- The experience of physical exhaustion, psychological helplessness and anxiety in the shift from pre-job training to negative pressure ward due to heavy workload, lack of protective measures, lack of knowledge (as it is a novel virus), the unfamiliarity of colleagues and bi-directional family concern.

2) Coping and self care styles- Adaptation to the environment through the use of psychological defence mechanisms and adaptive techniques (meditation, writing dairy etc.), life adjustments such as increased food intake

exercising regularly, mutual colleague support and stronger team cohesion, adjusting cognitive evaluation through gaining more information to tackle the virus.

3) Growth under pressure- Amid challenges, nurses experienced psychological growth as a result of gratitude from colleagues, family members and other social groups, professional responsibility and identifying with the profession and self-reflection on their will to tackle the challenges.

4) Positive emotions occurred simultaneously or progressively with negative emotions- Nurses initially experienced

negative emotions and then eventually positive emotions occurred as a result of effective adaptation, belief in the medical capability of the government, confidence in self-prevention ability as a result of early training, cooperation and gratitude from patients and support from multiple social support groups.

Though nurses experienced negative emotions in the initial stage of treating COVID patients, the experience of positive emotions could be possible through early training and assistance from appropriate support services.

Condensed by
Priyadarshini NS
Department of Psychology

THE INVISIBLE KILLER



The World Health Organization states that approximately 7 million people die every year due to exposure to fine particles present in the polluted air and it contributes to the loss of USD 6.5 billion. A report by the Green peace in July 2020, shows that in Mumbai air pollution from PM 2.5 (particles less than 2.5 microns in diameter) and nitrogen

dioxide is responsible for the loss of around 14,000 lives and ₹15,750 crore in GDP since January 1 (The Hindu,2020). With the COVID-19 on board & the industries being shut down, the air pollution had reduced significantly across many parts of the world which is partly good news but the worrying side of the story is that long term

exposure to impure air may fuel up coronavirus disease in polluted areas (Down to Earth,2020).

People living in the places where there was a high amount of pollution pre COVID-19 were continuously exposed to fine particulate matter in the air like PM 2.5, PM 10, and NO2. Studies have shown that these fine particles will penetrate deep into the body and trigger diseases such as hypertension, heart disease, breathing trouble, and diabetes, all of which increases complications in COVID-19 patients. Additionally these particulate matters will weaken the immune system and lead to inflammation of the lungs

and respiratory tract, adding to the risk of both getting COVID-19 and of having severe symptoms (Gardiner.B,2020). Thus as Francesca Dominici, a Harvard biostatistician referred *“If you’re getting COVID 19, and you have been breathing polluted air, it’s really like putting gasoline on a fire”*.

Long term exposure to these fine particulate matters especially Nitrogen dioxide emitted mostly from petrol and diesel vehicles are extremely harmful because these particles are immunotoxic and it increases the susceptibility to respiratory tract infections such as influenza.

A recently conducted study examined the relationship between long term exposure to NO₂ and Coronavirus fatality.

The data related to the number of fatality cases were collected in the district/administrative level across 66 administrative regions in Italy, Spain, France, and Germany.

The Sentinel-5 precursor space-borne satellite belonging to the European Commission under the “Copernicus” program was used for measuring the NO₂ level in the troposphere.

Due to the thickness of the troposphere, the value which represents the NO₂

concentration was not enough so the vertical airflow was found out and this data was provided by the NOAA/OAR/ ESRL PSD, Boulder, Colorado, USA.

The results of this study showed that five regions located in Northern Italy and central Spain with the highest NO₂ concentrations combined with downwards airflow which blocked an efficient dispersion of air pollution had 3487 (78%) fatality cases of the total 4443 cases.

This indicates that long term exposure to Nitrogen dioxide may be one of the most significant contributors to fatality caused by COVID-19 virus

in these regions and maybe across the world. This clearly shows that clean air is essential both for the human health & economy and as governments & people across the world are looking forward to rebuilding amid COVID 19 they must ensure that

things are build back in a way that is good for the economy and safe for the lungs.

Condensed by
Swetha R Krishnan
Department of Physics

Mathiyoli PM
Department of Psychology



GRIEF AMIDST PANDEMIC

The wake of the COVID-19 pandemic has affected countries all over the world regardless of age. It affects everyone and many people are losing their loved ones every day. With the country's

death toll crossing 24,000 & increasing day-by-day it has become difficult for administrators to manage and renounce the deaths. On the other hand, it has left more than 17,000 families to be bereaved.

“A man was hospitalized after testing positive and died shortly; while his wife, brother & daughter were in quarantine and his son was trying desperately to return home from another state where he is working. As such none of the family members were with him in the last moments of his life. The son who hasn't seen his father for the last six months was completely devastated that he couldn't have a last look at his father and even worse that he couldn't be with his family in this tough time. His family, on the other hand, was to mourn alone with no one by their side, not even their relatives. The older parents of the deceased man were worried about the peaceful liberation of his soul since no proper rituals were carried out. And the relatives made frequent phone calls to comfort them which rather caused more distress to the wife. After quarantine, the family was mourning by praying at home and remembering memories of that man.”(Johari, 2020)

This is just one story that clearly shows the condition of a grieving family during this pandemic. It is visible that the stringent economic, societal, and lifestyle changes have made grieving tough for the families than before.

Surely, the feeling of helplessness coupled with the loneliness of the family members makes it very difficult to even accept the death, let alone coping with the grief. Adding to this is the breakage of the traditional rituals of various religions that have greater significance in the coping process of the family.

