



## **IMPLICATION OF PFA IN THE CONTEXT OF GLOBAL PANDEMIC WITH EMPHASIS ON SPORTS**

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### **Abstract:**

As the coronavirus pandemic rapidly sweeps across the world, it includes the degree of fear, worry, and concern in the population at large and among certain groups in particular, such as private sector service holders, front line health workers, students, sportsperson and people with underlying health conditions. As the educational institutions are almost closed, there is only one way left to continue the process of education depending upon the e-resources through the use of social media. Physical education is not exceptional in this regard. In this uncertain period, the mental health issues raise to a greater extent, where psychological first aid plays a significant role to minimize the issues. The Present article deals with the role of psychological first aid during the pandemic scenario and sports-related issues.

**Key Words:** Psychological First aid, Pandemic and Sports

### **Introduction:**

A pneumonia outbreak associated with a novel corona virus, termed severe acute respiratory corona virus 2 syndrome (SARS-CoV-2), was first documented in Wuhan, China, in December 2019 (1). Since then, the infection has spread across China and then to the other part of the world (2-4). At the beginning of June 2020, more than 7.676.209 confirmed new cases were reported, with more than 426.158 deaths attributed to the corona virus infection (5). This novel virus was declared a public health emergency of international concern by the World Health Organization (WHO) on January 30, 2020 (6). The disease caused by the novel corona virus was identified by WHO on February 12, 2020 as Corona virus Disease 2019 (COVID-19) (7) and until and until November 23rd, 2020 the total number of Confirmed cases were 58 229 138 and confirm deaths were 1 382 106 across 220 countries (8). At the start of April, India had been reporting less than one lakh cases a day. This rose to more than 4 lakhs cases a day, with the daily count rising on every single day (9). In the context of Global scenario as on 2.5.2021 the total number Corona virus Cases: 152,912,943 where total death cases were 3,208,618 and total recovered 130,207,028 (10-11).

The COVID-19 pandemic has spread worldwide reporting more than 16 million people infected in over 200 countries at the date of the present work (12), with considerable public health and socio-economic impacts that are also seriously affecting health and safety of workers, as well as their employment stability.

As we enter a second wave of COVID-19, even less of us are working at the office or our normal workplace. But there are some holding the fort down, working alone or with considerably fewer coworkers around. The new normal of these more-structured workspaces is they that are considerably more mindful of potential physical and viral contamination. For the foreseeable future, there are new routines and procedures that we will need to enforce and become accustomed to, seemingly normal ways of doing things that need to be shifted in order to protect team members from potential infection of the notorious virus (11).

Educational undertakings are social which take shape in terms of individual- social interplays. Rieley (13) considers the social situation in schools to be scaring to educational institutions for the fact that, most educational organizations are now scrambling to identify the options they have in front of them to deal with two major challenges pertaining with detaining or stopping social contacts and keeping learning going. Under the pressure of corona, COVID-19, society members may hesitate to send their children to school for fear that, they may contract the infection through as a result of contacts in classrooms or out-of-school. From the very outset, the spread of the pandemic has been noticed to be based on contact-effects (14).

As the educational institutions are almost closed, there is only one way left to continue the process of education depending upon the e-resources through the use of social media. Physical education is not exceptional in this regards. The physical literacy which is highly related with immunity and wellbeing and the only weapon to fight against the deadly corona virus as well as to promote the physical education through Medias are highly stressed. In this scenario depending upon the various social medias the concept of physical literacy is spreading tremendously. The play grounds, parks and gymnasiums are closed to in order to maintain the safety. Physical distancing not permitted to athletes to works within groups. The major sporting events are postponed due to the new normal scenario. Even the covid pandemic has caused the most significant disruption (15) to the worldwide sporting calendar since World War II. Across the world and to varying degrees, sports events have been cancelled or postponed.(16-18)The 2020 Summer Olympics in Tokyo were rescheduled to 2021. Spectators have no games to watch and players no games to play (19). Only a few countries and territories, such as Hong Kong (15), Turkmenistan (20) , Belarus, and Nicaragua, have continued professional sporting matches as

planned (21) The 2020 Summer Olympics and Paralympics were scheduled to take place in Tokyo starting 24 July. Although the Japanese government had taken extra precautions to help minimize the outbreak's impact in the country,(22-23) qualifying events were being canceled or postponed almost daily. The organizing committee published various planned safety protocols for athletes, spectators, and members of the press (24-25) It will be recommended that athletes be vaccinated, but they will not be required to do so (26).

