

# Effect of the COVID-19 Pandemic Related Mental Health on State Anxiety in Thailand

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## Article History

Received: 22 January 2022

Revised: 19 March 2022

Published: 19 March 2022

## Abstract

The objective of this academic article is to study the anxiety caused by the COVID-19 pandemic situation which affects the mental health of people in Thailand. Since the pandemic has spread all over the world, including Thailand, has taken place over a long period of time and it is unlikely to end, the discovery of new knowledge both in terms of infection spreading and mutation still exists. As the recent mutation called Omicron has been found to spread faster than other strains, it results in the concern to the general public. According to the results of study collecting psychological information, it was found that the factors that drives high anxiety are overestimating threat, inflated sense of responsibility, and intolerance of uncertainty. Solving these factors will help reducing the anxiety about COVID-19. There should be continuously further studies of this disease. There should be an agency that provides accurate information quickly in a timely manner to help relieving the anxiety that arises. This allows the public to live a new normal life amidst the continuance to face this disease without risking mental health problems caused by anxiety from such situations.

**Keywords:** COVID-19, Pandemic, Mental Health, State Anxiety

## The COVID-19 Pandemic

From the spread of COVID-19, the situation is heightened by the presence of mutation in the COVID-19 strain called Omicron, which is accumulated multiple mutations and can spread even more rapidly. Bloomberg News Agency reported that Sikhulile Moyo, the first scientist to discover Omicron, who is a director of the Botswana Harvard HIV Reference Laboratory and researcher at the Harvard TH Chan School of Public Health found that the speed at which Omicron accumulates abnormal mutation patterns is concerning and can evade parts of the immune system causing the risk of recurrent infection. Thus, it is not a common mutation. What confirms this hypothesis is that the daily cases of COVID-19 in South Africa have almost quadrupled. Due to the nationwide spread of Omicron (Post Today, 2021b), Forbes reports that cases of the Omicron variant have been detected worldwide. In the United States, this variant has been detected in 17 states: California which was the first State to discover the cases, Colorado, Connecticut, Hawaii, Louisiana, Maryland, Massachusetts, Minnesota, Missouri, Nebraska, New Jersey, New York, Pennsylvania, Utah, Washington, Wisconsin and Georgia (Bangkokbiznews, 2021). U.S. health officials indicated that Omicron-infected do not have severe symptoms, but more studies and data on this variant are needed to be able to draw a conclusion. As of December 6, 2020, all travelers entering the United States must be tested negative for COVID-19 one day prior to travel (it was three days previously). The U.S. government said that the number of Americans vaccinated the first dose of vaccine rose to the highest level in the past six months after Omicron cases were reported in several States. This indicates a growing concern over the pandemic. Despite the World Health Organization's (WHO) warning, the AFP news agency (AFP News, 2021) has not been

**Citation Information:** Urairak, B. (2022). Effect of the COVID-19 Pandemic Related Mental Health on State Anxiety in Thailand. *Asian Administration and Management Review*, 5(1), 1-6. <https://doi.org/10.14456/aamr.2022.1>.