Hinduism being a predominant religion in India has faced a major

change in funeral rites and rituals. The rites and rituals usually include receiving the corpse after which it is bathed by the family members, dressed up in simple clothing, adorned with flowers, and then laid out on a white cloth for others to pay their respects before it is cremated or buried.

Cremation is usually done by burning the corpses in funeral pyres in Varanasi or in another place after which the ashes are dissolved in the Ganges, as it is believed that it would relieve one from the cycle of rebirths.

This is an important tradition for all the Hindus and is carried out by them despite any difficulty since it would be a death wish of the deceased in

in most cases. However, now any funeral ritual involving contact with the corpse such as bathing, touching, kissing are strictly prohibited and it is mandatory for people coming in the vicinity of the corpse to adhere to protective measures and hand hygiene (ICRC, 2020). Even if it implies that the family is looking at the deceased for the last time before it is to be cremated, which is the only thing that is allowed in this situation.

With the COVID-19 crisis, the corpses are forbidden to be cremated in Varanasi if it involves taking the corpse there because it increases the risk of transmitting the disease from one place to another through the corpses (Hindustantimes, 2020).

Consequently, this has forced the grieving family to cremate or bury the corpse as per the custom in a place within the vicinity where the person died, neglecting their death wish.

While the funeral rites and rituals of the religion Hinduism have changed now, so are the rites and rituals of other religions such as Islam and Christianity. In Islam, the funeral rites and rituals are a little similar to those followed in Hinduism yet only burial of corpse is allowed in this religion. Unlike the Hindu funeral, before the burial, reciting verses from the Quran in a prayer meet and praying for the deceased forms an integral part of the funeral.

On the other hand, the Christian funerals have services or mass to pray for the dead and give thanks to them. A priest presiding over the funeral gathering does readings from the Bible, the Old or the New Testament after which, he and the family members reminisce about the loved one by talking about them in the gathering (BBC, 2009).

Due to this pandemic the funeral traditions of both these religions have been affected because gatherings of only a limited number of people (say 20) is allowed (India Today, 2020). Services or recitals from the holy books are mostly avoided to cut short on the funeral rituals and hasten them.

Thus the situation has let only the close family preside at the burial with quick prayers devoid of any grandeur which was not the case earlier.

The Dead body management guidelines from WHO states that the deceased of the COVID-19 pandemic can be buried or cremated by the family's respective religious sentiments eliminating any discrepancy in the notion that corpses of people who died of communicable diseases should be cremated. The prime objectives of these guidelines are to ensure that family members render proper and dignified burial or cremation to the deceased. But the panic

due to the pandemic and less propaganda on this subject has led to an uproar amongst people on the burial of COVID affected (The Hindu, 2020; Gaurav. G, 2020). In various parts of the country, protests have been staged to the burial of people who have died of COVID-19 deeming it to endanger the residents of the neighborhood while there is no actual evidence to prove it.

Every culture has its specific funeral rites and rituals. These rituals form the fundamental belief in which each individual's heritage is rooted. Following the rituals as such gives the grieving family a concrete stance for accepting the

person's death which later initiates the attitude to accept the death of the person by the family. Accepting death is crucial, it helps the family to move on and hence forth indulge in active mourning. Thus following the rituals is essential for the mental & spiritual health of the grieving family and also in preserving the quality of life (Felter, C., & Maizeland, L., 2020).

It makes the family feel satisfied in providing an equitable and dignified send off to the deceased through the funeral rites. But these activities can't be carried out as such in the present scenario because the disease has become a community spread.

As a result, the distortion in the funeral rites and rituals has wrecked the grieving family emotionally.

Thus in the COVID-19 pandemic, from the funeral to the burial of the corpses to finally mourning for the loss of a loved one, everything has been subjected to change whether or not the change

has been welcomed. While some changes have only caused indignation to the grieving family and resentment towards the authorities, others have been accepted and rationalized to help the grieving family move on.

Authored by
Mallika M

Department of Nutrition

Sathiyakala A
Department of Psychology

COVID 19: PLIGHT OF ELDERLY



The COVID-19 pandemic caused by SARS Cov-2 has spread throughout the world affecting a large number of people with no age bars. Although the virus affects impartially people of all ages, the elderly were found to be most vulnerable and are at high risk of getting infected.

A research study done by Wu and McGooga (2020)

has found that 20% of deaths were above 60 years of age during the first wave of coronavirus outbreak in china.

An age-wise comparative study done by Liu et al. (2020) has found that COVID-19 patients above 55 years of age have three times the increased risk of mortality. The awareness of the old age people

regarding their increased vulnerability to infection and the information overload about the news on COVID-19 increases fear, anxiety, and somatization, especially for the ones staying alone.

The consequences of being in quarantine include loneliness, anxiety, physical distancing from loved ones, and grief, which may lead to long-term psychological effects in the elderly. In addition to this, the elderly with less knowledge in using technology may experience increased emotional distancing due to a lack of digital contact with families.

A study done by Joel Philip (2020) has found that the lack of outlets for social interaction in the elderly may precipitate or worsen mood and anxiety issues.

A research article done by Debanjan Banerjee (2020) has mentioned the vulnerability of aged for COVID-19 infection and its subsequent mental health interventions.

