ORIGINAL

Level of fear due to the COVID-19 pandemic in residents of the district of Los Olivos in North Lima

Nivel de miedo por la pandemia del COVID-19 en pobladores del distrito de Los Olivos de Lima Norte

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ABSTRACT

Fear is one of the factors that compromises mental health during the COVID-19 pandemic, harming both individuals and their families due to the fear of contracting the disease. Therefore, the objective of this study is to determine the level of fear of the COVID-19 pandemic among residents of the Los Olivos district of northern Lima. This is a quantitative, cross-sectional study with a total population of 118 participants who responded to a questionnaire on sociodemographic aspects and the COVID-19 fear scale. The results show that 38,1 % (45 participants) have high levels of fear, 45,8 % (54 participants) have medium levels, and 16,1 % (19 participants) have low levels of fear. In conclusion, necessary actions must be taken to care for mental health through comprehensive care for the population.

Keywords: Fear; Pandemic; Coronavirus; Mental Health.

RESUMEN

El miedo es uno de los sucesos que compromete la salud mental de la persona durante la pandemia del COVID-19 y que ello perjudica tanto a la persona y a su familia por el temor a contagiarse por la enfermedad, por ello, el objetivo de investigación es determinar el nivel de miedo por la pandemia del COVID-19 en pobladores del distrito de los olivos de Lima Norte. Es un estudio cuantitativo y transversal, con una población total de 118 participantes que respondieron un cuestionario de aspectos sociodemográficos y la escala del miedo al COVID-19. En sus resultados podemos observar que, el 38,1 % (45 participantes) tienen niveles altos de miedo, 45,8 % (54 participantes) nivel medio y 16,1 % (19 participantes) niveles bajos de miedo. En conclusión, se debe realizar acciones necesarias para cuidar la salud mental desde una atención integral en la población.

Palabras clave: Miedo; Pandemia; Coronavirus; Salud Mental.

INTRODUCTION

The new coronavirus (COVID-19) has spread very rapidly throughout China and other countries, causing a diverse clinical picture in infected persons, the most worrisome being severe acute infectious pneumonia that can lead to death.[1]

By the end of November of this year, 2 234 075 confirmed cases of COVID-19 infection had been recorded in

Peru. The registry also indicates that there are 201 108 confirmed deaths to date, of which Lima has the highest concentration of 81 643 cases. This scenario is worrisome and definitely worries not only the health authorities, but also any citizen who fears infection.[2]

During the COVID-19 pandemic, people subjectively feel fear, and in the face of this may present the corresponding adaptive or avoidance behaviors, such as depression, anxiety, post-traumatic stress disorder, and suicide, thereby reducing their quality of life and well-being.[3,4]

Therefore, the general population, as well as most frontline healthcare workers, are vulnerable to emotional impact, due to both the pandemic and the strict rules that limit people's full social activity around the world.[5,6] Psychological support must be provided in a timely manner to people with serious mental health problems. In most patients and healthcare workers, emotional and behavioral responses are part of an adaptive response to extraordinary stress.[7,8]

Fear is a very common psychological reaction in pandemics. Several existing studies have shown that when there is a high risk of infection, people may develop generalized fears about their health and that of their family members.[9,10] Fear of COVID-19 is a negative emotional reaction or persistent concern about an impending public health event.[11,12]

In a study conducted in Portugal with 1 122 residents, the results showed that fear levels were high because they were related to anxiety and depression due to residents' perceptions of COVID-19 and that factors such as emotional fear and fear of going to certain service facilities during the pandemic generated fear in people. They concluded that residents feeling vulnerable to a disease that compromises their health increases their fear and anxiety about infecting themselves and their families.[13]

In a study conducted in India with 1 499 residents, the results showed that 58,6 % of male residents had low levels of fear and 41,4 % had high levels; among females, 51,7 % had low levels and 41,4 % had high levels of fear. The study concluded that being female, lacking adequate education, and working in healthcare were factors that increased a person's fear of COVID-19.[14]

In a study conducted in Australia with 587 participants, the results showed that 68,1 % of participants had low levels of fear and 31,9 % had high levels. The study concluded that employment status, excessive alcohol consumption, being female, and having a mental health problem were associated with higher levels of fear.[15]

Therefore, the objective of this study is to determine the level of fear of the COVID-19 pandemic among residents of the Los Olivos district of northern Lima.

METHOD

Research type and design

The study is quantitative in nature and uses a descriptive, cross-sectional, non-experimental methodology.[16]

Population

The population consists of a total of 118 residents living in the Los Olivos district.

Inclusion Criteria

- People over 18 years of age
- People who voluntarily agree to participate in the study

Technique and Instrument

A virtual survey was conducted using a Google form, which included the Fear of COVID-19 Scale (FCV-19S) data instrument.

The FCV – 19S comprises seven items presenting two dimensions (emotional reactions to fear and somatic reactions to fear), which are assessed using a Likert scale with five response options: "1 = Strongly disagree," "2 = Disagree," "3 = Neither agree nor disagree," "4 = Agree," and "5 = Strongly agree." A total score is obtained by adding up all the items, so that a score of "0 to 11 points" is low, "12 to 23 points" is medium, and "24 to 35 points" is high.[17]

The validity of the instrument for measuring fear of COVID-19 was determined using exploratory factor analysis. The Kaiser-Mayer-Olkin sample adequacy measure obtained a coefficient of 0,864 (KMO > 0,5), while Bartlett's sphericity test obtained significant results ($X^{(2)}$approx. = 3928,250; gl = 18; p = 0,000).