reported any death of the patient in any countries. Therefore, we should not be too anxious until come up with full preventive measures without any academic grounds. However, the world's leading medical academicians stated that Omicron infections are more contagious than the Delta strain. This will cause the high number of people infected with the new COVID variant around the world as well. Studies have shown that the COVID-19 pandemic affects consumer behavior in demand differently according to different levels of anxiety-minded people. It indicates the consumer's behavior changes with the level of anxiety (Wang et al., 2021). The Bank of Thailand (Post Today, 2021a) reports a survey on the impact of the COVID-19 virus on Thai private sector (BSI COVID) and the Retailer Sentiment Index (RSI) in November 2021 showed that the Retailer Sentiment is still lower. Purchasing power is lower than expected from anxiety and fear that COVID will spread severely in many areas. It is believed that without stimulus measures, confidence will reduce further. Thailand's Omicron response indicates that the spread in Thailand is inevitable. Until December 6, 2021, Department of Medical Sciences (2021) announced in a press release that the Ministry of Health is conducting weekly investigations for mutations. Most recently, from November 27-December 3, 2021, the overall picture in Thailand is 99.87% Delta, while very few Betas are in limited areas of the southern border. When the country is open to international travelers and there is a COVID-19 Omicron variant pandemic in many countries, the Department of Medical Sciences has developed a faster Omicron screening technique by using the characteristics of each strain. If HV69-70 deletion is found, it is assumed to be Alpha, K417N deletion is assumed to be Beta, and if L452R deletion is found, it is Delta. As Omicron has multiple mutations, if HV69-70 and K417N deletion are found, it is assumed to be Omicron. From the test on the samples sent from Test and Go in Thailand, it concluded on December 6, 2021 that an American traveling from Spain and was detected 2 deletions was likely to be Omicron. When using the samples with the whole genome sequencing, the first Omicron variant in Thailand was found. From such detection, the Omicron strain has spread rapidly and has already in Thailand. This is coupled with the government's policies to open the country causing more people's anxiety and resulted in confusion in their practices. They are uncertain over government policies and fear of infection. The concerns about the disease that is new to the study. All these concerns contribute to people's mental health problems. The study to understand the factors that cause anxiety can help addressing issues so that people can stay mentally healthy to cope with the pandemic effectively.

## **Theoretical Approaches to Understanding anxiety with the COVID-19**

State Anxiety refers to the anxiety in response to a particular situation viewed as a threat or danger. The state anxiety varies in severity and with the length of time the situation occurs (American Psychological Association, 2020). A study has shown that negative psychological outcomes are common among people during the COVID-19 outbreak. Therefore, there should be mental health care for the population in the community (Li, 2020). Anxiety is more pronounced in people with preexisting mental disorders especially associated with high levels of anxiety such as panic disorder, obsessive-compulsive disorder, health anxiety disorder and generalized anxiety disorder. These respond to the threat of being infected by a virus or to the threat of infecting others. Psychological theoretical approaches can help shedding the light on the factors that cause such anxiety (Clark & Beck, 2010). Situation is important in determining the level of state anxiety. The nature of anxiety and stressful situations must be consistent to induce increasing anxiety (Endler & Kocovski, 2001). COVID-19 results in many types of stress such as media exposure, exposure to death/loss, movement restrictions, economic hardships. All these possibly stimulate people with pre-existing anxiety disorders to have increased anxiety. These symptoms can be understood within the framework of various psychological theories concerning the fears summate (Rachman & Lopatka, 1986) or

anxiety associated with COVID-19. This considered an expression of the general processes underlying the preexisting anxiety disorders (Dalgleish et al., 2020), which is a theoretical framework formed by collecting elements of fear, has been implemented 30 years ago. The analysis of cognitive factors has increased our understanding that people with high levels of anxiety tend to develop widespread fears when under stress. The fear of contracting COVID-19 can cause anxiety disorders especially in those with asymptomatic anxiety levels before the beginning of the pandemic, or those who have overestimate the threats to stimulus factors involved. The study of the COVID-19 pandemic in China had a huge impact on the mental health status of the general population. Increased proactive coping strategies and social support were significantly associated with reduced psychological distress (Yu et al., 2020). COVID-19 is a stimulus that can result in a growing pre-existing fears or symptoms summate of anxiety. People with anxiety disorders face a variety of daily stimuli, but not all stimuli can trigger anxiety. Theories have confirmed that COVID-19 is stimulus in these cases along with the nature of the stimuli such as overestimating threat, inflated sense of responsibility and intolerance of uncertainty. Other stimuli do not contribute to inducing anxiety in this case (Shafran et al., 2021).

