When COVID-19 Enters in a Community Setting: An Exploratory Qualitative Study of Community Perspectives on COVID-19 Affecting Mental Well-Being

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Abstract

Background: The COVID-19 pandemic has certainly resulted in an increased level of anxiety and fear among the general population related to its management and infection spread. Due to the current unprecedented situation the normal routine life of every individual has been hindered which may cause florid mental distress. Considering the relevance of present circumstances we explored perceptions and attitudes of community members towards COVID-19 pandemic and its impact on their mental well-being.

Methods: We conducted an exploratory qualitative study using a purposive sampling approach, at two communities of Karachi, Pakistan. In-depth interviews were conducted with community members including, young adults, middle-age adults, and older adults of both genders. Study data was analyzed manually using the conventional content analysis technique.

Results: A total of 27 in-depth interviews were conducted, between May and June, 2020. Three overarching themes were identified: (I) Impact of COVID-19 on mental health of the general communities; (II) Current coping mechanisms to adapt to the new reality; and (III) Recommendations to address mental health of communities. Generally community members underwent increased anxiety and fear due to the contagious nature of the virus. Alongside, social, financial and religious repercussions of the pandemic have also heightened psychological distress among community members. However, community members were able to point out some of the coping mechanisms such as getting closer to God, connecting with family, participating in mental health sessions and resetting lives by indulging in diverse activities. Simultaneously, they also recommended the need of remote mental health services for elders and continuous efforts by the government to address mental health needs of the community at larger scale.

Conclusion: COVID-19-associated mental health consequences have hit every individual in the society. The study finding has the potentialto guide the development of context-specific innovative mental health programs to overcome the pandemic repercussions.

Background

The current outbreak of COVID-19 has been declared as a Public Health Emergency of International Concern by the World Health Organization[1]. The pandemic has not only incurred massive challenges to the global supply chains and healthcare systems but also has detrimental effect on the overall health of individuals[2]. The outbreak has led to lockdowns and has created havoc impact on the societies at large. Most company employees' including daily wages workers have been prohibited from accessing their workplaces or being asked to work from home which has caused job related insecurities and financial crisis among the communities[3]. Besides, educational institutions have been closed due to which children have lost their routine of going schools, studying and socializing with their peers[4]. Alongside, parents have been struggling on creating a structure milieu for their children. COVID-19 has hindered the normal routine life of every individual be it children, teenager, adult or elderly which may cause florid

mental distress[5]. The crisis is engendering burden throughout the population particularly in developing countries like Pakistan that face the major challenges due to the fragile health care systems and poor economic structures[6].

The pandemic has certainly resulted in an increased level of anxiety and fear among general population related to its management and infection spread[7]. Further, highly contagious nature of the COVID-19 has also escalated confusion, fear and panic among the general population. Moreover, social distancing is often an unpleasant experience for the community members that adds to mental suffering, particularly in the local setting where get-togethers with friends and families is a major source of entertainment[5]. Recent studies also showed that individuals who are following social distancing experience loneliness causing substantial level of distress in the form of anxiety, stress, anger, misperception and post-traumatic stress symptoms [4, 5]. In addition rumors, myths and inaccurate information aboutCOVID-19 are also spreading rapidly with the wide spread use of social media and is not only confined to adults but is also carried onto the children that also imposed mental distress[8].

The fear of transmitting disease or family member falling ill is a probable mental function of the human nature, but at the same point psychological fear of the disease generates more anxiety than the disease itself. Therefore, mental health problems are likely to increase in an epidemic situation among community members. Considering the relevance of all the above factors, we explored perceptions and attitudes of community members 'towards COVID-19 pandemic, and its impact on their mental well-being.

