MENTAL HEALTH & COVID Dr. Sharla Khargi

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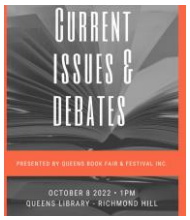
Queens Public Library, New York, USA



THE EFFECTS OF COVID-19 ON MENTAL HEALTH AND PSYCHOLOGICAL WELL-BEING.

Covid-19 has hijacked our levels of thinking without our permission and is still here. TRAUMA – what is trauma? Affects our overall level of functioning – cognitive (thinking, memory) and adaptive – daily living, lack of structure

COVID Took control of many areas including but not limited to:

Displacement – outdoors and indoors
Temperament - -What is temperament? Cultural Understanding –
Dependent vs. Independent cultural understanding
Being honest, with ourselves and asking for help NOT KNOWING HOW TO ASK
Sense of self – what is the sense of self? Identity (change) THE EFFECT ON THE SOCIAL SELF
Self confidence
Overall self-efficacy, self confidence

Anxiety - Anxiety is the mind and body's reaction to stressful, dangerous, or unfamiliar situations. It's the sense of uneasiness, distress, or dread you feel before a significant event. A certain level of Anxiety helps us stay alert and aware, but for those suffering from an anxiety disorder, it feels far from normal - it can be completely debilitating. Many areas, many types of anxiety

COVID HAS TRIGGERRED Depression – different from sadness - Depression causes feelings of sadness and/or a loss of interest in activities once enjoyed. It can lead to a variety of emotional and physical problems and can decrease a person's ability to function at work and at home. OWNING SOMEONE ELSES DEPRESSION

Depression symptoms can vary from mild to severe and can include:

- Feeling sad or having a depressed mood
- Loss of interest or pleasure in activities once enjoyed
- Changes in appetite — weight loss or gain unrelated to dieting
- Trouble sleeping or sleeping too much

- Loss of energy or increased fatigue
- Increase in purposeless physical activity (e.g., hand-wringing or pacing) or slowed movements and speech (actions observable by others)
- Feeling worthless or guilty
- Difficulty thinking, concentrating or making decisions
- Suicide/Thoughts of death or suicide

  - ✓ Isolation
  - ✓ Anger
  - ✓ Violence
  - ✓ Fear
  - ✓ SHAME
  - ✓ Sadness - SEASONAL AFFECTIVE DISORDER
  - ✓ Increase in domestic violence – gender based violence, LGBTQ
  - ✓ Job loss
  - ✓ Death – loss of family
  - ✓ Loneliness – Geriatric community, PEOPLE WITH DISABILITIES
  - ✓ Children – WHO NEVER ATTENDED SCHOOL, STRESS ON THE PARENT OR CAREGIVER

BEING GRATEFUL. VALUE, PATIENCE, TOLERANCE FOR OURSELVES.

Increase in alcohol sales which is indicative of an increase in consuming alcohol.

TYPES OF ANXIETY DISORDERS

There are many anxiety-related disorders, and they are divided into three main categories:

1. Anxiety disorders: Anxiety disorders are characterized by a general feature of excessive fear (i.e. emotional response to perceived or real threat) and/or anxiety (i.e. worrying about a future threat) and can have negative behavioral and emotional consequences.

3. Trauma- and stressor- related disorders: Trauma- and stressor- related anxiety disorders are related to the experience of a trauma (e.g., unexpected death of a loved one, a car accident, or a violent incident like war or sexual assault) or stressor (e.g., divorce, beginning college, moving).

- Post-Traumatic Stress Disorder (PTSD) is the most well-known trauma- and stressor related disorder. These are disorders that are related to the experience of a trauma (e.g., unexpected death of a loved one, a car accident, combat, or a violent incident) or stressor (e.g., divorce, beginning college, moving). This category also includes Acute Stress Disorder and Adjustment Disorder. A full discussion of the symptoms and treatment of PTSD can be found here.

- Generalized Anxiety Disorder (GAD) is characterized by excessive, uncontrollable worry over events and activities and potential negative outcomes. The anxiety and worry must cause significant distress or interfere with the individual's daily life, occupational, academic, or social functioning to meet diagnosis. The symptoms cannot be better accounted for by another mental disorder or be caused by substances, medications, or medical illness. Find more information here about Generalized Anxiety Disorder.
- Panic Disorder reflects the experience of sudden panic symptoms (generally out of the blue, without specific triggers) in combination with persistent, lingering worry that panic symptoms will return and fear of those panic symptoms. Symptoms include recurrent expected or unexpected panic attacks that can last from a few minutes to up to an hour.

DEPRESSION (major depressive disorder) is a common and serious medical illness.

Depression causes feelings of sadness and/or a loss of interest in activities once enjoyed. It can lead to a variety of emotional and physical problems and can decrease a person's ability to function at work and at home.

Depression Is Different From Sadness or Grief/Bereavement

The death of a loved one, loss of a job or the ending of a relationship are difficult experiences for a person to endure. It is normal for feelings of sadness or grief to develop in response to such situations. Those experiencing loss often might describe themselves as being "depressed."

But being sad is not the same as having depression. The grieving process is natural and unique to each individual and shares some of the same features of depression. Both grief and depression may involve intense sadness and withdrawal from usual activities. They are also different in important ways:

- In grief, painful feelings come in waves, often intermixed with positive memories of the deceased. In major depression, mood and/or interest (pleasure) are decreased for most of two weeks.
- In grief, self-esteem is usually maintained. In major depression, feelings of worthlessness and self-loathing are common.
- For some people, the death of a loved one can bring on major depression. Losing a job or being a victim of a physical assault or a major disaster can lead to depression for some people. When grief and depression co-exist, the grief is more severe and lasts longer than grief without depression. Despite some overlap between grief and depression, they are different. Distinguishing between them can help people get the help, support or treatment they need.

