

Navigating the Challenges of COVID-19: A Guide for Mental and Behavioural Health

Sangeeta Kakkar^{1,*}, Ashu Kumari²

Abstract

The COVID-19 epidemic has posed unique encounters globally, impacting various aspects of daily life, including mental and behavioral health. The present study attempts to prepare a guide with ways and means to navigate the challenges of the COVID-19 pandemic. This guide provides comprehensive insights and strategies for individuals to navigate these challenges effectively. The study began by addressing the psychosomatic effect of the pandemic, such as increased anxiety, depression, PTSD, OCD, and feelings of isolation. The guide discussed the prominence of acknowledging and validating these emotions while offering coping mechanisms like mindfulness, relaxation techniques, and maintaining social connections virtually. Furthermore, the guide investigated the behavioral changes brought about by the pandemic, such as disruptions in routines, sleep patterns, and coping mechanisms. It emphasized the significance of establishing new routines and upholding a healthful regime by practicing activities like acceptance and mindfulness exercises, art therapy, and guided imagery to cater to the cognitive domain. In contrast, nutrition through a healthy diet and regular practice of yoga asanas will help to enhance the physical, and biological domain of an individual. This will safeguard whole advancement and inculcate resilience and adaptive coping for an individual when facing an adverse situation. In conclusion, this guide served as a worthy resource for people who look for to prioritize their mental and behavioral well-being within the ongoing commitments of the COVID-19 pandemic. Urgently reorganizing psychological health services for rural populations, policymakers, healthcare providers, and community stakeholders is essential to meeting unmet demands now and preparing for obstacles in the post-pandemic future. By implementing the strategies outlined in this guide, individuals can nurture resilience, adaptability, and holistic well-being during these uncertain times.

Keywords: Mental health, emotional health, behavioural health, challenges, COVID-19

INTRODUCTION

The virus causes COVID-19 is the SARS-CoV-2 virus, also known as the severe acute respiratory system coronavirus. On January 7, 2020, a new coronavirus (2019-nCoV) was identified as the ill

health; the World Health Organization after that named it COVID-19. The challenges that most patients faced during COVID-19, that have slightly moderate symptoms of breathing while recuperating without needing additional care. Some individuals, nevertheless, might become sick and take medicinal treatment. It is an intense illness which more prone to strike an elder person or someone underlying illnesses such as diabetes, heart disease, persistent pulmonary disease, or cancer. People of any age have contracted COVID-19, which can lead to severe sickness or even mortality. COVID-19 significantly impacted a critical scenario on

*Author for Correspondence

Sangeeta Kakkar

E-mail: drsangeetakakkar@gmail.com

¹Assistant Professor, Department of psychology, Shoolini University Solan, Himachal Pradesh, India.

²Assistant Professor, Department of psychology Sharda University, Greater Noida

Received Date: June 10, 2025

Accepted Date: July 07, 2025

Published Date: November 12, 2025

Citation: Sangeeta Kakkar, Ashu Kumari. Navigating the Challenges of COVID-19: A Guide for Mental and Behavioural Health. International Journal of Behavioral Sciences. 2025; 2(2): 66–80p.

public mental and behavioral health as well as disturbing daily life worldwide. The COVID-19 pandemic has been deemed to be a Health Emergency of International Concern by the World Health Organization (WHO) in 2020 [60].

Global Impact of COVID-19 on Mental Health

The COVID-19 disease unfolded as a universal calamity, impacting virtually every corner of the world, and presenting unprecedented challenges on multiple fronts. Globally, the COVID-19 widespread had a distressing influence on people's disturbing, behavioral, and mental health. Millions of people have been impacted by COVID-19 widespread, which represented a worldwide socioeconomic emergency (Buheji et al., 2020) [11]. According to a WHO report, during the primary year of the endemic, there was an ample 25% rise in the prevalence of restlessness and despair worldwide (Racine et al., 2021) [41]. From a healthcare standpoint, countries worldwide faced the daunting task of managing the quick spreading virus, implementing various procedures such as restrictions on travel, lockdowns, immunization drives to lessen and limit its effects. Due to the global epidemic's burden on healthcare infrastructure, various regions experienced shortages of hospital beds, medical supplies, and healthcare workers (Cabe et al., 2020) [7].

Pharmaceutical professionals also reported psychological factors including social isolation, fear of infection, sorrow, financial difficulties, and feeling exhausted as important highlights that contribute to anxiety and depressive syndromes (Dubey et al., 2020) [20, 23].

Economically, pandemic triggered widespread disruptions, causing businesses to shut down, supply chains to falter, and millions of people to lose their jobs or face income instability. Across the country, almost 45% of households said their earnings had diminished from the year before. Many companies, including hotels and airlines, reduced employee compensation and let go of staff members. The economic fallout was particularly harsh for vulnerable populations and sectors such as tourism, hospitality, and small businesses (Goyal., 2020) [26].