Methods

Study design and setting

This study employed an exploratory qualitative research design using semi-structured interviews and a purposive sampling approach. The present study is being reported in accordance with the reporting guidance provided in consolidated criteria for reporting qualitative research (COREQ) [9] (see COREQ-checklist in Additional file 1).The study was conducted in two communities of Karachi city. These included, Karimabad Federal B Area Block 3 Gulberg Town, Garden East and Garden West area of Karachi city. Karimabad is a neighborhood in the Karachi Central district of Karachi, Pakistan. It is situated at south of Gulberg Town bordering Liaquatabad, Gharibabad and Federal B Area. The population of this neighborhood is predominantly Ismailis. Garden is an up market neighborhood, which is in the Karachi South district of Karachi, Pakistan. It is subdivided into two neighborhoods: Garden East and Garden West. The population of Garden used to be primarily Ismaili and Goan Catholic, but has seen increasing numbers of Memons, Pashtuns, and Baloch.

Data Collection Methods and study participants

The data collection methods for this formative research included in-depth interviews (IDIs) with community members from Garden and Karimabad areas. The aim of the IDIs is to explore community perceptions and attitudes, regarding COVID-19 pandemic and its impact on their mental well-being. Adult

community members of different ages and both genders who have not contracted the disease were purposively recruited from both sites, as mentioned in the table 1. Participants who refused to give consent to participate in this study were excluded. Also, participants were excluded if they have been tested positive for COVID-19 or have been isolated/quarantined because of recent exposure

Data Collection Procedure

Semi-structured interview guide was developed for community members to explore participants' views towards COVID-19 and understand their perceptions on the mental wellbeing in light of the current situation (see Additional file 2 In-Depth Interview Guide).The in-depth interviews (IDI) participants were identified and contacted via community WhatsApp group and email and were informed about research purpose. Interviews were scheduled on participants' convenient day and time. Before beginning interview, the study investigators explained the study objectives and procedures to eligible community members. The consent of the eligible participants' was taken before the interview begins, in which participants agreed that the interview can be audio-recorded and written notes can be taken. Female researchers (NBA, RF, and SNM) were trained by ASF and NAA to conduct online qualitative interviews via zoom technology or Skype or WhatsApp call function. Participants were instructed to seat in quiet space to reduce maximum distraction during interview. The interviews were conducted in either Urdu or English language and each interview lasted around 35 to 45minutes in duration. Study participants were informed that study mainly explored perceptions to understand the effect of current pandemic on community. They were also assured that their information remained confidential and no identifying features were mentioned on the transcript.

Ethical considerations

Written informed consent was taken from the participants. Ethical approval for this study was obtained from the Aga Khan University Ethical Review Committee. (AKU-ERC) [2020-4825-10599].

Data analysis

Study data was analyzed manually using the conventional content analysis technique[10]. Firstly, the audio recordings from the interviews were transcribed and then translated into English language. No identifying characteristics were included in the transcriptions. Transcripts were read several times by four research investigators to develop an interpretation of the community perceptions regarding COVID-19 pandemic and its impact on their mental health. This involved an iterative process where data were coded, compared, contrasted, and refined to generate emergent themes. The transcribed text was divided into 'meaning units' which was later shortened and labeled with a 'code' without losing the study context. Codes were then analyzed and grouped into similar categories. In the final step, similar categories were assembled under sub-themes and main themes. Two independent investigators (NAA & ASF) performed the coding, and category creation, and discrepancies were resolved through discussion until a consensus was reached.

Results

In this qualitative study, 27 IDIs were conducted, between May and June 2020, with a variety of community members including, young adults, middle-age adults, and older adults of both genders. Data collection was ceased once saturation was achieved. Out of total 30 participants, (n=27) were agreed to participate in the study. The demographic information for the IDIs participants are illustrated in Table 2.

Based on the data collection and thematic analysis, three overarching themes were identified (I) Impact of COVID-19 on mental health of the general communities; (II) Current coping mechanisms to adapt to the new reality; and (III) Recommendations to address mental health of communities. The themes and categories are presented in Table 3.