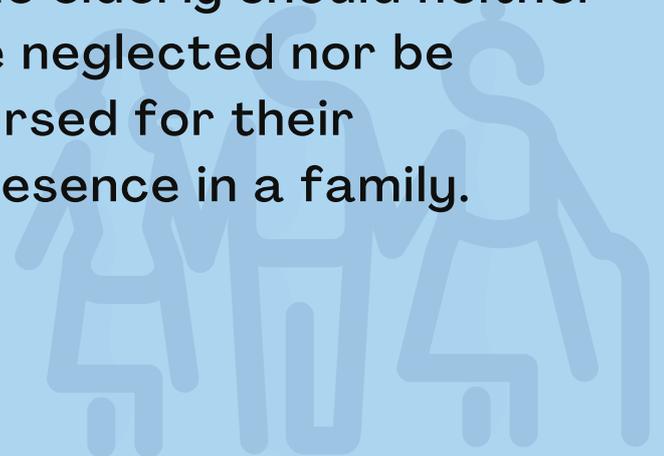
The researcher has stated that the family members and the caregivers should be sensitive to the mental health needs of the elderly, especially during this pandemic. The old aged should be provided

with adequate relevant information regarding the importance of hygiene and the maintenance of it, in order to prevent the infection from the virus. Ensuring social and emotional connectedness, fulfilling the basic needs, and providing safety and security remains vital in maintaining psychological well-being.

Awareness regarding the Telehealth facilities and elder-friendly helplines should be given to the aged which may provide telephonic counseling, helping in reducing fear and anxiety related to the pandemic and ensuring mental health care. In addition to this, appropriate information

should be given regarding the everyday trend of COVID-19, without creating distress or anxiety by providing unnecessary statistics. Along with these, care should be given by the caregivers to the elderly with pre-existing disorders in fulfilling the physical and mental health needs. The senior citizens in the old age homes should be provided with exclusive care ensuring their overall well-being by providing adequate facilities.

The elderly should neither be neglected nor be cursed for their presence in a family.



They would never be considered a burden when the family members empathize with their age and the challenges faced by them. Families should provide sufficient physical and

mental health care to the elderly, for, taking care of them may be difficult, but never is impossible.

'To care for those who once cared for us is one of the highest honors.'

-Tia walker

Condensed by
Priyadarshini NS
Ashla Selvam A
Department of Psychology



KERALA's COVID-19 MODEL

Pandemics are always a huge threat to the human race and COVID 19 is not an exception. As COVID 19 cases are spreading like a forest fire, countries across the world are struggling to find an effective strategy to contain and eradicate this virus.

With no prior experience of facing a pandemic of this complexity and the uncertainty in the time needed for developing a vaccine, there is a need for governments to look up to effective strategies and review their strategies accordingly.

One of the success strategies to look upon comes from the Indian State of Kerala. This State in the south west India, though reported the first COVID 19 case in the country and a vulnerable state, with its 17% of the population working abroad and hundreds of students studying in other countries, stands as a model for flattening the curve.

The initiatives taken by the government are lauded by a lot of people and governments across the world.

On April 20, 2020, *The Washington Post* published an article praising Kerala for its way of handling the health emergency.

BBC India on the discussion panel with Chinese journalist Qian Sun, virologist Dr Shahid Jameel and Subodh Rai, senior director of Crisil Ratings, highlighted the effective management of the Kerala government in its fight against COVID 19.

The story doesn't end there, the former UN Secretary and congress MP Shashi Tharoor, though a political opponent, acknowledged the efforts of the Kerala government.

On May 29, 2020, *The Economics Times* reported that the Indian state, Madhya Pradesh informed

all the district chiefs to follow Kerala's model in tackling the Pandemic.

How Kerala managed to stand out among all the other states with the lowest mortality and the highest recovery rate?

When China raised its concerns about increasing pneumonia cases to the World Health Organisation, Kerala alerted its health workers; and as early as January 24, the state deployed surveillance teams in airports. People from China at the airports are put under special observation. When the first case was reported on January 30, all the contacts were effectively traced and quarantined.

The contact tracing was very rigorous using the Route maps of the people from other countries. The primary contacts were traced and quarantined for 28 days, while WHO prescribed only 14 days of quarantine (Babu.R, 2020). Kerala's decentralised government made the process and implementation in a way which is effective and different from all the other states.

Managing the health crisis requires not just a short term testing and quarantining but a long term investment in the public health sector. The state topped in the NITI Ayog's Annual Health Index in 2019 and it invested 6.5% of its GSDP in the

health sector against the centre's 1.7% (Shukla.A, 2020) thus creating a robust health care system. It has well developed primary care centres supported by the hospitals in the district level. This helped the state government to effectively respond during this health crisis. This is the wake-up call for the other governments to realise the importance of such investments for developing better health care systems.

Planning for various strategies is done in almost all the governments, but when it comes to the implementation there is always a gap. Kerala bridged this gap by its

strengthened grassroots government. Nearly a third of the Kerala government's funds were given to the panchayats as flexible development and maintenance funds.

Planning for effective screening, quarantining, strategic testing and all the other steps taken by the government is effectively implemented by its village panchayats, where the members of the village wards checked the people entering their ward, thus easing the contact tracing and quarantining process.

In addition to this, members of “Kudumbashree”, the state's women self-help group, joined hands with the panchayat members.

When the rest of the country's self-help groups focused on monetary gains, Kerala's Kudumbashree focused on gender empowerment, thus building a strong social capital.

Along with the Kudumbashree members, volunteers who are part of Arogya Sena/ Health army also joined hands. This gave an upper hand for the government because these empowered local groups engaged in community kitchens which delivered 2.5 to 2.8 lakh food packets a day to the migrant labourers, homeless people and they home-delivered food to the quarantined people (“Kerala's community kitchen”, 2020).