Education also felt the impact as schools and universities shifted to remote learning, highlighting disparities in access to technology and digital resources among students. The pandemic exposed inequalities in educational opportunities, with marginalized communities facing greater challenges in adapting to online learning environments (Kuhfield et al., 2020) [33].

Amid these challenges, the pandemic spurred global collaboration and scientific innovation, leading to the instant expansion and distribution of COVID-19 shots. (Moradi, 2020) [39] recovered that countless people have experienced the struggles of sustained isolation from society, the psychological ramifications of disease, and the anguish of losing loved ones. The COVID-19 deadly disease serves as a recap of the connection of nations and the requirement for coordinated efforts to safeguard public health, revive economies, and build a more resilient future. Even though, there have been significant barriers to accessing mental health care. Psychological concerns such as mental and behavioral health issues have emerged as a major worry amid the disarray.

Indian Perspective of the COVID-19 Epidemic

The situation in India has been alarming, as India has become the second highest country after the USA (Chhetri et al., 2021) [15]. For India, COVID-19 has been a catastrophe of remarkable amounts. Furthermore, Reddy et al., (2020) [27] explored that the load of psychological and behavioral turmoil is in the range of 9.5 to 102 per 1000 people in India. An estimated 35% more people are reported to be suffering from anxiety and sadness because of the epidemic. Amongst them, Indian children and youth may experience lasting effects from COVID-19 on their psychological health and general health (Shah et al., 2020) [47]. It was recorded by the Indian Psychiatry Society that 20% rise in cases of psychological illness. The COVID-19 virus has had an intense influence on India and affected numerous attributes of life and society. Malik, (2022) [36]

addressed that from the perspective of healthcare, the country faced significant challenges in managing the surge in cases, especially during the second wave. Hospitals were overwhelmed, medical resources were strained, and frontline healthcare workers worked tirelessly to save lives. The pandemic also highlighted existing disparities in access to healthcare, with marginalized communities facing greater vulnerability. Economically, India experienced disruptions in various sectors, with businesses, particularly small and medium enterprises, grappling with closures and financial losses. As per the March FICCI study conducted by Biman Mukherji on March 23, 2020, as much as 53% of Indian companies have said that coronavirus-induced shutdowns have had a particular degree of influence on their operations. The "Centre for Monitoring Indian Economy's" Vyas, Mahesh (April 21, 2020) [56] reports that by April 24, the unemployment rate had increased by over 19% in a single month, reaching 26% nationwide. Almost 140, 000, 000 Indians lost their employment during the shutdown. Many people experienced employment losses and economic instability because of lockdowns implemented to stop the virus's expanded, which exacerbated already-existing disparities. In developing nations, in particular, danger is increased due to inadequate socio-economic factors. According to UN News, the impact of COVID-19 might result in the loss of 195 million jobs. The economically disadvantaged may commit suicide at higher rates as a result of this. Man kills himself in Madhya Pradesh after being placed under quarantine. (Balaji et al., 2020) [3]. Due to the COVID-19 pandemic, students have experienced severe suffering as a result of the closure of educational institutions in March 2020, which created a disruption in their usual academic schedules. It is certain that earlier research has shown the detrimental psychological effects of the epidemic on student mental health problems. Students are particularly vulnerable when there is a lack of regular student involvement, disengagement from friends and partners, a delay in course completion that reduces their competitiveness in the job market, and uncertainty about the future that causes frustration, loneliness, and worry. (Chhetri et al., 2021) [15].

Psychological Issues Faced by Different Groups of Community

The COVID-19 pandemic has influenced many different groups of individuals, causing psychological disorders.

1. *The overall Population:* The COVID-19 outbreak has had a significant influence on the typical inhabitant's psychological wellness and well-being. If an elderly person contracts COVID-19, they are further prone to having a critical disease. Their age-related health issues and compromised immune systems render them more vulnerable. During the pandemic's first year, prevalence of the feelings of anxiety and depressive disorders increased. Isolation from society, worry about infection, sorrow, struggle with money, and job restraints are all attributed to this increase. This leads to social alienation and a lack of support networks emotions of loneliness as well as stress.
2. *Health Care Workers:* Throughout the pandemic, healthcare personnel, particularly those on the front lines, experienced extreme stress. Bhutkar MV. (2011) [9] Considering lengthy working hours, exposure to the infection, and their experience of witnessing extreme disease and death have influenced their emotional health. According to research, these committed individuals are more prone to encounter (PTSD) post-traumatic stress disorder indicators, anxiety, and burnout. Frontline health experts had extreme strain, and tiredness was a leading cause of suicidal ideation.
3. *The University and Collegiate Students:* Adolescents had enormous obstacles during the outbreak of disease. The obstacles created by routine changes, social isolation, and closures of schools have had a significant influence on their well-being. According to research, these alterations may predispose youngsters to greater worry, stress, and mood disorders. Adolescents have become more vulnerable to depression and committing self-harm actions. Through the pandemic, students at colleges faced enormous hurdles. The transition to distant learning, social isolation, and uncertainty about their academic future have had an impact on their well-being. Owing to research, these sorts of problems are causing an increase in anxiety, sadness, and loneliness among college students. Children experienced anxiety due to school closures, distant learning, and unclear futures. Their lack of social connections harmed their psychological stability.