Themes 1: Impact of COVID-19 on mental health of the general communities

Increased anxiety and fear:

Community members shared that the perceived uncertainty associated with COVID-19 has created stress and fear among individuals. Few community people verbalized that explaining and dealing with children's question about the current outbreak has further added anxiety in these difficult times. Some community people shared their concerns that closure of school has led to disruption in learning of children which may have induced anxiety among parents. These all worries and fears have led to a sense of unpredictability about the future, and life after pandemic. Highlighting these points, a respondent stated:

"Obviously there is so much uncertainty about the future … when this will end? How many people will die? How world will look after this pandemic?" (IDI-16)

Another fear that community people stated was the lack of adherence to precautionary measures, which may result in rapid transmission of virus leading to increase number of cases and loss of lives. Some participants also expressed that being more meticulous in complying with all safety measures against COVID-19 has raised their frustration and stress level. Similar thought is discussed by a respondent:

"Even if you go to the grocery shop you need to be extra careful about wearing masks, maintaining distance, cleaning hands … which add to the stress…On the other hand, other people are not following any measures which can eventually get us into trouble". (IDI-20)

While, some community members pointed out that they are frightened or scared because currently there is no treatment or vaccine against COVID-19 to control its rapid transmission. Few community individuals also shared that irrespective of disease exposure, they experience dread and anxiety from falling sick and tend to feel false symptoms of disease within them as one participant verbalized:

"If you get little flu or a sneeze, it strikes your mind towardsCOVID-19 symptoms. Even on little body ache…one feels like having COVID-19 symptoms". (IDI-19)

Further, some community members related their fear and anxiety with their risk of getting infection from workplace and transmitting it to their families, particularly elderly, children or people with compromised immune function. Some community people also voiced their concern that many private hospitals have been unable to accept and manage new COVID-19 patients which also induce a panic situation among community members. Expressing similar concerns, a participant revealed:

"I am scared about my family … My father is a chronic kidney patient; his immunity is very low. There is a fear that if he will get infected …Will there be any space in the hospital. Further, how he would go through the entire process as he is already immune-compromised…. So, there is a fear of losing my father or losing any other family member" (IDI-25)

Financial hardship amid COVID-19 affecting psychological health:

Many community members mentioned that the current pandemic has affected the global economy which will undoubtedly lead to financial losses impacting individuals financially, mostly daily wages workers. Dialogue with the community people indicated that their business is either on hold or concluded due to which individuals face difficulty in making their ends meet. Some of the community individuals also revealed that they faced layoffs or salary deductions in these challenging times. This has eventually affected the economic conditions of the family and they stated that they will have to start over again to get settled in their lives. Highlighting these points, a respondent stated:

"We have a garment shop and we thought to earn well in Ramadan. But due to COVID-19, the shop was totally closed and we were not able to earn even during the peak time. It seems that we would have to wait for a year to get back to the normal routine". (IDI-17)

Moreover, the financial hardships related with pandemic has translated into widespread emotional distress and increased risk for psychiatric condition. Similar, comments on the experience of mental distress is discussed by a participant:

"Many people have lost their jobs…no money to buy grocery and to run house…These people are suffering from anxiety, and depression. I have heard that few people have attempted suicide because they have no money to survive in this world" (IDI-5)

Restrictions to routine religious practices affecting mental health:

A number of mass prayers and gatherings in religious places are prohibited that was the source of internal satisfaction and get-together for many individuals, resulting in mental sufferings among community people. Community members verbalized that they used to spend their quality time in the prayer hall to gain strength and positive energy. Highlighting this point, a respondent verbalized

"I miss my prayer hall (Jamat Khana). Closure of prayer hall has been very difficult as there is feeling of incompleteness and dissatisfaction" (IDI-11)

During interviews, many community members also gave insight regarding traditional burial and funeral practices that has been halted due to COVID-19. They shared their concerns that burial practices such as ritual wash (ghusl), shrouding/covering the body (kafan), and funeral prayers could not be performed for the deceased in the current situation. Further, they shared that they are unable to counsel and provide moral support to the bereaved family members. This has heightened their fear and anxiety level and they are scared of dying in this way. This point was illustrated by a respondent who stated:

"I have observed that ritual wash is not given to the death body because of the current situation. I don't want to die like this. I believe burial practices and rituals are so much necessary for the deceased. (IDI-11)