Amid this lockdown, the school students who depend on the mid-day meals offered by the government are left unnoticed in most of the states. But Kerala offered free food to these students.

Above all, when all the state governments left its migrant workers in vain, the Kerala government went a way different from the rest of the states in India.

When the government noticed that the migrants were not satisfied with rice served by the Kudumbashree program, they gave them raw materials to cook according to their taste

and they were also given refreshments in their relief camps.

Along with this, the state not only offered mobile phones but recharged it by releasing funds to the service providers. The migrant management committee was formed to look after all of their concerns (Arnimesh.S, 2020).

All these measures helped to avoid the migrant crisis, which all the states in India are facing. Credit should also go to the vibrant civil society in Kerala, reinforced by rights based welfare who never failed to hold the government accountable, irrespective of the ruling party.

Kerala government thus proved the need for empowered local government and local organisation along with vibrant civil society in effectively and rapidly responding to the health crisis and other disasters.

The risk of spreading fake news is more dangerous than the pandemic itself and Kerala leveraged the technology and came up with the mobile application called Gok Direct, which provides essential realtime information regarding the pandemic. This kept the spread of misinformation and its fear in check.

The government also launched the “Break the

Chain” campaign, which is a mass hand washing campaign introduced to initiate behaviour change which helped the government to raise awareness among the people.

The experience of the state in handling previous epidemics and other disasters created the awareness of the mental health consequences of the crisis like this. Thus a psychological support team was formed and it addressed mental health concerns of people in quarantine, frontline workers, families of affected people and the general public (John, C.S et al, 2020).

All these approaches created a positive attitude among the people which also reduced the social stigma associated with the virus.

In short,

1) Effective screening, testing and quarantining which is made possible by long term investment in the health sector which created a robust health care system.

2) Strengthened Grassroot government.

3) Effective community participation through programs like Kudumbashree and Arogya Sena.

4) More humane way of imposing lockdown which

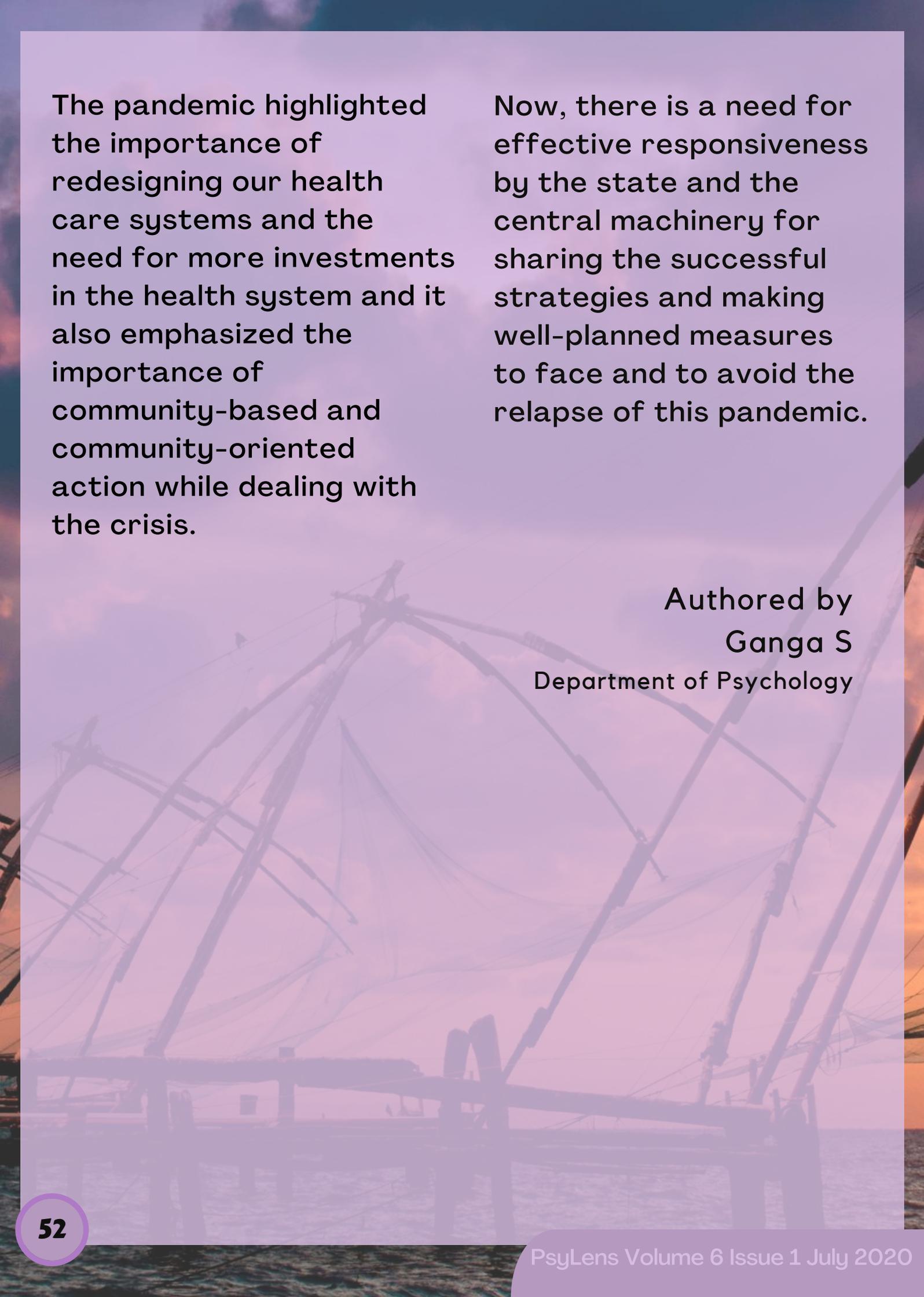
ensured hunger-free lockdown.