THE RATIONALE OF THE STUDY

The pandemic has brought about unprecedented amounts of stress, anxiety, despair, and other mental health issues brought on by things like social isolation and a fear of being sick, economic uncertainty, and disruption of daily routines. The objective of "Navigating the challenges of COVID-19: A Guide for Mental and Behavioural Health" is to provide people with all the tools they need to tackle with the behavioral and psychosomatic consequences of the pandemic. Concerning addressing stress, anxiety, despair, and other psychological repercussions of the epidemic, this guide undoubtedly provides evidence-based recommendations. It highlights attention to the significant results of COVID-19 on emotional health globally and emphasizes the necessity of efficient treatment approaches. The study highlights the difficulties experienced by mental health practitioners, projects a spike in the burden of mental illness following the pandemic, and calls for an immediate restructuring of mental health systems. It could also provide advice on how to keep up well-being, develop resilience, and get support from professionals when necessary. Through proactive resolution of these issues, this guide seeks to enhance mental health and lessen the detrimental outcomes of the outbreak on the mental health of people.

IMPORTANCE OF TIMELY INTERVENTIONS AND SUPPORT

As stressed in the review paper "Navigating the Challenges of COVID-19: A Guide for Mental and Behavioral Health, " timely treatments and support are essential to reducing the pandemic's negative effects on mental health. These actions are crucial for several reasons:

1. *Preventing Escalation:* Mild mental health problems don't have to worsen into more serious illnesses if they are identified early and treated. People can obtain the right care and assistance if their symptoms are treated quickly.
2. *Reducing Long-Term Impact:* Pandemic-related stresses can have a major long-term impact that can be considerably lessened through effective treatments including counseling, cognitive-behavioral therapy (CBT), and psychosocial interventions. These coping mechanisms enable people to manage their anxiety, depression, and other mental health issues.
3. *Improving Resilience:* By providing people with coping skills, prompt support helps people become more resilient. It aids in stress adaptation, emotional stability, and uncertainty navigation.
4. *Assisting disadvantaged Populations:* The pandemic's effects on mental health disproportionately affect marginalized and disadvantaged populations. Targeted interventions can offer customized assistance and bridge gaps in care accessibility.

CHALLENGES AND GAPS

The study points up several deficiencies and difficulties with psychological health both during and after the COVID-19 pandemic:

1. *Lack of Preparedness:* The section emphasizes how little mental health concerns were handled during the epidemic due to a lack of preparation. Inadequate infrastructure, a lack of human resources, and mental health professionals' (MHPs') fatigue were problems in many nations. This gap underscores the need for better planning and resource allocation.
2. *Interrupted Mental Health Services:* Due to the pandemic, access to care was restricted and mental health services were interrupted. Service disruptions may result in neglected or misdiagnosed mental health problems. Thus, it's essential to make sure mental health treatments continue throughout emergencies.
3. *Increased Prevalence of Mental Health Issues:* Research points to an emotional epidemic curve that indicates a post-pandemic increase in the burden of mental health issues. More than half of the population may have mental health issues; thus prompt treatments are required. Therefore, addressing this gap requires proactive measures to support mental well-being.

4. *Issues in the Post-Epidemic Period:* Present mental health services must be reorganized to fulfil unmet demands and get ready for new challenges. There are several obstacles, including overworked services and a rise in the frequency of mental health problems. Hence, policymakers and health systems must adapt to meet these challenges.

METHODOLOGY

The current study undertakes a thorough analysis of the body of research on mental health issues and treatments related to the COVID-19 pandemic. Utilizing PubMed and Google Scholar databases, a systematic search was conducted using various permutations of key terms like "new coronavirus," "COVID-19," "nCoV," "SARS-CoV-2," "mental health," "psychiatry," "psychology," "anxiety," "depression," and "stress." This search encompassed a wide array of sources including published journal articles, newspapers, magazines, and official websites of health organizations include "new coronavirus," "COVID-19," "nCoV," "SARS-CoV-2," "mental health," "psychiatry," "psychology," "anxiety," "depression," and "stress," according to organizations like the World Health Organization and the Government of India's Ministry of Health and Family Welfare. The search technique included a variety of keyword combinations, geographic regions, and vulnerable groups. Upon analysis, the findings were synthesized into two main sections: an examination of psychological challenges during the COVID-19 pandemic, mainly among susceptible clusters, and an analysis of recommended interventions at both global and national levels, with a focus on India. Drawing from this synthesis, a comprehensive guide titled "Navigating the Challenges of COVID-19: A Guide for Mental and Behavioral Health" was developed to provide insights and recommendations for addressing the mental health implications of the pandemic.