Effects of media on emotions:

Community members mentioned that there is no source of entertainment because all types of media are currently displaying information related to COVID-19 pandemic. Majority of the community members shared that they are uncertain about the source and authenticity of information provided by the media. Highlighting this view, a participant expressed:

"Media has a negative effect. News headlines appearing in red color make us aggressive and anxious as red color affects our brain area. Moreover, there are many political issues in our state due to which media news is unauthentic and I don't rely on it" (IDI-17)

Many individuals shared that the repeated media exposure about COVID-19 has enhanced their psychological distress. They are overwhelmed with misinformation and rumors which impaired their concentration and daily functioning. During the interviews, a community participant shared:

"Media has negatively affected us. Media such as news channel has a devastated impact on everyone particularly senior citizens who are at home. If I talk about my mother in law, she keeps on watching news and that has disturbed her so much. She is not coming out of this trauma (COVID-19)….. She is not even coming out of her bed or not even meeting anyone due to the influence of media" (IDI-4)

Some community people notified that media can work positively on a larger scale to nurture community well-being but unfortunately no such direction has been witnessed from their end. Many community members reported that they are avoiding mass media use to promote their mental wellbeing and to remain mentally stable. Highlighting this view a participant expressed:

"I don't watch news on media otherwise I will suffer from depression. It is important that we don't watch news and take care of ourselves" (IDI-14)

Effects of social isolation on temperament, feelings and emotions:

Community members highlighted that major repercussion of the COVID-19 outbreak is restriction on socialization. The lack of social interaction has substantially influenced the behavior of people. This is

evident by greater psychological distress in the form of anxiety, anger and irritability that results in increase disputes and domestic violence within the families. Similar feelings revealed by the participant:

"Physical connection has been broken down from relatives and friends. Overall, everyone has become irritable even on minor issues because one cannot go out, vent out their feelings, and meet friends. This has resulted in disputes within the family on small concerns". (IDI-2)

Few people also expressed that working from home is another challenge as you have to show 24/7 availability. This has increased their burden and caused agitation as they find difficultly in balancing their work and home life together. Some participant also verbalized that their fears and increased agitation have resulted in sleep disruptions and restlessness. Highlighting this view a participant expressed:

"Work from home is another stressful thing for me in this pandemic because there is no time limit. Usually, after office hours we are not responsible for any task or to respond back...But now days we have to show our availability every time... even on weekends". (IDI-2)

Theme 2: Current coping mechanisms to adapt to the new reality

Getting closer to God amid COVID-19

A fundamental element in adjusting with these detrimental circumstances is coping. Each individual in the community found their own coping mechanism to deal with COVID-19 pandemic. Majority of the community members shared that in the midst of these challenging times they have come closer to God by spending more time in praying and being connected with supreme power. Few community individuals also expressed that religion and faith give them strength, and hope to manage current stressful situation. Highlighting this thought a participant discussed:

"People should come closer to their religion. If they will timely perform their prayers then it will automatically reduce more than half of their stress and anxiety" (IDI-22)

Connecting with community members, friends, and relatives:

Social-isolation is an unusual experience for an individual however, supportive environment by the family play a crucial role to cope during the outbreak. Community members shared that lock down and social distancing has positive aspects as well; as families spend more time together. Spending quality time with family and relatives can bring sense of ease and comfort. Further, during these unprecedented times, many families reported use of online technologies to interact with other relatives and friends. Expressing similar thoughts, a participant verbalized:

"In these times, families should get united .....Positive point is that people, who were unable to spend time with their family, are now spending quality time with family. Due to COVID-19, we are sitting together, avoiding mobile phones and doing table talk. BeforeCOVID-19, I was connected with the world. But I had no idea what is happening at my home. COVID-19 has brought this positive change in life" (IDI-17)

Resetting lives amid COVID-19:

Some of the respondents verbalized that setting up a daily routine like indulging in house-hold chores (cleaning and cooking) helped them to spend their time productively. Others highlighted that they spent time on hobbies such as, reading, writing, listening to music, and singing, photography, playing indoor games, performing home workouts (exercises and yoga) to stay active and motivated. While, some of the individuals utilized their time effectively in distance learning courses and gaining new skills. A participant shared:

"Now a day, I am doing a lot of activities with my daughter. We are doing art work (painting) and learning new kinds of painting. I and my daughter have also learnt baking in this lock down period. Other than that, we are playing different games such as Ludo to keep ourselves busy" (IDI-3)

Participating in mental health programs:

During these difficult times when there is deluge of information on COVID-19, community members stated that there is need to divert their minds by planning strategies and programs that promote their mental wellbeing. Some community people shared that in order to overcome anxiety, fear and stress in this pandemic, mental health programs are initiated by some community leaders and volunteers. These programs were reported to be useful as they guide people to cope in a positive way and are very helpful for those who are depressed and anxious. Highlighting these views a community participant verbalized:

"Last Sunday, I attended a psychologist session on "Mindfulness journey to a peace full life", organized by my community. It was a very good program that guided us on how to be positive. The session focused on issue of anxiety and stress in this pandemic situation. The session helped in developing a sense of optimism and broadening horizon of our perceptions. These different types of sessions are running in our community which are very helpful for us to cope in present time" (IDI-5)

Theme 3: Recommendations to address mental health of communities

Assessing mental health needs of communities

Some community members shared that mental health issues are considered as a taboo in our society and people usually avoid talking about it. In that regard, community people pointed out that it is fundamental to assess the mental health needs of the community to plan and design appropriate mental health services. Alongside some community members mentioned that these mental health programs will also be beneficial for the COVID-19 patients and their family members. Highlighting these points, a respondent stated:

"I believe that if there will be any survey or study conducted to understand the effects ofCOVID-19on general population … The results of the survey will certainly reveal that COVID-19 has more effects on mental health as compared to physiology of a person. Therefore, government should conduct the survey

and identify the house holds that have mental health issues and should send flyers or brochures that help them in coping" (IDI-15)

Delivering remote mental health interventions for elderly:

Most of the community members expressed that the long term impact of the pandemic would be stressful for every individual particularly elders who are vulnerable given their weaker immune systems. Some community members conveyed that the current pandemic has called upon great transformation in terms of delivering of remote mental health services via using basic technologies such as the telephone, SMS and radio. However, there is lack of opportunities to monitor psychosocial needs of elders and deliver support to them.

"There are different mental health programs and sessions which are organized by our Jamati institutions. But, we are not providing any mental health session for our mass population that is our senior citizens or elder people". (IDI-2)

Role of government to support mental health of communities:

During interview, community members notified that the government is only providing awareness about COVID-19 and are not focusing on the psychological needs of the community members. Few community individuals also mentioned that no funding is allocated by the government to tackle the mental health challenges of the community in this outbreak. In this context, many community people recommended the need of quality mental health services from the government at national and provincial level. Expressing similar views, a participant mentioned:

"Government is not considering mental health issues. Government should start mental health programs which could include online counseling sessions or programs that could lighten the moods of general population. They can also raise mental health awareness via talk shows or through any other activity... government can use media to raise awareness and conduct mental health programs" (IDI-7)

Discussion

The aim of the current study was to explore perceptions and attitudes of community members towards COVID-19 pandemic, and its impact on their mental well-being. The study was conducted about four months after the primary episode of COVID-19 pandemic and two months after the virus hit Pakistan. The research highlighted the mental health challenges faced by the community members in this unprecedented time, alongside strategies and future recommendation to cope with current crisis.

The study findings revealed that community participants experienced the feeling of anxiety and chaos due to outbreak. The individuals' emotional reaction and sense of danger stemmed from their concerns regarding their own health as well as their family members. However, strict compliance on safety measures served as an additional stress on them. Community people were fearful with the increasing number of cases and high mortality rate in the country due to lack of adherence to precautionary

measures. This, uncertainty of the pandemic progression and fears to settle down their life in this disaster caused more mental suffering on them. Recent studies conducted in Italy and Iran also showed similar finding that fear of COVID-19 was considerably associated with depression and anxiety [7, 11].