## **Overestimation of Threat**

An overestimation of the threat is a sign of anxiety-related disorders. For example, the threat of panic disorder is a heart attack, blackout or death (Clark, 1986). Realistic risk assessments can be enhanced through a variety of techniques such as providing clear and accurate information about the potential for harm, the severity of the harm and any factors that may mitigate the harm. Jumping to the conclusion and not identifying intermediate steps and associated probabilities are common practices when overestimating threats (Whittal & McLean, 1999). The probabilities that come with an event will depend on the feelings and consequences from the final terrifying event such as being infected with COVID-19 and rushing to the conclusion that this will result in hospitalization, using the respirator and died alone without family. Logical probabilities involve identifying each step needs to occur and the associated probabilities of each step. It should be immediately perceived before concluding to the final step. Important information about COVID-19 can be hard to find in contrast to the massive amount of both accurate and inaccurate information available in the media. Excessive exposure to media can lead to overestimation of threat. Even some of an early-stage information and advice provided by WHO can be confusing. Using information from different reliable sources including the Centers for Disease Control will encourage risk estimates. However, the lack of relevant information about risks, the importance of following public health guidelines and what doctors worry about the pandemic might be experiencing. This can make the threat assessment situation difficult. The more biased thought control is, the more overestimating threat will be such as concerns about financial impact, impact on children's education from school closure and health implication of COVID-19 infection. The preoccupation with COVID-19 is a normal reaction to an unusual situation. This is normal for psychiatric disorders. This bias creates fear, thinking that there must be a danger from the experience of anxiety with the reason, "If I'm worried, something dangerous must happen." During the pandemic, much of the anxiety was caused by the daily news reports, drastic changes in daily life. The risk of infection thus highlights the need to always stay home to alleviate danger and anxiety. Even though vaccines are widely available and can relieve symptoms after infection, many remain skeptical about the safety of vaccination (Marzo et al., 2022). Therefore, it is imperative to develop a more accurate information about useful beliefs and the safety of vaccination (Urairak, 2021).

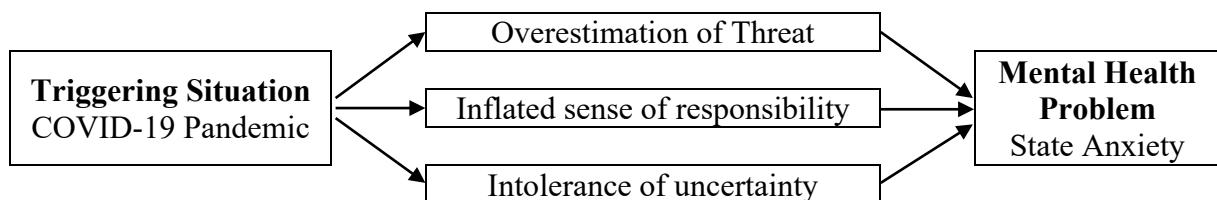
## Inflated Sense of Responsibility

People with perceptual problems with the idea of irresponsibility will seek reassurance, especially from those closest to the individual (Leonhart & Radomsky, 2019; Neal & Radomsky, 2015; Parrish & Radomsky, 2010; Parrish & Radomsky, 2011). For example, asking repeatedly if you think this thing needs cleaning, is that person getting too close to me? Should I wash my hands again? Confidence may be passed on by transferring responsibility from the anxious person to the provider of assurance, even if it is only temporary. Experimental studies on accountability and reassurance in the context of contamination risk and cleaning can build confidence in people with high anxiety (Leonhart & Radomsky, 2019). The way others respond to the inquiry for information to reassure people with a role in providing information that supports ideas tends to be more helpful than refusing to provide information to people with anxiety (Neal & Radomsky, 2015).