THERAPEUTIC APPROACHES

Psychoeducation

Psychoeducation is an approach used to mitigate psychological and behavioral problems. It is a methodical approach to information sharing that surpasses simple information exchange, in which the therapist informs the patient about their diagnosis, symptoms, and treatment plan. It can be used with individuals, families, or groups. The therapists assist participants in finding social and emotional support as well as in learning coping mechanisms to help them deal with life's obstacles (Wetik et al., 2021) [57]. Enhancing treatment adherence and assisting the client in accepting and adjusting to their diagnosis are the two main objectives of psychoeducation. Comprehending their treatment helps clients act on advice more effectively. Psychoeducation is essential to help clients comprehend their mental health concerns, by giving them vital aspects that lessen confusion and dread. Hence, people take an active role in their healing when they recognize the basis of their symptoms. So, better decision-making, following treatment programs, and general well-being are all facilitated by this empowerment. Psychoeducation also tackles the humiliation ascribed to psychological health by talking to clients and their families because knowing makes issues more normal and motivates people to ask for assistance.

Psychoeducational treatments have demonstrated the possibility of improving student mental health outcomes by highlighting the significance of evidence-based coping techniques and

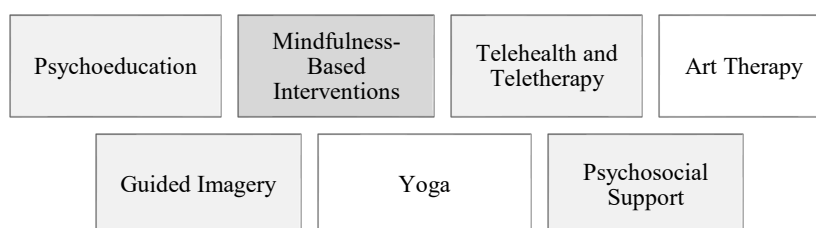


Figure 1.

mitigating stigma (Emmelkamp et al., 2014) [21]. In addition, psychoeducational webinars have established efficacy in augmenting knowledge regarding strain administration and mitigating stress, a methodical approach to information sharing that surpasses the global epidemic. (Sangster et al., 2020) [45]. Many researchers have emphasized the detrimental psychological effects of the epidemic on the general public. The epidemic also presented significant obstacles to the establishment of mental health treatments. All things considered, the post-COVID-19 health impacts may lower people's quality of life, lead to mental health problems, and increase the strain on healthcare systems. To address future health issues, these individuals need comprehensive rehabilitative and psychological assistance. Resilient and effective healthcare systems are also required to guarantee timely responses through targeted intervention protocols.

Although client education was not prioritized in early psychotherapies, this perspective has changed. According to the research, after receiving psychoeducation, there was a rise in the proportion of people who participated with a decline in the frequency of indicators and symptoms connected to psychological disorders that are emotional. When the COVID-19 epidemic struck, psychoeducation significantly reduces the symptoms of participant's emotional and mental problems (Arfianto et al., 2022) [2]. Improved treatment compliance and results for several diseases, such as stress, depression, and apprehension, have been correlated with psychoeducation.

Mindfulness-Based Interventions

Throughout the COVID-19 epidemic and beyond, mindfulness is one strategy that might support psychological health while seeking expert treatment for more severe symptoms. The deliberate attention to sensations in the present moment without elaboration, judgment, or reaction is known as mindfulness (Matos et al., 2015) [38]. Reduced stress, worry, and sadness and an increased capacity to appreciate life are all benefits of mindfulness cultivation for mental well-being (Irving et al., 2009) [31]. In particular, mindfulness encourages emotions and self-regulation, which may help control the signs of anxiety, depression, or other mental illnesses and encourage better choices when it comes to eating, exercise, and drug use. Additionally, practicing mindfulness increases mindfulness of one's body, including feelings and physical perceptions, thereby encouraging a more balanced sense of self and is especially beneficial in times of neediness.

There may be a workable, affordable way to mitigate the psychosocial impacts of COVID-19 with mindfulness meditation (Zhu et al., 2021) [63]. Virtual mindfulness is an increasingly extensively accessible device that may lessen psychological suffering amid this isolated public health catastrophe, according to another study on mindfulness. Clinicians and patients may find guidance from the compiled online mindfulness materials offered (Marino et al., 2021) [37]. Some mindfulness-based therapies, such as Mindfulness-Based Stress Reduction (MBSR) and Mindfulness-Based Cognitive Therapy (MBCT), that have undergone extensive clinical study may be particularly helpful in fostering resilience and improving mental health in times of stress. Since these eight-week sessions are frequently offered online, they satisfy the coronavirus-related physical distancing criteria. Many formal (like breathing) and informal (like walking, and eating) meditation techniques are used in these programs to assist manage stress, lessen anxiety and depression, and support resilience and psychological health. According to another study, meditation is particularly appropriate as a means of dealing with and avoiding mental health problems. Additionally, it can be used to advance wellbeing and provide the framework for suppleness and adaptability in the face of enduring uncertainty and major modifications to the social, economic, and perhaps political structures that may emerge as this pandemic develops. (Antonova et al., 2021) [1]. Through experimental observation, it was shown that several patients had anxiety and trouble sleeping after receiving isolation therapy. Certain drugs that aid in sleep may make the condition worse by impairing breathing. Extended bedside tutoring might make people worse. The gradual muscle relaxation method is quite beneficial in these situations (Liu et al., 2020) [34]. Progressive muscle relaxation (PMR), deliberate tensing and relaxing of different body muscle groups. It was

