## BRAIN. Broad Research in Artificial Intelligence and Neuroscience

ISSN: 2068-0473 | e-ISSN: 2067-3957

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2022, Volume 13, Issue 1Sup1, pages: 220-224 | <u>https://doi.org/10.18662/brain/13.1Sup1/314</u> Submitted: February 1st, 2022 | Accepted for publication: March 4th, 2022

# Social Resets and Suicides during Covid-19 Pandemic

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<sup>2</sup> MD, Dr, Associate Profesor "Grigore T. Popa" University of Medicine and Pharmacy, Iasi, Romania.

<sup>3</sup>MD, Dr., Hab. Professor, Faculty of Medicine and Pharmacy, "Dunărea de Jos" University, Head of Psychiatry Department, Senior Psychiatrist "Elisabeta Doamna" Hospital, Gala'i, România, anamburlea@yahoo.com Abstract: Introduction. Well-known as a public health problem, suicide is known to cause many deaths during periods of economic and social unrest. Through the social changes imposed by the political and medical actors, the society knows old challenges, but also some completely new ones, which seem to influence the suicidal behavior among the population.

Aim. The paper tries to present the effects of anti-Covid-19 social measures, especially those decided by the Romanian authorities between March 2020 and March 2021, on mental health and suicidal behavior. Also, by assessing the public policy intentions expressed publicly in European leadership circles for the medium-term future, we wanted to identify the impact on lifestyle and suicidal behaviour.

Materials and method. The paper uses the medical literature in order to identify traditional or new risk factors for suicide, introduced into society by SARS-Cov-2 and the social restrictions that accompanied it. Also, sources from the domestic and international media are used to evaluate the future announced social resets and the possible impact on the suicidal behavior among the Romanian population.

Results. The feeling of induced fear and the change of some social routines, imposed by the political factors in the context of the Covid-19 virus, are supposed to be accompanied by increases in the suicide rate. The new economic challenges and social antagonisms, predictable for the near future, bring with them the risk of increasing suicidal behavior among the world's population and Romania.

Conclusion. In various countries, suicide rates have risen during the pandemic. New social measures are announced in authoritarian tones, with no intention of assessing the impact on the mental health of the population. The implementation of these innovative measures should be done only after balancing the psychological and psychiatric impact. The alternative could be the emergence of new epidemics of mental illness and suicide, which can unbalance society, as has never happened before.

**Keywords:** *suicide, Covid-19 pandemic, lockdown, curfews, suicidal behaviour.* 

How to cite: Corbeanu, D.-C., Antohe, M., & Ciubară, A. (2022). Social Resets and Suicides during Covid-19 Pandemic. BRAIN. Broad Research in Artificial Intelligence and Neuroscience, 13(1Sup1), 220-224. https://doi.org/10.18662/brain/13.1Sup1/314

## Introduction

Suicide is well-known as a public health problem, especially among teenagers. As history reveals, suicide causes many more deaths during periods of economic and social unrest. Suicide accounts for 1.4% of all deaths, and is the 15th leading cause of death globally. The Great Economic Depression of the 20<sup>th</sup> century and the two world wars witnessed a rise in suicidal behaviour. Through the social changes imposed by the political and medical actors, the society knows some challenges, which are risk factors for suicidal behaviour. Some completely new societal factors seem also to influence the suicidal behavior among the population in time of Covid-19 pandemic (Sadock et al., 2017).

## **Research Methodology**

The paper uses the medical literature in order to identify traditional or new risk factors for suicide, introduced into the pandemic society either by SARS-Cov-2 or the social restrictions and curfews that accompanied it. Also, sources from the domestic and international mass-media are used to evaluate the future announced social resets and the possible impact on the suicidal behavior among the Romanian population. Many such decisions have brought deep sadness to Romanian people.

### Discussions

Any disease is a burden for individuals and for society. Physical pain induces fear to the ill and to its relatives. In families with poor financial status, a disease very often has the meaning of a crisis. Suicide is an important issue in assessing the impact of Covid-19 in public health. As deaths from Covid-19 as a main diagnosis are not a spectacular number (in Romania, less than 1% of the cases depicted in media as belonging to Covid-19), one must take into account the deaths provoked by some exaggerated measures, and suicide is a major point of interest. As long as medical profession has an important saying as its principle (*Primum, non nocere.*), the negative impact of medical measures imposed by authorities worldwide has been one a very high interest. It is almost impossible to discerne precisely whether a rise in suicides is attributable to the disease itself or to various social measures which brutally ignored basic human rights (Bachman, 2018).