5) Vibrant civil society, who holds the government accountable.

6) Strategies implemented to block the spread of fake news.

7) Effective mental health interventions.

With all these measures, Kerala managed to reduce its mortality rate and increase the recovery rate. Although it is too early to celebrate the success of the strategy, the steps taken by the Kerala government proved to be effective in many ways.

The background of the page is a photograph of several fishing boats docked at a pier. The boats are covered with large, white fishing nets that are draped over their masts and rigging. The scene is set against a sky with soft, pinkish-orange clouds, suggesting a sunrise or sunset. The water in the foreground is dark and calm. The overall tone of the image is serene and somewhat somber, fitting the theme of the text.

The pandemic highlighted the importance of redesigning our health care systems and the need for more investments in the health system and it also emphasized the importance of community-based and community-oriented action while dealing with the crisis.

Now, there is a need for effective responsiveness by the state and the central machinery for sharing the successful strategies and making well-planned measures to face and to avoid the relapse of this pandemic.

Authored by
Ganga S
Department of Psychology



LOCKED IN

In March 2020, came an uncalled visitor to the world and the government was left with no choice but to announce a nation-wide lockdown to prevent the spread of the virus. The immediate declaration of lockdown put a halt to businesses and services all around the world making people (working men and women, students, entrepreneurs, etc.) stay at home.

Exceptional to them are the Health care and sanitary workers, Police officers, and Government officials who are going for

work to safeguard the people and society. Amidst these workers live the unnoticed priceless people who are ceaselessly working for the welfare of the family with least expectations and appreciation- The 'Mothers.'

Waking up early in the morning, preparing the food for the entire family, helping kids to get ready to school, sending off the husband to the office and preparing oneself to get to the workplace is a typical daytime scenario for most of the Indian

mothers (housewives). Currently, as the schools and workplaces are being shut temporarily, every family member stays at home having a huge amount of leisure time while the work of mothers have tripled, thus the lockdown turned into an absolute nightmare for them.

Many educational institutions have shifted to online platforms for handling classes due to which parents of small children (especially mothers) have to sit with them throughout the class besides taking care of household chores. This becomes even more challenging for working women because their work timings may clash with their children's online

classes. Moreover, attending online classes remains far more difficult in households without gadgets or lack of internet connection. The coronavirus pandemic also brought additional stress to housewives as they have to clean and sanitize their house frequently to prevent the spread of virus and to protect their family members.

Even though women receive help from their spouse and family members for household chores and child care, they were still found to do more unpaid work than their male counterparts during this pandemic (World Economic Forum,2020).

This lockdown has become even more stressful for single mothers because they have to do multiple tasks like working from home (in some cases, going out for work), taking care of children, performing household chores which may lead to physical as well as psychological burnout and also disturbs the work-life balance.

A pregnant woman with children at home faces a distinct scenario especially if she lives in a nuclear family, where she has to look after herself while doing other work at home.

“Before the lockdown, my work routine was such that I could do household chores and other

errands assigned by my in-laws. However, the lockdown has pushed me to meet the dietary, and hygiene requirements of everyone in the house”, tells a 28 year old pregnant woman from Delhi. (Saha and Chachra, 2020)

The workplace always remains special to working women because they receive personal space and professional identity, which in turn satisfies their dignity and autonomy (Pia Krishnankutty, 2020). But with the lockdown being imposed people have to work from home and many entrepreneurs plus working women (most of them being mothers)

are unable to function properly in their professional life.

For instance, a 56 year old management consultant in Kolkata states that she is struggling to find a work spot at her home to do her job without any disturbance. However, with her children occupying their bedrooms and her husband having his own study space she is left with no choice but to work in a small drawing-room.

In some households, mothers of front line workers are worried about their sons or daughters who are going for work every day. A homemaker from Kolkata states,

“This lockdown has been particularly tough because my daughter is a healthcare worker and she has to go to work every day. I spend all day worrying about her. In addition to these, I have to take care of household works” (Mukherjee, 2020).

Furthermore, the incidence of domestic violence had increased in this pandemic, severely affecting the physical and psychological well-being of housewives. A Palestinian woman expresses her suffering in an interview conducted by United Nations stating,

“Sometimes I feel that this is a nightmare that I will eventually wake up from, but the nightmare is never-ending and I do not know how much longer I can handle this.”

UN Secretary-General also reveals that “This lockdown, besides being a precautionary measure against COVID-19, had dreadfully trapped the women with abusive partners”.

In addition to these, housewives living in joint families and having bedridden in-laws are experiencing difficult times due to increased household responsibilities and decreased personal liberty and time.

“The 2019 Mom’s Happiness Index” shed light on one significant factor which contributes to the mother’s happiness, *“Me time”*.

But during this lockdown, mothers work hard to

cater to the needs of the family members, prioritizing the happiness of family in the first place and allotting (receiving) only a minimal time for herself to relax and unwind.

It is obvious that mothers are ‘Locked-in’ during this pandemic and even after it gets over, she will never withdraw from her responsibilities and will continue to fulfill her multiple roles without any expectations.

Though a mother gives less importance for appreciations, it is the responsibility of the family members to take the utmost care of her physical

and mental well-being as she remains the basic foundation of a family. Expressing gratitude, empathizing with her feelings, and showering immense love are simple ways to make mothers feel happy and content.