The reliability of the instrument was determined using Cronbach's alpha statistical test for all items (i = 7), resulting in a coefficient of 0,950 (α > 0,6).

Place and Application of the Instrument

Home visits were made after coordinating with the heads of each household to provide them with information about the study so that they would have the necessary knowledge about the research.
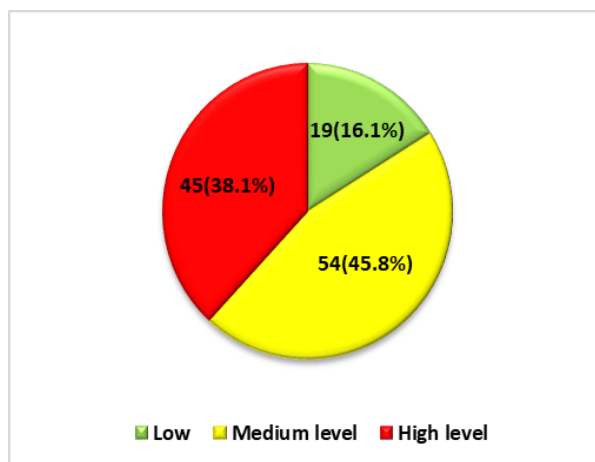
RESULTS

Figure 1. Level of fear of the COVID-19 pandemic among residents of the Los Olivos district of northern Lima

In figure 1, we can see that 16,1 % of participants have low levels of fear, 45,8 % have medium levels, and 38,1 % have high levels of fear.
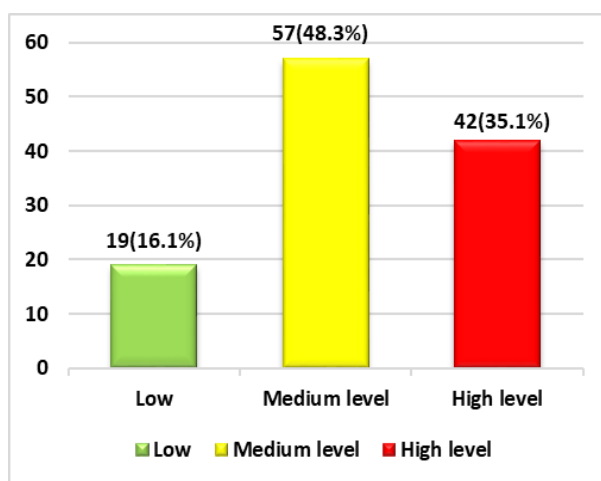

Figure 2. Level of fear in terms of emotional reactions to fear of the COVID-19 pandemic among residents of the Los Olivos district of northern Lima

Figure 2 shows that, with regard to emotional reactions to fear, 16,1 % of participants have low levels of fear, 48,3 % have medium levels, and 35,1 % have high levels.
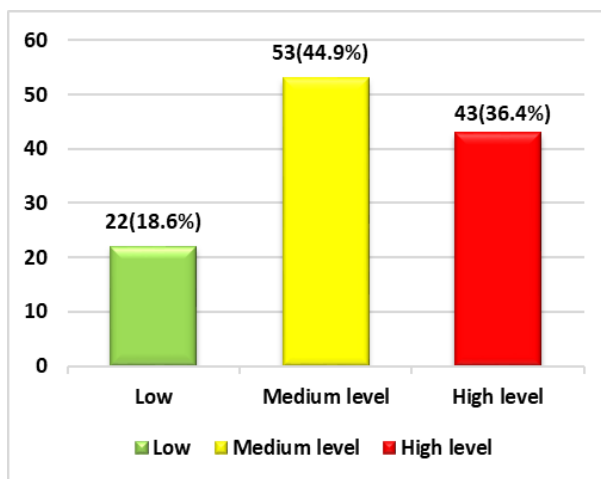

Figure 3. Level of fear in its dimension of somatic reactions to fear of the COVID-19 pandemic in residents of the Los Olivos district of northern Lima

In figure 3, we can see that, with regard to the dimension of somatic reactions to fear, 18,6 % have low levels of fear, 44,9 % have medium levels, and 36,4 % have high levels of fear.

DISCUSSION

Fear of COVID-19 occurs initially, but if it is persistent and cannot be controlled, more complex conditions such as depression, anxiety, and stress may develop.

As for fear of COVID-19 among participants, the medium level predominated. This is because the population becomes more susceptible due to anxiety, depression, and distress caused by the COVID-19 pandemic, which causes constant damage to mental health. The complex relationship between fear, anxiety, and stress can lead to higher levels of depression in the population.

With regard to its dimensions, we observed that the population has a medium level of fear of COVID-19. This is due to the massive amount of information seen in the media, which misinforms the population and increases their levels of fear, as well as triggering certain emotional responses in which every person, as a result of the negative experience generated by COVID-19, is conditioned or vulnerable to developing a mental disorder, either in the short or long term. However, this negative experience is more evident in socially and economically disadvantaged residents, given that they have to work every day, exposing themselves to the disease and increasing their fear that if they become infected, they could infect their entire family.

A higher level of fear among people living in more disadvantaged areas may also be due to a lack of health facilities and professionals who can educate them or provide adequate information about the pandemic. Specifically, people living in disadvantaged areas are more vulnerable to the disease and its emotional, social, and economic impact, which can greatly exacerbate the level of fear of COVID-19.

CONCLUSIONS

It is concluded that necessary actions must be taken to care for mental health through comprehensive care for the population.

It is concluded that educational sessions on proper management should be conducted to maintain stable mental health, as this will prevent fear from spreading among the population.

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FUNDING

CONFLICT OF INTEREST
None.

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