Covid-19 has been a favourite subject for the media headlines. The induction of fear, whether intended or not, and the change of some social routines, imposed by the political factors in the context of the Covid-19 epidemic, are supposed to be accompanied by increases in the suicide rate.

Although the existing Romanian laws could not allow the word *pandemic* related to Covid-19, the impact upon Romanian society was huge. With a rural population of minimum 40% a a rather poor infrastructure, many Romanians were pushed to new technologies as a way of of avoiding social contact. For example, the use of credit and debit cards was recommended by authorities and various hypermarkets and delivery firms as the preferred way of payment. Roumours about a ban on cash use might have increased the anxiety for the elderly people, which have a well-established routine of using cash as a unique way of payment. Many people of younger age are also very reluctant to use electronic payments for various reasons, mainly related to hacking and privacy. Some of new social services implied an installed application on a mobile phone, which created a discrimination for people who don't own a mobile phone or don't want to use electronic payment; one example of such a social service is the use of push scooters in Galati city. Although not related to Covid-19, the phenomenon of new technologies which are not available for everybody has been perceived as a phenomenon of social exclusion for the above mentioned social categories. Some measures, such as lockdowns and delays in returning to work, were also associated with mental health among the public (Shi, 2020).

Some major social changes were a direct result of the curfews imposed by authorities. Many social measures had a serious impact on the religious life in Romania. It is well-known that religiousness and belief in God is a factor that decrease the risk of suicide, no matter what the religion is, as holly books condemn and forbid suicide in a straightforward manner (Hawton, 2009). The traditional ritual of funeral was forbidden in Romania; people were not allowed to get the coffin into the church, and this never happened in history. Instead of that, people declared dead of Covid-19 in hospitals were rapidly identified by relatives, then put in a black plastic bag. The funeral ritual was only allowed in open air and at the peak of restrictions it was restricted to eight attendant people. The access to various religious services was seriously restricted, too. It was the first time in Romanian history that the most important religious event in a year, Christs Resurrection, took place in closed churches, and the ritual was completed by a priest and a maximum of two people inside a church. At least three traditional religious pilgrimages have been banned in Romania, while all hypermarkets were allowed to get bigger crowds inside without any limit. This fact brought forth in the general mindset the idea that religious freedom is temporarily abolished in Romania (Jeong, 2016).

Facing death announced everywhere in mass-media in catastrophic manner, Romanians also found out that many non-religious gatherings were

allowed. For example, at the peak of religious restrictions, workers for German asparagus farms were allowed to travel and stay close to one another in airports, and authorities repeatedly refused to tackle the issue of different treatment of citizens and taxpayers. Social isolation, anxiety, fear of contagion, uncertainty, chronic stress and economic difficulties may lead to the development or exacerbation of depressive, anxiety, substance use and other psychiatric disorders in vulnerable populations including individuals with pre-existing psychiatric disorders and people who reside in high COVID-19 prevalence areas. Stress-related psychiatric conditions including mood and substance use disorders are associated with suicidal behavior (Sher, 2020).

At the beginning of 2021, some of ideas that appeared to be conspiracy theories were proved to be true. For example, the mounting data shows that an artificial origin of the virus is very plausible, a fact that was labeled as ridiculous at the beginning of 2020. It is not the intention of the article to dispute any of these controversial facts about the Covid-19, but the so-called fight against the fake news have mounted tension in society and has raised public ideas about an obvious tendency to censorship and authoritarian political regimes. This fact by itself leads to uncertainty, fear and pesimistic thoughts (Gunnel et al., 2020).

The new economic challenges and social antagonisms, predictable for the near future, bring with them the risk of increasing suicidal behavior among the world's population and Romania.

## **Research Results**

Although many curfews had a negative impact on Romanians mood, especially those related to religious issues, there are no studies which may reflect the impact on suicide. Data reflecting suicide are available only a few years after, due to legal issues. Very few data concerning suicide are available for 2020. A study for American army found that sicide rates increased by 25%, which is a big number. Suicide in hospitals could also be an interesting issue for future investigations, as media announced some very tragic and spectacular cases.

### Conclusions

Few data are available, in various countries. As far as we know up to now, suicide rates either stagnated or have risen during the pandemic. New social measures were announced in authoritarian tones, with no intention of assessing the impact on the mental health of the population. The implementation of these innovative measures should be done only after balancing the psychological and psychiatric impact, as the lethality of Covid-19 was proven overvalued. The alternative could be the emergence of new epidemics of mental illness and suicide, which can unbalance society, as has never happened before. As trust in medical profession dropped during the pandemic, future studies are needed to decide whether the authorities have taken good or bad decisions, whether was more lethal than the disease.

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