Appreciating mothers only during mother's day would never stand valid until love is showcased through the act of respecting and taking care of her.

Authored by
Priyadarshini NS
Mathiyoli PM
Department of Psychology

WHY PEOPLE DON'T COMPLY?



The COVID-19, Coronavirus disease has been dominating the entire world, infecting people, affecting livelihood, and also proving to be fatal. Community mitigation strategies have been implemented by the government to slow down the spread of virus and also to ensure self-care and hygiene among the people and communities since there is an

unavailability of vaccines and/or medical treatments (Anderson RM et al, 2020).

A study done by Alison Bish (2010) has found that greater levels of perceived susceptibility to and perceived severity of the disease and greater belief in the effectiveness of recommended behaviors to protect

against the disease are some of the important predictors of adoption to community mitigation strategies.

A research study done by Holly Seale et al (2020) has focussed on exploring the attitudes and beliefs of Australian adults on COVID 19 pandemic and their willingness and capacity to engage in community mitigation strategies.

An online survey was conducted for 7 days on measuring the perception about COVID 19 pandemic, perceived level of effectiveness in reducing the risk of infection i.e. getting involved in hygiene

related behaviors (e.g. Washing hands) and willingness in complying to self-isolation.

The results of the study showed that the perceived susceptibility of coronavirus was at the 'Intermediate' level amongst the participants, which might be because of optimism bias (people downplaying their own risk of an outcome) or accomplishment of preventive (protective) behaviors against the virus. Higher collective efficacy beliefs were found to reduce risk perceptions about COVID-19 in various countries like the UK, the US, and Spain (Sarah Dryhurst et al, 2020).

A research study done by Wandu Bruine de Bruin (2020) has found that people were hesitant in acting upon risk perceptions in the early stages of COVID-19 pandemic since social distancing was perceived as difficult and costly. Individuals were more likely to adopt protective behaviors when their friends and peers behave responsibly to acting against the virus (Atika Qazi, 2020).

One another research study done by Akihiro Shiina et al (2020) has found that lack of accurate knowledge regarding the danger of COVID-19 reduced the adoption of precautionary behaviors.

Three-quarters of the participants (total participants- 1420) adopted avoidance related strategies and washing (sanitizing) hands was a commonly adopted health-related behavior. The researcher had mentioned that complying with physical distancing measures was difficult for individuals with extended families, in shared accommodation, and working in jobs that could not be shifted to work from home.

Fostering awareness to the public on the adoption of recommended behaviors through media campaigns and encouraging people to share their strategies for complying with

self-isolation might motivate the people in implementing protective measures. Among the participants, older adults in terms of age and females in case of gender were found to be more likely to adopt the precautionary measures against the virus.

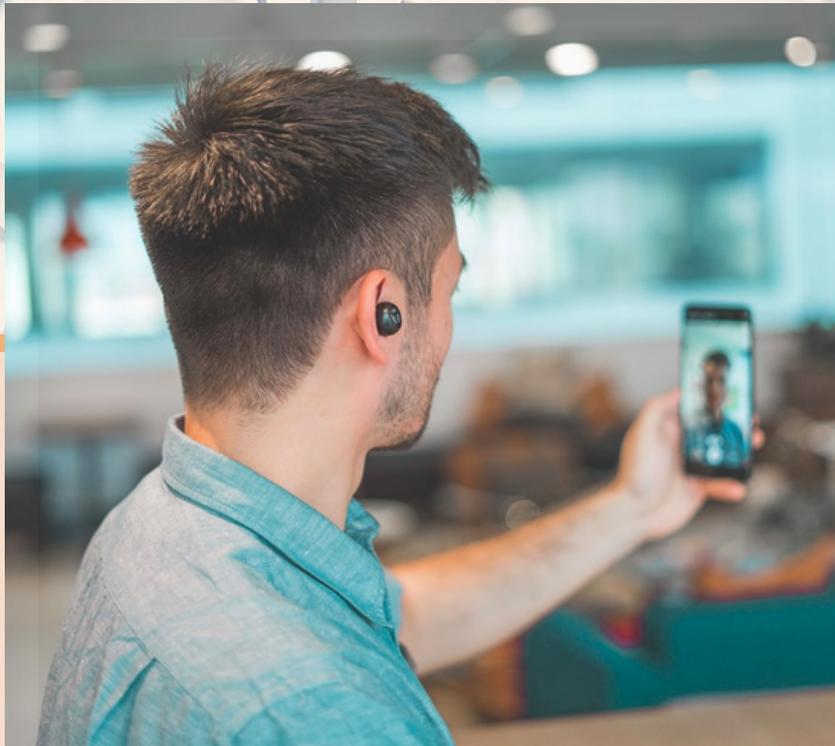
In the view of Brekke's model of moral motivation (2003), the adoption of precautionary measures may be influenced by the social approval from others, since individuals possess a tendency for achieving and maintaining self-image as a socially responsible person.

A study done by Pfattheicher S et al (2020) has suggested that empathy for those most vulnerable to the virus promotes the motivation to adhere to physical distancing.

Understanding the importance of precautionary measures and abiding by it is the foremost responsibility of every citizen in the present scenario to fight against the spread of the virus and collectively contribute to the welfare of the nation.