Although the suspensions in sport scheduling have now been resolved, we haven't returned to how sport was played and watched pre-Covid. Months after games have returned to the stadiums and our screens, we are still seeing the impact of the pandemic restrictions with discussions of how this will permanently change the rules, regulations and viewing experience of sport.

To bring sport back from the temporary pauses taken at the peak of the virus outbreak, sport governing bodies needed to put in place logistical protocols to comply with social distancing measures. Across sport, we have seen changes in how to conduct training sessions, how to enter and use the changing rooms, how to interact with the opposing player or team, and how to celebrate points scored. But beyond these social distancing measures, some sports have taken this as an opportunity to alter long-standing rules of the game (27).

Outcomes of the COVID-19 pandemic on mental health could differ between population groups. In particular, the emotional responses brought on by the pandemic and its management might be more substantial among vulnerable groups, such as people with pre-existing psychiatric conditions (28-29). Financial instability and small social networks are common among people with mental illness; as a result of economic recession and restricted social connectivity, the COVID-19 pandemic could present an unprecedented stressor to these individuals (30). Measures such as nationwide travel restrictions and quarantine, and changes in the way health-care services are provided, could interrupt access to and provision of psychiatric care (31-32). As a result, the risk of relapses or worsening of existing mental health conditions could rise during the COVID-19 pandemic. There is an urgent need to empirically understand to what extent the COVID-19 pandemic and related societal changes have so far affected the mental health of people with pre-existing mental health disorders. Evidence relating to the mental health impact of the COVID-19 pandemic among people with mental health disorders has been restricted to cross-sectional studies. In a small-scale Chinese study that used convenience sampling to recruit participants, more symptoms of depression and anxiety, stress, and insomnia were reported among people with psychiatric disorders than among individuals without a mental health disorder. In an Australian non-probability sample (33) psychological distress was higher among people with self-reported mood disorders than among those without. However, symptoms before the COVID-19 pandemic were not measured in these studies, leaving it unclear whether the pandemic truly led to changes in symptom levels within populations with psychiatric disorders.

As the coronavirus pandemic rapidly sweeps across the world, it includes degree of fear, worry and concern in the population at large and among certain groups in particular, such as private sector service holders, front line health workers, students, sports person and people with underlying health conditions.

In public mental health terms, the main psychological impact to date is elevated rates of stress or anxiety. But as new measures and impacts are introduced – especially quarantine and its effects on many people's usual activities, routines or livelihoods – levels of loneliness, anxiety, depression, alcohol and drug abuse, and self-harm or suicidal behaviours are also expected to rise (33).

The present article deals with the implication of psychological first aid to minimize the negative psychological issues on general people as well as sports person in the context of global pandemic scenario due to SARS CO2. The long term impact of COVID- 19, given that certain pre-existing vulnerabilities, high risk factors and stressors could be multiple, ongoing or recurrent and also the manner through which they work may vary. Consequently, there is a pressing need for carrying out longitudinal and developmental studies to be able to apprehend multiple layers of dynamic determinants playing role during this time of global crisis (34). The literature suggests the need for evidence based elaborative strategies and plan of action to cater to the mental health needs of children and adolescents during the period of pandemic (35).

The number and chronicity of disorders showed a positive graded dose-response relation, with greater perceived impact on mental health, fear, and poorer coping. Although people with depressive, anxiety, or obsessive compulsive disorders scored higher on all four symptom scales than did individuals without these mental health disorders, both before and during the COVID-19 pandemic, they did not report a greater increase in symptoms during the pandemic. In fact, people without depressive, anxiety, or obsessive-compulsive disorders showed a greater increase in symptoms during the COVID-19 pandemic, whereas individuals with the greatest burden on their mental health tended to show a slight symptom decrease (36).

Sport and fitness psychology is an approach that focuses on the intersection between sport science, medicine, and psychology. This therapeutic model expands on research, theory, and practices to improve performance in professional and amateur athletic settings. Sport psychology researchers work to understand how psychological factors can impact motor performance and how participation in physical activity affects human psychological development. Sports psychologists are also interested in

understanding how social and psychological interventions affect the well-being of athletes, teams, coaches, parents, spectators, trainers, exercisers, and participants who are engaged in physical activities (37).