In conclusion, people with high anxiety think that COVID-19 is a highly contagious disease, and try to control by social distancing, staying away from danger and behaving responsibly by keeping a safe distance from others and being responsible by staying home: leaving house only for the necessary reasons and wearing mask. It is not only for good health, but also a responsible way to avoid spreading the virus to others. Those with inflated sense of responsibility tend to be highly anxious. This may result in wearing masks more often, wash hands too often, be more careful when interacting with others and providing care for the packaging and other items that may let contaminate items entering home. Those with inflated responsibilities have a strong belief that they may fail in protecting their loved ones. Failure to follow proper guidelines such as washing hands, cleaning items that enter the house and maintaining proper social distance are construed as unacceptable irresponsibility.

## Intolerance of Uncertainty Distress

COVID-19 has many uncertainties such as uncertainty about the nature of the disease, outbreak, clinical implications, pathological conditions of the disease, uncertainty about lockdown, period of financial impact and challenges in seeking knowledge about this disease-causing high anxiety (Rettie & Daniels, 2021). It creates distress about uncertainty and is associated with anxiety. A model is created and collect actual threat, threat awareness, true uncertainty, perceived uncertainty and non-accepted uncertainty. Understanding the differences between these structures will help determining whether treatment focuses on tolerance of uncertainty, overestimating threat, or reducing anxiety (Freeston et al., 2020).



**Figure 1** Diagram representing the COVID-19 Pandemic Related Mental Health on State Anxiety

## Conclusion and Recommendation

The ongoing trend of the COVID-19 pandemic and the mutations of the virus called Omicron will follow by an increased incidence of situational anxiety-related disorders. Due to the rapid change in COVID-19, it is difficult to predict including the presence of mutations that experts still need to study on how to deal with the variant that is still very new. Even now, Omicron outbreaks are found to be more rapid than other variants and are expected to replace the original variant in the future. It causes mild symptoms which still need to be closely

monitored and studied. Psychological treatment for state anxiety can be accomplished by providing a single and reliable government agency acting as a body that eliminates factors that may cause many types of anxiety such as overestimation of threat, inflated sense of responsibility and intolerance of uncertainty distress by providing clear, up-to-date, accurate and enough information to make decisions on how to continue living with COVID-19. Advancing in disease treatment and vaccination, developing vaccines and reinforcing confidence and universal preventive measures will greatly reduce the overall fear of disease and alleviate anxiety disorders. It should be promoted widely as preventions of the pandemic need cooperation from a large group of people to be effective in stopping the spread of infection effectively.

## References

- AFP News. (2021). *WHO says no Omicron deaths reported yet, as variant spreads worldwide*. Retrieved from [www.timesofisrael.com/who-says-no-omicron-deaths-reported-yet-as-variant-spreads-worldwide/](http://www.timesofisrael.com/who-says-no-omicron-deaths-reported-yet-as-variant-spreads-worldwide/).
- American Psychological Association. (2020). *APA Dictionary of Psychology*. Retrieved from <https://dictionary.apa.org/state-anxiety>.
- Bangkokbiznews. (2021). *Omicron's outbreak has risen to 40 countries, 17 states in the United States have been infected*. Retrieved from [www.bangkokbiznews.com/news/975799](http://www.bangkokbiznews.com/news/975799).
- Clark, D., & Beck, A. (2010). *Cognitive therapy of anxiety disorders*. New York: Guilford Press.
- Clark, M. (1986). A cognitive approach to panic. *Behavior Research and Therapy*, 24, 461-470.
- Dalgleish, T., Black, M., Johnston, D., & Bevan, A. (2020). Trans diagnostic approaches to mental health problems: Current status and future directions. *Journal of Consulting and Clinical Psychology*, 88(3), 179-195.
- Department of Medical Sciences. (2021). *Found the first COVID-19 species "Omicron" in Thailand*. Bangkok: Department of Medical Sciences of Ministry of Public Health.
- Endler, N., & Kocovski, N. (2001). *State and trait anxiety revisited*. *Journal of Anxiety Disorders*, 15(3), 231-245.
- Freeston, M., Tiplady, A., Mawn, L., Bottesi, G., & Thwaites, S. (2020). Towards a model of uncertainty distress in the context of Coronavirus (COVID-19). *The Cognitive Behaviour Therapist*, 13(e31), 1-15.
- Yu, H., Li, M., Li, Z., Xiang, W., Yuan, Y., Liu, Y., Li, Z., & Xiong, Z. (2020). Coping style, social support and psychological distress in the general Chinese population in the early stages of the COVID-19 epidemic. *BMC Psychiatry*, 20(1), 426.
- Leonhart, M., & Radomsky, A. (2019). Responsibility causes reassurance seeking, too: An experimental investigation. *Journal of Obsessive-Compulsive and Related Disorders*, 20, 66-74.
- Li, Q. (2020). Psychosocial and coping responses toward 2019 coronavirus diseases (COVID-19): a cross-sectional study within the Chinese general population. *QJM: An International Journal of Medicine*, 113(10), 731-738.
- Marzo, R., Ahmad, A., Islam, M., Essar, M., Heidler, P., King, I., Thiagarajan, A., Jermsittiparsert, K., Songwathana, K., Younus, D., El-Abasiri, R., Bicer, B., Pham, N., Respati, T., Fitriyana, S., Faller, E., Baldonado, A., Billah, M., Aung, Y., Hassan, S., Asad, M., El-Fass, K., Bhattacharya, S., Shrestha, S., Hamza, N., Friedmann, P., Head, M., Lin, Y., & Yi, S. (2022). Perceived COVID-19 vaccine effectiveness, acceptance, and drivers of vaccination decision-making among the general adult

