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Abstracts from the panel
Impact of COVID-19 pandemic on population mental health: International perspectives
Monitoring population needs and wellbeing using panel studies

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Background
In the current COVID-19 pandemic, the entire population is affected to some degree. Either by its direct effects or by its indirect effects. Furthermore, the pandemic is an ongoing crisis, with different periods characterized by higher or lower outbreak severity and corresponding restrictive measures. This changing severity, and the effect of the duration of the crisis itself on those affected, means that its impact on the population can change over time. Therefore, longitudinal monitoring among samples drawn from the entire population are needed. In this study we investigate the impact of the COVID-pandemic on levels of wellbeing and need for support among the Dutch population.

Method
During the current COVID-pandemic, several panel studies were used to assess the impact of the pandemic in the Netherlands. Consequences on (mental) health, wellbeing and the degree to which a need for (psychosocial) support and care exists within the population were studied. All panels were based on random general population samples. Measurements took place from the start of the first lockdown in the Netherlands (March 2020) until present (pre-pandemic measurements on mental health and wellbeing were available for one of the panels as well).

Results
Results show that on a group level, mental health is quite stable among the general population, even compared to pre-pandemic levels. Furthermore, only a small minority of respondents (2%-4%) indicated they needed care or support to cope with the consequences of the pandemic. This was also quite stable over time. There was a shift in the type of support among this small minority however. Results will be discussed in more detail during the panel session.

Conclusions
The results of these different longitudinal measurements show the value of longitudinal monitoring of wellbeing and need for support among the general population. With such a monitoring system policy makers can offer time-specific support and care. Furthermore, the insight gained in the effect of restrictive measures on wellbeing and needs allows policymakers to anticipate the care and support that will be needed during future periods of restrictive measures. Because these panels were either preexisting, or were drawn from a preexisting panel, it was possible to start monitoring soon after the start of the pandemic, which allowed the measurements to be used as rapid needs assessments.
The psychological impact of COVID-19 in Italy through the voices of experts

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Italy has been one of the countries most affected by the COVID-19 pandemic since the very beginning. In fact, it was the first European country to deal with a massive spreading of the virus in February/March 2020. Italy is also one of the countries that decided for a complete “stay at home order”, known as “lockdown”, to enforce social distancing and preventing the spreading of the virus for the period of approximately two months (March 9 to May 17). After a relatively calm Summer, the number of infections started to increase again and at the end of October, new countermeasures that limit the freedom of movement of the population and determine restricted business hours for commercial activities have been implemented. Nowadays, the situation seems calmer thanks to a massive vaccination campaign that started among controversy.

Leaving aside the huge economic impact, both the pandemic and its countermeasures, also affected individuals and families psychologically in different ways, according to the period (lockdown/second wave/vaccination campaign) and according to the personal situation of the individuals.

Since August 2020 I have been conducting ethnographic fieldwork and media analysis, to evaluate the social impact of the COVID-19 pandemic in Italy. Drawing on interviews with psychologists and psychotherapists operating in Italy, this presentation aims to present some aspects of the psychological impact Covid-19 pandemic on the Italian population. It is usually said that the impact of the lockdown was severe, but from my interviews, I have also gathered information regarding the effect of going out again after the lockdown and how anxiety and fear can present themselves at a later stage when individuals restart their activities to face new challenges in a world much scarier to the one they knew before the pandemic.

The aim of the presentation is also to provide the background for a larger comparative discussion about the impact of Covid-19 in different countries to reflect on differences and commonalities.
Personal resilience: measuring psychological and biological stress during military conscription in the period of COVID-19 outbreak

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The influence of social distancing on everyday life and people ability to manage stress and demonstrate personal resilience has been widely discussed among researchers during the last two years. Despite the increased scope of research in the field, there are still a few gaps that need to be covered. The research on the impact of COVID-19 on population mental health usually are focused solely on demographic characteristics of society (elderly, children, etc.); little attention is paid to the groups of people who are united by a common professional, hobby or voluntary activity. Second, personal resilience is measured using the subjective opinion of the respondents without comparing levels psychological and biological stress.

Our research proposes to partially fill this gap by measuring personal residence during military conscription held during COVID-19 pandemic. The study focuses on a specific group of young people who spent nine months in military service in “service bubbles”, minimizing contact with the environment, relatives, and between conscript groups themselves. Using a random sample of 17 groups (squads) of totally 164 conscripts, we measured personal resilience to a numerous changes and trials that occured during the conscript service in the period of COVID-19 outbreak.

Personal resilience was measured using innovative methods that combine non-invasive biomedical tests and psychological inventory. The longitudinal study lasted the entire period of service (9 months). Non-invasive biomedical tests using human hair were used to identify the level of stress hormone (cortisol) and to measure the level of biological stress in conscripts' bodies; while validated instruments for measuring the perception of stress were used to identify the level of psychological stress. The combination of measurement of physical and psychological stress levels allowed us to observe how personal resilience helped the research participants to adapt to new conditions.

The research findings show that personal resilience ensures a successful return to a normal level of stress even before the stressful situation ends. Already after the first four months, we found a significant decrease in biological stress, while the level of psychological stress continued to rise insignificantly. This conclusion is interesting: the biological response to the stressful environment is adaptive, while the psychological (subjective) response may vary among healthy young people engaged in the same activity.

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