One of the major repercussions of the COVID-19 outbreak is the social distancing and isolation that have been widely implemented to counter the present crisis. The local government has limited social mobility by employing diverse measures such as closure of schools, colleges' and universities, banned on public gathering, religious places and unessential workplaces, restricting public transportation, travels and limiting social contacts. This has eventually hampered individual's source of happiness, connectedness and sense of internal satisfaction [12, 13]. Our study findings showed that community members felt overwhelmed by staying at home and they experienced frustration, agitation/anxiety, boredom and loneliness due to lack of physical interaction. A systematic review also reported an association between social isolation and loneliness with impaired psychological well-being [5].

The closure of prayer halls and prohibition of congregational funeral prayers during COVID-19 pandemic was another overwhelming concern for many community members. The study finding showed that community people were distressed as they were unable to bury their loved ones or counsel the deceased family members in accordance with their religious burial rites. This has raised the sense of shock, and pain among individuals in the society and they were scared of dying in such circumstances. Similar evidence was reported by Wallace et al., 2020,families that were unable to grieve in accordance with traditional funeral practices or being unable to attend a loved one's burial undergo feeling of grief and sorrow [14]

Our study found that the pandemic has caused significant financial disruption among the community members. It was identified that many families were struggling hard in present time due to financial insecurities including unemployment, and salary deduction. This has caused increased anxiety and depression among families that leads to long-lasting negative mental health consequences. Emerging evidence also suggested similar findings that most of the study participants felt anxious about economic restraint throughout lockdown and nearly one-fourth suffered from depressive symptoms [3]. Further, in the light of widening financial crisis and unpredictability surrounding this outbreak, suicidal attempts may emerge as one of the emerging threat among community [15, 16].

Interestingly, the COVID-19 has another challenge in present age of social media. Our study determined that community people being confined to four walls rely on diverse modes of media (electronic and print media, as well as social media) to receive up-to-date information but they often overloaded with false information and rumors. This overwhelming or exaggerated information from the media shaped the risk perception of community members that give rise to epidemic related emotion, creating fear, anxiety, and stress. The finding is consistent with the studies conducted in China, and India that also related increased frequency of media exposure with the higher anxiety level among public [17, 18]. Furthermore, comparable finding is also witnessed with the previous outbreak [19].

Although the COVID-19 illness in its first instance seems like a physical health crisis but it has devastating repercussion on mental health. However, in this unstable condition, many individuals have adopted diverse lifestyle-related measures to cope with the circumstances and ease the suffering. Many community members took support from their religious practices and beliefs to cope in this stressful time. Literature also reported that community adults considered current stressful time as an opportunity to deepen their spiritual faith or personal connection with God through prayer, meditation and reciting scriptures that nurtures the soul [13].

Further many isolated individuals engaged themselves in diverse tasks or activities to live their best possible life. Many community members carried on their hobbies including painting, reading, writing, listening to music or motivational videos, singing, playing an instrument, cooking, and exercise and learning new skills via online courses to spend their spare time productively. This sort of behavioral activities helped to divert the mind of the person and create positive emotions that enable individuals to bounce back from negative feelings and lessen their psychological distress [20]. Additionally, in current situation many families got chance to spend quality time with each other that brought harmony and positivity within them. This finding is also consistent with the literature [21].

The study finding revealed that the community leaders and volunteers organized different mental health sessions for community people through online medium. These sessions are essential during pandemic as it helped to reduce mental sufferings and promoted adaptive coping strategies. However, participants also notified that there is lack of provision of mental health services for elderly who lived alone and are now being forced to stay in their homes. Evidence also suggests that vulnerable groups including elders are restricted to their households during the pandemic can have devastating mental health outcomes [22]. The participants also voiced their concerns that government officials are not providing any psychological services to the community on a larger scale.