- population: A global survey of 20 countries. *PLOS Neglected Tropical Diseases*, 16(1): e0010103.
- Neal, L., & Radomsky, S. (2015). An experimental investigation of contamination-related reassurance seeking: Familiar versus unfamiliar others. *Journal of Behavior Therapy and Experimental Psychiatry*, 49, 188-194.
- Parrish, L., & Radomsky, A. (2010). Why do people seek reassurance and check repeatedly? An investigation of factors involved in compulsive behavior in OCD and depression. *Journal of Anxiety Disorders*, 24(2), 211-222.
- Parrish, L., & Radomsky, S. (2011). An experimental investigation of factors involved in excessive reassurance seeking: The effects of perceived threat, responsibility and ambiguity on compulsive urges and anxiety. *Journal of Experimental Psychopathology*, 2(1), 44-62.
- Post Today. (2021a). *Consumers are still afraid to spend money because fear of new covid-19 pandemic*. Retrieved from [www.posttoday.com/finance-stock/news/669925?](http://www.posttoday.com/finance-stock/news/669925?).
- Post Today. (2021b). *Scientists worried Omicrons are changing at an unusually fast pace*. Retrieved from [www.posttoday.com/world/669930?](http://www.posttoday.com/world/669930?).
- Rachman, S., & Lopatka, C. (1986). Do fears summate?—III. *Behavior Research and Therapy*, 24(6), 653-660.
- Rettie, H., & Daniels, J. (2021). Coping and tolerance of uncertainty: Predictors and mediators of mental health during the COVID-19 pandemic. *American Psychologist*, 76(3), 427-437.
- Shafran, R., Rachman, S., Whittal, M., Radomsky, A., & Coughtrey, A. (2021). Fear and Anxiety in COVID-19: Preexisting Anxiety Disorders. *Cogn Behav Pract*, 28(4), 459-467.
- Wang, S., Liu, Y., Du, Y., & Wang, X. (2021). Effect of the COVID-19 Pandemic on Consumers' Impulse Buying: The Moderating Role of Moderate Thinking. *Int J Environ Res Public Health*, 18(21), 11116.
- Urairak, B. (2021). The Management of Behavior Considerations for Acceptance and Uptake of COVID-19 Vaccines Among Nurses in Thailand. *Academy of Strategic Management Journal*, 20(5), 1-8.
- Whittal, M., & McLean, D. (1999). CBT for OCD: The rational, protocol, and challenges. *Cognitive and Behavioral Practice*, 6, 383-396.