presented by Jacobsen in 1938, and it provides a significant release of strain and unease for both the body and the mind. (Chopra, 1972) [16]. The person consciously contracts a particular muscle group (such as clenching their fists or contracting their leg muscles) for five to ten seconds, and then they release the contracted muscle group entirely, allowing it to fully relax. In addition to improving sleep quality and lowering anxiety and stress levels, PMR also strengthens the immune system. Additionally, PMR lessens the physical discomfort brought on by COVID-19. It is advised that the patient and caregiver learn the PMR regimen, perform it themselves, and compare it to other adjuvant therapy.

Telehealth and Teletherapy

The provision of treatment of mental health during the period of COVID-19 epidemic has been made possible in large part by telehealth services. According to examinations, telehealth—especially video telehealth—is practical and well-received by physicians and patients equally. (Zangani et al., 2022) [62]. It offers advantages including enhanced participation, ease, and a pleasant consultation experience. As a result of the US Military Health System's transition to telehealth, the utilization of telehealth has significantly intensified, particularly in behavioral health services, which is in line with expanding access to treatment. (Shelton et al., 2020) [48]. Furthermore, studies show that access to telehealth services has decreased therapy attrition rates, with patients using telemedicine to access therapy being less likely to stop treatment early. (Guarnieri et al., 2015) Additionally, telemedicine has been linked to better care quality and continuity for long-term illnesses like high blood pressure and diabetes, as well as enhancing the affiliation between care endurance and health outcomes. (World Health Organization, 2016) [59].

The COVID-19 epidemic has made virtual therapy sessions essential to maintain therapeutic relationships and address emotional needs (Békés et al., 2020). Psychologists have looked at creative ways to meet emotional demands and preserve therapeutic partnerships. (Simpson et al., 2021) [50]. Artificial intelligence (AI) may be used to detect discomfort in real time during virtual group interactions, allowing for proactive assistance. To overcome constraints and provide more control over sessions, psychologists have said that video conference psychotherapy (VCP) needs improved technology features. (Cataldo et al., 2021) [12]. Therapists wanted to replicate important aspects of in-person treatment in the virtual setting by enhancing emotional communication and involvement with patients through features including enhanced eye contact, screen control, and interactive interfaces. (Robledo et al., 2021) [43]. These developments in virtual therapy could deepen therapeutic bonds, improve family functioning, and help individuals manage emotional discomfort efficiently.

Art Therapy

During the COVID-19 epidemic, art therapy is an effective method for strengthening mental and behavioral health via artistic endeavors. (Chaudhury & Banerjee, 2020) [14]. The foundation of therapeutic art is that creative expression may support mental health and recovery. Art therapy seeks to assist people in finding new ways to express themselves, grow as people, and learn coping skills via the artistic process. According to Usiskin & Lloyd (2020) [54] adapting Art Therapy for Social Engagement Across Borders', how their work with Art Refuge supported individuals and families experiencing displacement manage isolation through creative and digital psychosocial opportunities that fostered emotional resilience and engagement.

It entails employing diverse kinds of art (such as sketching, painting, sculpture, or even music) to explore emotions, thoughts, and experiences. After creating art, individuals examine it to identify recurring themes or conflicts that influence their attitudes and actions.

The practice of art offers a secure environment for people to express emotions through nonverbal means resulting in enhanced of oneself and reconciliation. It promotes emotional release, stress

relief, self-discovery, diversion, and empowerment. Artmaking gives people a sense of control over their situations, which empowers them. Another study found individuals felt their identity and self-image was strengthened and that they felt more positive through art therapy (2016, Malchiodi) [35]. Making art aided with stress reduction, relaxation, and control building. Physically isolated people were connected through virtual art therapy sessions. By displaying their artwork, participants promoted a sense of belonging and encouragement to one another. Also, during in COVID-19 art therapy connected fear to a positive sensory experience, providing the individual with stronger coping skills and increased control over emotions (Hass-Cohen et al., 2008) [29].

Sculpting promotes fine motor skill development, emotional release, and experience symbolism. Previous research revealed that participating in artistic pursuits for less than an hour can reduce the psychological stress and enhance psychological wellness despite a lack of artistic experience or skill (Kaimal et al., 2016) [32].