#### **Psychological First Aid:**

According to Sphere (38) and IASC (39), psychological first aid (PFA) describes a humane, supportive response to a fellow human being who is suffering and who may need support. PFA involves the following themes:

- providing practical care and support, which does not intrude;
- assessing needs and concerns;
- helping people to address basic needs (for example, food and water, information);
- listening to people, but not pressuring them to talk;
- comforting people and helping them to feel calm;
- helping people connect to information, services and social supports;
- protecting people from further harm.

Psychological First Aid is an evidence-informed (40) modular approach to help children, adolescents, adults, and families in the immediate aftermath of disaster and terrorism. Psychological First Aid is designed to reduce the initial distress caused by traumatic events and to foster short- and long-term adaptive functioning and coping. Principles and techniques of Psychological First Aid meet four basic standards. They are:

- consistent with research evidence on risk and resilience following trauma;
- applicable and practical in field settings;
- appropriate for developmental levels across the lifespan; and
- culturally informed and delivered in a flexible manner.

#### **Basic Objectives of Psychological First Aid:**

- Establish a human connection in a non-intrusive, compassionate manner.
- Enhance immediate and ongoing safety, and provide physical and emotional comfort.
- Calm and orient emotionally-overwhelmed or distraught survivors.
- Help survivors to tell you specifically what their immediate needs and concerns are, and gather additional information as appropriate.
- Offer practical assistance and information to help survivors address their immediate needs and concerns.
- Connect survivors as soon as possible to social support networks, including family members, friends, neighbors, and community helping resources.
- Support adaptive coping, acknowledge coping efforts and strengths, and empower survivors; encourage adults, children, and families to take an active role in their recovery.
- Provide information that may help survivors cope effectively with the psychological impact of disasters.
- Be clear about your availability, and (when appropriate) linking the survivor to another member of a disaster response team or to local recovery systems, mental health services, public-sector services, and organizations.

#### **Working Guidelines**

- **Contact and Engagement:** To respond to contacts initiated by survivors, or initiate contacts in a non-intrusive, compassionate, and helpful manner.
- **Safety and Comfort:** To enhance immediate and ongoing safety, and provide physical and emotional comfort.
- **Stabilization** (if needed): To calm and orient emotionally overwhelmed or disoriented survivors.
- **Information Gathering:** Current Needs and Concerns, To identify immediate needs and concerns, gather additional information, and tailor Psychological First Aid interventions.
- **Practical Assistance:** To offer practical help to survivors in addressing immediate needs and concerns.
- **Connection with Social Supports:** To help establish brief or ongoing contacts with primary support persons or other sources of support, including family members, friends, and community helping resources.
- **Information on Coping:** To provide information about stress reactions and coping to reduce distress and promote adaptive functioning.
- **Linkage with Collaborative Services:** To link survivors with available services needed at the time or in the future.

These core actions of Psychological First Aid constitute the basic objectives of providing early assistance within days or weeks following an event. Providers should be flexible, and base the amount of time they spend on each core action on the survivors' specific needs and concerns (40).

#### **Covid-19 and Mental Health:**

- We do not yet know exactly what the impacts will be.

- There are many factors to consider including lockdown and ongoing restrictions such as social distancing.
- Fear of contracting the virus or feel anxious about family and friends or fear of losing their job.
- Many will have suffered bereavements.
- There are long term effects on mental health. Early research into health impacts include:
  - Fatigue
  - Musculoskeletal conditions
  - Poor work life balance
  - Reduced exercise
  - Increased substance misuse
- Employees have been reporting:
  - Reduced motivation and
  - Loss of purpose
  - Anxiety and isolation

