Analysis of the Stress, Anxiety and Healthy Habits in the Spanish COVID-19 Confinement

Abstract

Objectives: These were to identify the perceived levels of stress and anxiety in the confined population, to identify if there is an evolution (increase or decrease) in time and provide health educational messages while participating in the study.

Method: Through a questionnaire sent via social networks, the participants were requested to answer two standardized and validated tests (one on anxiety and another on stress levels) and the daily adherence to a series of habits.

Results: The Stress and anxiety levels increase according to the age and the responsibilities associated with it. These levels increase in an initial moment, showing a decrease as the days in confinement increase. There is a confirmed relation between stress and anxiety and between these variables and the days in confinement. The adherence to healthy habits decreases as the days in confinement increase. In this sense, we have seen that the higher the age range the more adherence to healthy habits.

Results: The data obtained showed the evolution of the three elements to study and also provided tools and tips for the participants so as to cope with the situation.

Keywords: Confinement; Anxiety; Stress; Healthy habits

Introduction

During the 21st century we have been through various viral diseases outbreaks which have represented a serious threat to the worldwide public health. In 2002-2003 the Severe acute respiratory syndrome coronavirus or SARS-CoV, followed by the H1N1 influenza in 2009 and the Middle East respiratory syndrome coronavirus (MERS-CoV) was identified in Saudi Arabia in 2012 [1]. Not to forget the Ebola outbreak between 2012-14 that eventually arrived to Europe and the US, which did create much more expectation than deaths. Following the timeline, we arrive to the end of 2019, where, according to WHO [2] the first case of COVID-19 was confirmed in the Wuhan province of China on the 31st of December, being diagnosed initially as “pneumonia of unknown etiology”.

The first cases of COVID-19 were linked to Huanan Seafood Wholesale Market of Wuhan and due to the high amount of animals that are present in this market, the initial assumption was that the transmission was animal-to-human. Although as the virus started spreading, it was confirmed that the human-to-human contact was also a way. It was also identified that the asymptomatic people could also transmit the virus. With these elements in place, the isolation of the population to prevent the outbreak was the key measure for containment [1].

As the cases were expanding through the globe, the different governments were taking the actions that considered necessary with the information that was being provided by the studies and evidence that was being generated. For China, the decision was clear and simple: everyone had to stay at home, and they achieved that over 40 million people stayed at home, reducing the transmission. As China did, the governments where the cases were being identified had to face a tough choice, either declare states of emergency and confine their citizens at home or risk-taking other exposure reduction measures to maintain the welfare state. Each country started their own way, but eventually the state of alarm or emergency (as each country may call it) was declared and the citizens had to stay at home. Initially keeping some work activities ongoing and shifting everything possible to online and at-home work and eventually declaring which key sectors had to continue working, being this, possibly, one of the

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factors such as the media used to send it, the target population which can be tired of answering questionnaires.

- The way it was distributed, requesting no way of confirming the identity of the participants. True as this may be, the inclusion of this element in the questionnaire would have reduced the amount of participants due to the jealousy for each one’s privacy, especially when taking into consideration the psychological profile that comes out of answering the questions.

- The scales used and questions asked provide a limited information on the subjects, This was considered during the inception phase, but the loss of information was assumed in benefit of the easiness and time to respond.

References


13. Población residente por fecha, sexo y generación (edad a 31 de diciembre). INE.