Art therapy is appropriate for individuals of any age and supplements regular conversation therapy (Gladding et al., 2021) [24]. Throughout these difficult times, participating in art may be an effective technique for fostering psychological well-being and perseverance (Fancourt et al., 2019) [22].

Guided Imagery

Guided imagery approaches incorporate simple visualization, direct suggestion with images, metaphor, narrative, fantasy exploration, dream interpretation, painting, and active imagination (Hackmann et al., 2011) [28]. In this method, aspects of the unconscious mind appear as mental pictures that could connect with our conscious awareness. Attention is drawn to the nuances of the senses- sight, sound, smell, and touch to fully engage in a relaxing or uplifting experience. Self-directed visualization, audio recordings, or a therapist can all help with guided imagery.

It could help with a variety of stress-related health issues. Guided imagery has helped with stress reduction, potentially lowering blood pressure levels during lockdown (Gordon et al., 2021) [25]. It also promotes relaxation; it may alleviate muscular tension discomfort. Practicing guided imagery before bedtime helps to relax and improve sleeping. Guided visualization techniques could help to bring emotional relaxation and alleviate symptoms. It may help both skin rashes and irritable bowel syndrome illnesses. Some research suggests that it can help manage autoimmune illnesses. e.g., Rheumatoid Arthritis, and Crohn's Disease. Guided visualization may help reduce symptoms such as chronic allergies, hives, and asthma. Furthermore, guided imagery promotes physical relaxation while allowing clients to access higher levels of wisdom stored in their subconscious brains (Baldwin, 2023) [4]. Thankfully, guided imagery is a really easy practice that has beneficial effects when performed at home. People can also practice it at home in a peaceful area by closing their eyes and inhaling deeply several times. Imagine a calm environment, such as a lovely garden, a peaceful lakeside, or a beach with gentle waves. Visualizing the colors, sounds, smells, textures, and even tastes that are connected to this image to stimulate the senses. They can also document their experience later. To help patients manage the impacts of medical and mental health disorders, guided imagery is frequently utilized in therapeutic and healthcare settings. It has been increasingly used in hospitals as a holistic therapy option due to its multiple established health advantages.

Psychosocial Support

Throughout the COVID-19 epidemic, virtual social contacts have become an essential tool for overcoming feelings of isolation. (Riva et al., 2020) [42]. These interactions have been shown to promote good affect, trust, like, and cohesiveness by promoting physical synchronization and emotional alignment between people. Furthermore, research highlights the significance of technology in preserving social interaction and unity during times of seclusion. The adverse psychological consequences of the epidemic could be lessened by putting policies in place to

encourage virtual social contact, particularly for vulnerable groups like senior citizens and childcare providers (Beaunoyer et al., 2020) [5]. By virtual platforms for social interaction, people have improved their mental well-being and fought against the feelings of isolation and sadness that the continuing crisis has aggravated (Boursier et al., 2020) [10].

Yoga Asanas

During difficult times, such as the COVID-19 epidemic, yoga could be an effective practice for supporting mental health, improving immune function, and maintaining overall well-being (Bharshankar JR et. al., (2003)) [8]. However, it's essential to practise safely and considerately, especially if the person is recovering from COVID-19 or has any underlying health conditions. Lockdown and social distance standards in COVID-19 are severe condition to handle in a matter of months. It is crucial to understand this in order to practice yoga in the contemporary environment. According to Collins et al. (1998) [17, 19], yoga practices improve muscular strength and flexibility, support and enhance cardiovascular function and metabolism, aid in the treatment and recovery from addiction, lessen stress, anxiety, depression, and chronic pain, enhance sleep patterns, and improve general well-being and quality of life. Certain styles of yoga Desikachar k (2005) [18], such as power yoga and ashtanga, require a lot of physical exertion. One of these styles can be practiced increasing muscular tone. Several poses like Surya Namaskar, Paschimottanasana, Halasana, Dhanurasana, Chakrasana, Padmasana in (Lotus Pose) give strength and endurance advantages.

Here are some yoga asanas (poses) in elaborative way that could be helpful during this time: Some yoga asanas (poses) that help to reduce anxiety, stress, and tension and increase general well-being:

Pranayama (Breathing Exercises)

Extended bedside teaching might make people worse. The gradual muscle relaxation method is quite beneficial in these situations. Repeat a few times.

Anulom Vilom states: (Alternate Nostril Breathing): Sit comfortably, close one nostril with your thumb, inhale through the other, close with your ring finger, and exhale through the opposite nostril. Repeat, switching nostrils.

Surya Namaskar, also known as Surya (or Sun Salutation)

This series of 12 yoga positions is ideal for warming up the body, stretching muscles, and increasing circulation. It contains postures such as Tadasana (Mountain Pose), Uttanasana (Standing Forward Bend), Bhujangasana (Cobra Pose), and others.