Condensed by
Priyadarshini NS
Sathiyakala A
Department of Psychology

OUTSIDE-IN & INSIDE-OUT



Since the pandemic has been having a significant impact on our lives for a while now, the social distancing rule is taken seriously across many societies. This has eventually led to people spending much time online with an observed 61% increase in the time devoted to social media platforms to stay in touch with family, friends, and

colleagues. It also seems natural to witness individuals compensating for the unavailability of the usual interpersonal networks by surging in the time spent online.

Social media allows user generated content to be shared with desired others which are subjected to self disclosure. Self-disclosure

is voluntarily revealing information about oneself to others. Generally, before letting out information about self, one weighs the benefits against the costs with regards to the content and how it is going to be expressed.



Traditional researches on self-disclosure have a “self-focus” perspective where an individual anticipated the personal risks and benefits associated, which is why it is called the privacy calculus. However, the pandemic related self disclosures have more to do with “others focus” where the costs and benefits are external.

With this social calculus perspective, the costs could be negative emotional impacts, backlash, negative evaluation, etc. and the benefits being utilitarian values, pleasure-seeking, avoidance of suffering, etc.



The privacy calculus theory is more common in the literature of self disclosure. On one hand, perceived privacy risks and perceived anonymity are personal costs. The convenience of maintaining a relationship, building a relationship, enjoyment, and self presentation are the benefits on the other hand.



The specific privacy calculus theory focuses on the internal characteristics of the individual, i.e., the intrapersonal factors that include motives of pleasure and communicating with friends and concerns about privacy. Having said that main targets and reinforcements of social media users may increase followers, the perception of other users on one's online activity is highly significant. Therefore, here is where the interpersonal factors come into play with an others focus perspective as the social calculus theory.

The self-disclosure style of people, in general, has

witnessed a change, which the author has explained with “outside-in” and “inside-out”.



Content that people used to regularly disclose but now are considered inappropriate and diplomatically unacceptable is referred to as outside-in. These may include sharing information about activities and ideas that violate public health guidelines, like going to a restaurant with friends, being present in a crowded gathering, etc. Such online activity relates to the ‘others focused’ perspective of self-disclosure with an evaluation resulting from heavier costs of the negative effect of others.



“Inside-out” refers to contents that are not shared by people earlier but are now disclosed and socially encouraged. Sharing health information that is private and sensitive for the welfare of society is an example of such disclosures. One might share information about them being diagnosed with COVID-19 for public welfare. Some people disclosed their already existing illnesses that pose a vulnerability to contract the virus, thus motivating other people to take preventive measures and take the pandemic seriously. Such a shift could have occurred because of the fear of being perceived as putting

others in risk or seeking to protect others from the virus. Therefore, the disclosed information might have a utilitarian value supporting the ‘others-focused’ perspective.

Social media data has allowed marketers to serve targeted advertisements based on interests and online sharing behaviors. Studying self statements to people during a widespread disease will help point to show the reliability of this data for marketing purposes. From security and data protection, novel contact tracing apps introduce new concerns, especially

with the government. This raises questions about location data shared with social media and how it may be collected for contact tracing.

Given the increased government and data leaks, it would be interesting to understand how a widespread disease hits the self focus costs mostly privacy concerns

and risks influencing decisions to tell location data and other possibly widespread disease related information online. This shift may have important results for data protection practices and security given that Personal Health Information (PHI) is still heavily controlled information.

Condensed by
Ashika A
Department of Psychology

CONSUMER BEHAVIOUR IN THE NEXT NORMAL



Emerged as an epidemic in China, the novel coronavirus did not take much time to transform into a deadly pandemic. At the same unprecedented speed, the pandemic also transformed the so-called 'normal/norms' in the life of human beings. It is now setting a new normal, reshaping every single thing in the earth,

ironically, the earth per se, which is now rejuvenating. So, the change in human behavior patterns is not an exception here.

When it comes to consumer behavior and beliefs, the change is reflected in the daily grocery buying to the long term investments, as the

pandemic forced people to change a lot of their ingrained habits. People are now prioritizing their shopping list with the most basic needs, embracing online shopping more than ever, and are more conscious while shopping. There are high chances for these changed behavior patterns to continue post pandemic. So, it's high time to consider the changing patterns of consumer behavior and beliefs which are reshaped by the pandemic to make a "new normal", a normal one.

The article by Charm, T et al, describes five action plans by identifying consumers' new habits, beliefs, and peak moments that could be leveraged by

the companies to influence consumer behavior for the long term, which includes,

1) Reinforcing positive new beliefs - The COVID 19 Pandemic changed the behavior of the people by changing their beliefs on a large scale. But how could this change happen/sustain without this trigger(COVID 19)? This is possible by reinforcing positive beliefs about the products and brands. For example, when 14% of US Consumers tried online grocery delivery for the first time during this pandemic, 40% of them reported that they tend to continue online shopping in the future

because it changed their previous views about online shopping as unreliable and inconvenient. These are called 'peak moments' which is a part of the consumer's journey which they remember the most, that include the first time experience with product/service, experience at the end of the journey, or moments of intense consumer reaction. By reinforcing new beliefs in the peak moments, the long-held beliefs can change which in turn will make the consumer repeat the behavior.

2) Shape emerging habits with new beliefs - Another way to influence consumer behavior is

through product innovation. As the consumer concerns about hygiene and health are increasing, this could be leveraged by the companies to provide innovative services and products to the consumers to ease their new normal. This could be evident by the increased sale of the Unilever beverages that contain zinc and vitamin C, such as Lipton Immune Support tea.