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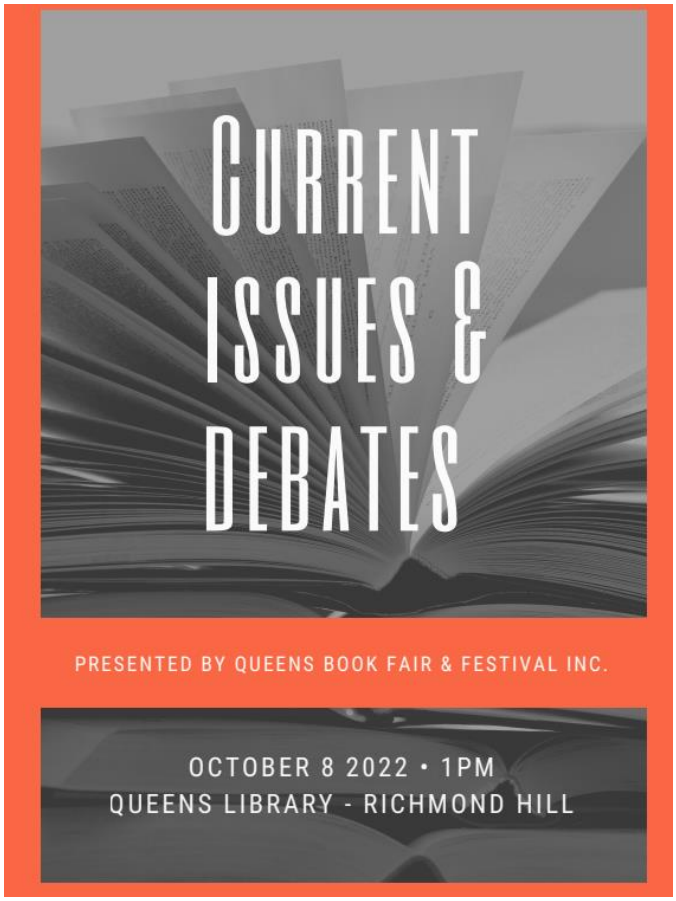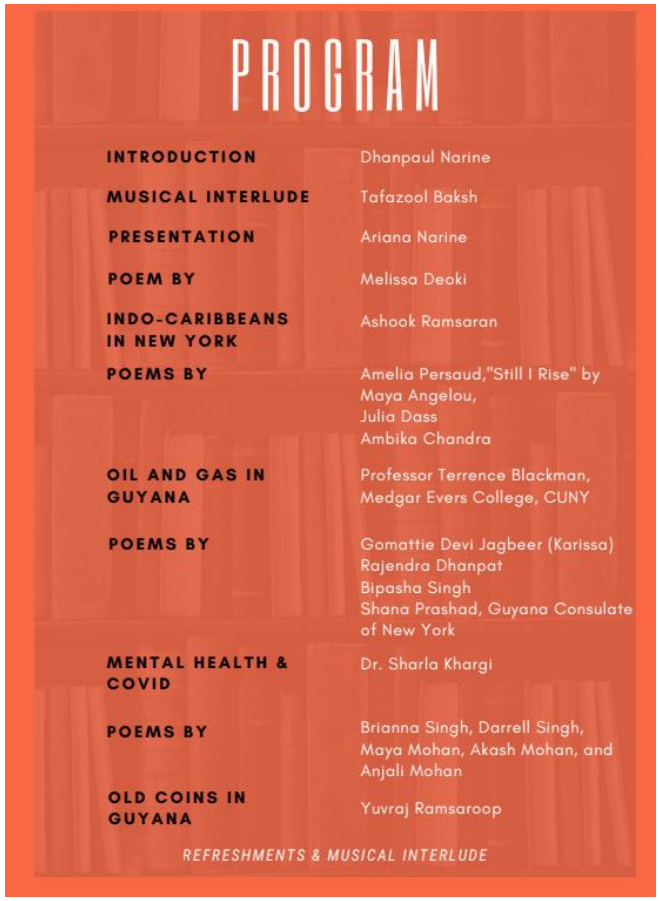
Dr. Sharla Madho-Khargi is a clinical psychologist in NY State. She is a faculty at St. Johns University and an adjunct professor at The City University of New York. She also has her private practice in Queens, NY. She currently serves as the Director of Clinical/Community Services for the Indian Diaspora Council (IDC), as well as the Global Organization for People of Indian origin (GOPIO) and has been conducting research internationally for the past 15 years with a focus on mental illness, domestic violence, and disability in both children and adults. She is past president of the division of psychoanalysis for the New York State Psychological Association, and currently serves as the co-chair of NYSPA's Diversity, Equity and Inclusion committee (DEI). She is a member of the disaster recovery network as well as the social justice committee for the legislative division of NYSPA. Dr. Madho-Khargi serves as a board member for the Queens Psychological Association, the LGBTQ special interest group for New York State Psychological Association, South Asian Women's Empowerment Group (SAKHI), and consultant for the Ministry of Mental Health in Guyana South America. Past President, Division of Psychoanalysis (2020); Co-Chair Diversity Equity Inclusion NYSPA (DEI) Committee; New York State Psychological Association LGBTQ Task Force Queens Psychological Association (QPA); New York State Psychological Association Social Justice Committee (2020); Distinguished Fellow New York State Psychological Association (2021); Service Award Recipient New York State Service Psychological Association (2021).