To practice Paschimottanasana

(Seated Forward Bend), sit on the floor with legs outstretched in the front. (Shivakumar & Balakrishna, 2022) [49]

- Inhale and straighten the spine.
- Breathe deeply and lean forward from the hips, aiming for the toes.
- Maintain the spine straight and avoid strain.
- Continue for some sighs, then exhale.

Halasana

(Plow's Posture) involves lying on the back with arms beside the body. (Wile, 2014) [58].

- Stretch the legs over the head, hoping to make contact with the earth behind.
- Utilize the hands to support the lower back.
- This position relaxes the mind and improves circulation.

Dhanurasana (The Bow Pose): (Palanimeera & Ponmozhi, (2023)) [40].

- Relax on the floor with arms beside the body.
- Raise the knees and reach back to support the ankles.
- Inhale deeply and lift the chest and thighs off the ground.
- The seated position expands the chest, strengthens the back, and stimulates the mind.
-

Chakrasana (Wheel Pose): (Run-Kowzun, 2020) [44]

- Lie on the back, knees bent, and feet hip-width apart.
- Hold the hands beside the ears, fingers pointing toward the shoulders.
- Lean onto your hands and feet to elevate your hips and chest off the ground.
- This backbend stimulates the body and fosters emotional harmony.

Padmasana in (Lotus Pose): (Sukumaran et al., 2020) [51]

- Position yourself on the floor with your legs crossed.
- Place your right foot on your left thigh and vice versa.
- Keep the back upright and hands on the knees.
- Padmasana is a tranquil stance. that enhances focus and inner peace.

Sengupta, (2012) [46] demonstrated that obtaining the benefits of Pranayama requires a thorough comprehension of the practice. Every asana must incorporate pranayama to be completed, as it is a full practice in and of itself Zaccaro et al., (2018) [61].

RESULT AND DISCUSSION

Misery, worry, and posttraumatic stress disorder have increased in India because of COVID-19, which has significantly impacted behavioral, mental, and emotional health Bhagat & Kim, (2020) [6]. Self-destructions associated with COVID-19 have also become more recurrent. Healthcare professionals are significantly affected because they experience higher levels of anxiety and sadness, especially those who have front-line duties (Chander et al., 2021) [13]. In addition, the general public is experiencing greater levels of strain, unease, and unhappiness as a result of the epidemic; women, housewives, and frontline workers are disproportionately impacted (Tomar, 2020) [53]. In a similar vein, Suryadevara et al., 2020 [52] observed significant levels of trauma, worry, and depressing symptoms in pharmacy students. A narrative review on "The Worldwide Effect of COVID-19 on the Mental Health of the Entire Population" was carried out by Vishwakarma et al. in 2022 [55]. The results demonstrated that people's mental health was significantly impacted by the COVID-19 epidemic. rising prevalence of self-harm, dangerous drug and alcohol use, depression, anxiety, and loneliness as well as post-traumatic stress disorder (PTSD). Beyond COVID-19 infection, susceptible groups with mental health issues include healthcare professionals, those with mental illnesses, migrant workers, and students in a variety of professions. Even after the epidemic ends, its long-term consequences on mental health are anticipated to endure.

These findings emphasize how important it is to provide psychological treatments in order to address the pandemic's consequences on mental health. Policies and strategies for intervention have been utilized worldwide to manage issues related to mental health. In this aspect, online communication has played a significant influence. State-specific treatment plans, telepsychiatry consultations, and a toll-free helpline for behavioral and psychiatric problems have all been released by the Indian government.

CONCLUSION

Addressing the issue of mental health requirements of India's populations in the post-COVID period requires a multidisciplinary strategy encompassing research, policy improvements, and outreach to the community. The growth of need-based treatments customized to vulnerable groups, as well as suitable risk dissemination techniques and an optimistic outlook, play a decisive role in

Table 1. Recommendations and Future Directions.

Recommendations and Future Directions	Key Points
1. Equitable Vaccine Distribution	• Prioritize vulnerable groups and underserved communities. • Ensure equitable access to vaccines.
2. Easing Restrictions	• Balance public health measures with social and economic needs. • Consider easing restrictions as hospitalization and mortality rates fall.
3. Education and Harm Reduction	• Shift from punitive to educational approaches. • Promote awareness and preventive behaviors.
4. Encourage Outdoor Activities	• Outdoor settings pose lower transmission risks. • Encourage safe outdoor activities.
5. Reopen Schools Safely	• Prioritize reopening schools with safety measures. • Consider mental health implications for students.
6. Address Economic and Psychosocial Consequences	• Recognize the long-term effects of lockdowns on financial stability and mental health. • Implement targeted support programs.
7. Rethink Surface Disinfection Measures	• Focus less on surface disinfection, as evidence suggests limited transmission through surfaces.
8. Reassess Testing Policies	• Regularly evaluate testing strategies based on evolving evidence. • Optimize testing resources.
9. Increase Access to Outpatient Therapies	• Enhance the availability of mental health therapies and prophylactics. • Support outpatient care.
10. Prepare for Future Pandemics	• Learn from COVID-19 experiences to better prepare for future health crises. • Strengthen global health systems and surveillance.

leading the allocation then prioritisation of mental wellness resources to support the most disadvantaged. Considering the changing nature of healthcare delivery, the importance of telemedicine and digital health equipment in meeting the psychological, emotional, and behavioral health requirements is also covered. There are suggestions for improving mental, emotional, and behavioral health support systems and fostering general well-being in post-pandemic India for legislators, medical professionals, and community leaders. In the wake of the COVID-19 epidemic, the chapter fosters a holistic methodology to healthcare by offering insightful information on recognizing, managing, and minimizing mental, emotional, and behavioral problems.