3) Sustain new habits using contextual cues - To sustain the new habits formed during the pandemic, there is a need to reinforce those habits using contextual cues. Contextual cues can be a particular task, time of

the day, or object placement. For instance, there is now a widespread habit of placing hand sanitizers in the entrance to remind people to sanitize their hands, this could be reinforced post pandemic by product packaging and marketing that reinforces put it by door behavior.

4) Align messages to the consumer mindset - As the pandemic created communal grief, the companies should ensure that their brand communications are at tune to consumer sentiments. It could be demonstrated in a way that shows their care and concern for people.

For example, hair care brand Olaplex became popular when it started an affiliate program: it donated a portion of the proceeds of its product sales to the local consumer's hairstylists to help them during the salon closures due to pandemic.

5) Analyze consumer beliefs and behavior at a granular level- To strive through the fast changing consumer behavior and habits, analyzing the pattern of the product sales won't be sufficient. By tapping up technology and conducting consumer insights works with mobile diaries, social media 'listening',

artificial intelligence driven message boards will help the companies track the changing consumer behavior and refine their products and services accordingly.

Thus, to face the changes that outlast this pandemic, understanding

the consumer behavior, beliefs, habits, and peak moments and redesign the products and services accordingly will help the companies thrive in the next normal.

Condensed by
Ganga S
Department of Psychology

REFERENCE

Fake News & Covid 19

Laato, S., Islam, A. K. M. N., Islam, M. N., & Whelan, E. (2020). What drives unverified information sharing and cyberchondria during the COVID-19 pandemic?. *European Journal of Information Systems*, 2(3), 1–18. <https://doi.org/10.1080/0960085x.2020.1770632>

Hopeful Tourism Post Covid-19

Crossley, E. (2020). Ecological grief generates desire for environmental healing in tourism after COVID-19. *Tourism Geographies*, 22(2), 1–10. DOI: 10.1080/14616688.2020.17591

Healing with Yoga & Ayurveda

Tillu, G., Chaturvedi, S., Chopra, A., & Patwardhan, B. (2020). Public health approach of Ayurveda and Yoga for COVID-19 prophylaxis. *The Journal of Alternative and Complementary Medicine*, 26(5), 360–364. <https://doi.org/10.1089/acm.2020.0129>

Synergizing 2 C's Responses

Markard, J., & Rosenbloom, D. (2020). A tale of two crises: COVID-19 and climate. *Sustainability: Science, Practice and Policy*, 16(1), 53–60. <https://doi.org/10.1080/15487733.2020.1765679>

REFERENCE

**Nurses-The
selfless eager
beavers**

Sun, N., Shi, S., Jiao, D., Song, R., Ma, L., Wang, H., & Wang, H. (2020). A qualitative study on the psychological experience of caregivers of COVID-19 patients. *American Journal of Infection Control*, 48(6), 592–598.
DOI: 10.1016/j.ajic.2020.03.018

**The Invisible
Killer**

Ogen, Y. (2020). Assessing nitrogen dioxide (NO₂) levels as a contributing factor to coronavirus (COVID-19) fatality. *Journal of science of the total environment*, 726, 138605. <https://doi.org/10.1016/j.scitotenv.2020.138605>

**COVID 19:
Plight of
Elderly**

Banerjee, D. (2020). Age and ageism in COVID-19 : Elderly mental health care vulnerabilities and needs. *Asian Journal of Psychiatry*, 51, 102154.
DOI:10.1016/j.ajp.2020.102154

**Why people
don't
comply?**

Seale, H., Heywood, A. E., Leask, J., Steel, M., Thomas, S., Durrheim, D. N., ... & Kaur, R. (2020). COVID-19 is rapidly changing :Examining public perceptions and behaviors in response to this evolving pandemic. *PLOS ONE* 15(6): e0235112. <https://doi.org/10.1371/journal.pone.0235112>

REFERENCE

Outside-In and Inside-Out

Nabity, T. G., Cheung, C. M. K., & Thatcher, J. B. (2020). Inside out and outside in: How the COVID-19 pandemic affects self-disclosure on social media. *International Journal of Information Management*, 53, 102188. <https://doi.org/10.1016/j.ijinfomgt.2020.102188>

Consumer Behaviour in the next normal

Charm, T., Dhar, R., Haas, S., Liu, J., Novemsky, N., & Teichner, W. (2020). Understanding and shaping consumer behaviour in the next normal. *McKinsey & Company*. Retrieved from <https://www.mckinsey.com/business-functions/marketing-and-sales/our-insights/understanding-and-shaping-consumer-behavior-in-the-next-normal>



Psylehs
Let's scan through...

e-Magazine of Psychology Association, PSG CAS

PATRON

Dr D Brindha
Principal
PSG College of Arts & Science

EDITOR IN CHIEF

Dr T Jothimani
Head - Department of Psychology
PSG College of Arts & Science

EXECUTIVE EDITOR

Mr. KP Naachimuthu
Assistant Professor - Department of Psychology
PSG College of Arts & Science

EDITORIAL MANAGER

Ms. PM Mathiyoli

EDITORIAL TEAM

Ms.Priyadarshini NS, Ms.Ganga S ,
Ms. Ashika A , Ms. Sathiyakala A,
Ms. Bragathi A, Ms. Ashla Selvam A.

PUBLISHED BY

Psychology Association
Department of Psychology (Aided)
PSG College of Arts & Science
Civil Aerodrome Post,Coimbatore 641014
Tamil Nadu, INDIA
e mail ID: psylehsmagazine@gmail.com



Department of Psychology
PSG College of Arts & Science

Being the Subject of Learning than just learning a subject