Evidence from previous quarantine situations suggests

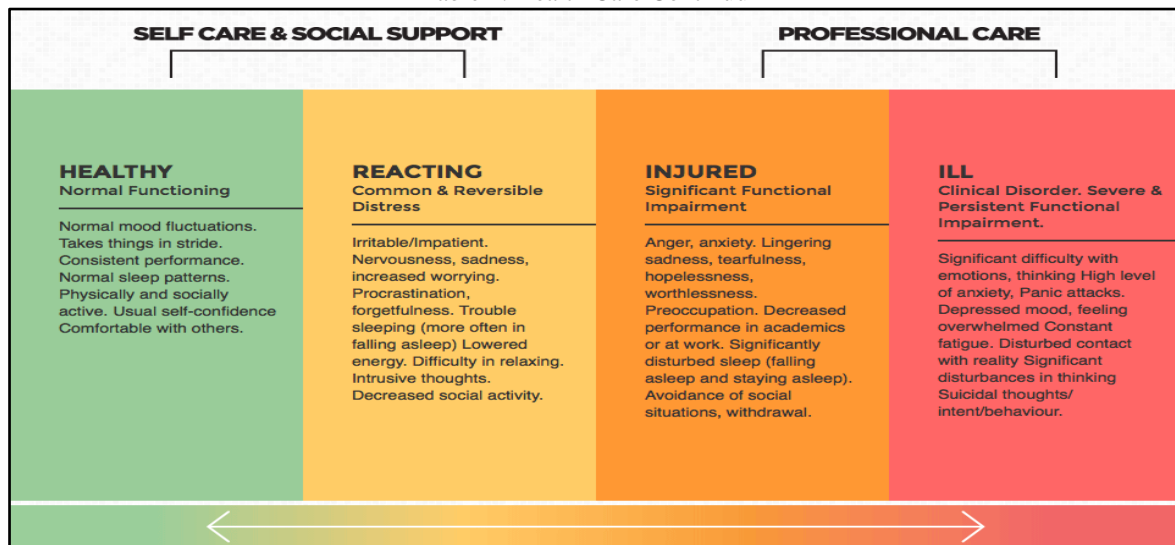
- A recent survey showed that mental health challenges show themselves in several ways.
- More than half say they are more emotionally exhausted, feel increased sadness or are more irritable.
- Employees report these symptoms have increased since COVID-19 outbreak began.
- A survey conducted in April 2020 of occupational health practitioners listed several concerns of employers/customers.

The leading concerns related to:

- 39% - When employees could return to work
- 34% - Exposure of workforce to COVID-19 infection
- 32% - Implementing/maintaining social distancing
- 18% - Mental health/stress/burnout of frontline staff
- 15% - Staff coping with family issues/bereavement
- 8% - Risk of acute stress reaction among frontline staff (41).

This condition is similar to the failure in sports performance also in competitive scenario.

Table 1: Health Care Continuum



Mentally have a classification system (triage) as this is probably not done in a systematic, organized way. Those who need more assistance are:

- Disoriented
- *Confused*
- Frantic or agitated
- *Panicky*
- Extremely withdrawn, apathetic or “shut down”
- *Extremely irritable or angry*
- Exceedingly worried

**Fosters Well-Being and Recovery:**

- Many Forms
- Emotional support

- Social connection
- Feeling needed
- Reassurance of self-worth
- Reliable support
- Advice and information
- Physical assistance
- Material assistance
  - Review basic information about stress reactions
  - Review common psychological reactions to traumatic experiences and losses
- Intrusive reactions
- Avoidance and withdrawal reactions
- Physical arousal reactions
  - Teach simple relaxation techniques
  - *Help families cope*
  - Assist with developmental issues
  - Children need different approaches
  - Assist in anger management
  - Address highly negative emotions (guilt and shame)
  - Help with sleep problems
  - Address alcohol and substance use
  - Collaborative Service
- Give names and contact info on local public health and public mental health service providers in the community
- Introduce the survivor to other service providers so s/he knows other helpers by name
- If you are leaving, let the survivor know and if possible endorse personally to the next provider and provide an introduction (42).

#### **Conclusions:**

Due to covid 19 pandemic scenario the mental health issue raises in a tremendous way throughout world and sports persons are also not exceptional in this regards. In contrary we also observed that failure in any performance may lead to psychological disturbance. It is the duty of teachers, coaches and health workers to provide all sorts of support in order to minimize the problems.

- PFA can be provided by professionals and non- professionals alike
- Everyone should have access to PFA following a crisis event, as part of the spectrum of mental health and psychosocial support
- PFA is widely used for disaster preparedness and response by governments, UN and NGOs

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