In this regard, our study also reported some recommendations to address mental health needs of the communities. Community participants suggested the need of developing mental health assessment tool along with need-based interventions at national and provincial level to mitigate long-lasting mental health effects. WHO has also emphasized to take the essential provisions to deal with the psychological consequences of COVID-19 [23]. Our study participants suggested the need of remote mental health programs for entire community particularly elders via using basic technologies such as the telephone, SMS and radio. As mentioned by Ho et al., 2020 in this period of innovation, healthcare services can provide remote psychological support services for community that are affected by the COVID-19[12]. The present study also suggested the need of psychological help lines for mental health counseling related to COVID-19. Recently, the government of India has introduced helpline numbers to deliver guidance and counseling services. Therefore, as suggested by our study that allocation of proper funding by the government is pivotal to provide quality mental health services.

This study has some limitations. Given the nature of disease all interviews were conducted online so researcher was unable to capture non-verbal cues of participants. Besides, the researcher was unable to

perform focus group interviews which would have presented in-depth insight. Lastly, future studies are required to understand psychological impact of this pandemic on the community across time.

Conclusion

This study provides detailed understanding about community experiences and diverse pandemic-related mental health challenges among young, middle and older age adults. Moreover, finding suggests that during the outbreak continuous support for psychosocial well-being in all age groups should be of utmost priority. Additionally, the current disruptive situation calls for the initiation of novel innovative opportunities to provide mental health facilities that foster effective utilization of available resources. The finding of this study guide the development of context-specific mental health programs to overcome repercussion of pandemic. These psychological interventions will not only be beneficial in the short term during the COVID-19 pandemic, but could offer long term advantage of strengthening the system.

Abbreviations

DI: In-depth Interviews, M: Male, F: Female, COVID-19: Coronavirus disease of 2019

Declarations

Acknowledgments

Authors' contributions

NAA & ASF designed the study. NBA, RF, and SNM collected the data. NAA & ASF analyzed and interpreted the data. NAA wrote the first draft of the manuscript. ASF has given critical feedback. All authors contributed to reviewing and editing the manuscript.

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Availability of data and materials

The datasets was collected and analyzed and can be made available from the corresponding author on reasonable request.

Ethics approval

Written informed consent was taken from the participants. Ethical approval for this study was obtained from the Aga Khan University Ethical Review Committee (AKU-ERC) [2020-4825-10599].

Consent for publication

Written informed consent for publication was obtained.

Competing interests

The authors declare that they have no competing interests.

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Tables

Table 1 Study participants for In-depth Interviews

In-depth interview Participants	Total IDIs= 27	Male (M)=12; Female (F)=14
Young adults (18 -35 years)	12	Male=6; Female=6
Middle-aged adults (36-55 years)	8	Male=4; Female=4
Older adults (> 55 years)	7	Male=3; Female=4

Table 2: Characteristics of In-depth Interview (IDI) Study Participants (IDI=27)

Characteristics of participants (n=27)		n(%) or mean ± SD
Gender	Female	14 (52.0%)
	Male	13 (48.0%)
Age		39.6 ± 13.9
Education level	Matriculate	1 (4.0 %)
	Intermediate	4 (15.0%)
	Bachelors	13 (48.0%)
	Masters	9 (33.0%)
Occupation	Private Job	15 (56.0%)
	Self-employed	3 (11.0%)
	Home maker	6 (22.0%)
	Student	2 (7.0%)
	Retired	1 (4.0%)

Table 3: Themes and categories

Themes	Categories
Impact of COVID-19 on mental health of the general communities	· Increased anxiety and fear · Financial hardship amid COVID-19 adversely affecting psychological health · Restrictions to routine religious practices affecting mental health · Effects of media on emotions · Effects of social isolation on temperament, feelings and emotions
Current coping mechanisms to adapt to the new reality	· Getting closer to God amid COVID-19 · Connecting online with community members, friends, and relatives · Resetting lives amid COVID-19 · Participating in mental health programs
Recommendations to address mental health of communities	· Assessing mental health needs of communities · Delivering remote mental health interventions for elderly · Role of government to support mental health of communities

Supplementary Files

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- Additionalfile1.docx