Acknowledgment

We are deeply appreciative of everyone who graciously collaborated with our study. This study would not have been possible if they had not agreed to participate. We sincerely thank our colleagues and academic advisers for their continuous support and direction during this effort. Their insightful observations and helpful criticism have greatly increased our comprehension of this topic. We also thank our research team members for their committed work and spirit of cooperation during the project. Finally, we would like to thank the reviewers for their insightful comments during the manuscript's preparation.

Funding

This research received no funding.

Conflict of Interest

There is no conflict of interest in the present study.

REFERENCES

1. Antonova, E., Schlosser, K., Pandey, R., & Kumari, V. (2021). Coping with COVID-19: Mindfulness-based approaches for mitigating mental health crisis. *Frontiers in psychiatry*, 12, 563417.
2. Arfianto, M. A., Ibad, M. R., Widowati, S., & Aryani, H. R. (2022). The Psychoeducation Effect on the Emotional Mental Disorders Symptoms of Covid-19 Pandemic Survivors. *Jurnal Keperawatan Jiwa (JKJ): Persatuan Perawat Nasional Indonesia*, 10(1), 137-144.
3. Balaji, M., & Patel, V. (2020). Hunger, fear and isolation: an analysis of media reports of COVID-19 related suicides in India.
4. Baldwin, A. (2023). *The Vagus Nerve in Therapeutic Practice: Working with Clients to Manage Stress and Enhance Mind-body Function*. Jessica Kingsley Publishers.
5. Beaunoyer, E., Dupéré, S., & Guitton, M. J. (2020). COVID-19 and digital inequalities: Reciprocal impacts and mitigation strategies. *Computers in human behavior*, 111, 106424.
6. Bhagat, S., & Kim, D. J. (2020). Higher education amidst COVID-19: Challenges and silver lining. *Information Systems Management*, 37(4), 366-371.
7. Castle, S. C. (2000). Clinical relevance of age-related immune dysfunction. *Clinical Infectious Diseases*, 31(2), 578-585.
8. Bhardwaj, A., Chhabda, M. P. K., & Cabe et al., 2020. Impact of Pandemic on the Economic Environment of India Concerning the Retail Sector. *NeuroQuantology*, 20(5), 4787.
9. Bharshankar JR, Bharshankar RN, Deshpande VN, et. al., (2003). Effect of yoga on cardiovascular system in subjects above 40 years. *Indian J Physiol Pharmacol*, 47:202-206.
10. Bhutkar MV, Bhutkar PM, Taware GB & Surdi AD (2011). How effective is sun salutation in improving muscle strength, general body endurance and body composition? *Asian J Sports Med*, 2(4):259-266
11. Boursier, V., Gioia, F., Musetti, A., & Schimmenti, A. (2020). Facing loneliness and anxiety during the COVID-19 isolation: the role of excessive social media use in a sample of Italian adults. *Frontiers in psychiatry*, 11, 586222.
12. Buheji, M., da Costa Cunha, K., Beka, G., Mavric, B., De Souza, Y. L., da Costa Silva, S. S., ... & Yein, T. C. (2020). The extent of covid-19 pandemic socio-economic impact on global poverty. a global integrative multidisciplinary review. *American Journal of Economics*, 10(4), 213-224.
13. Cataldo, F., Chang, S., Mendoza, A., & Buchanan, G. (2021). A perspective on client-psychologist relationships in videoconferencing psychotherapy: literature review. *JMIR mental health*, 8(2), e19004.
14. Chander, R., Murugesan, M., Ritish, D., Damodharan, D., Arunachalam, V., Parthasarathy, R., ... & Kumar, C. N. (2021). Addressing the mental health concerns of migrant workers during the COVID-19 pandemic: An experiential account. *International Journal of Social Psychiatry*, 67(7), 826-829.
15. Chaudhury, P., & Banerjee, D. (2020). "Recovering with nature": A review of ecotherapy and implications for the COVID-19 pandemic. *Frontiers in Public Health*, 8.
16. Chhetri, B., Goyal, L. M., Mittal, M., & Battineni, G. (2021). Estimating the prevalence of stress among Indian students during the COVID-19 pandemic: A cross-sectional study from India. *Journal of Taibah University Medical Sciences*, 16(2), 260-267.
17. Chopra, H. D. (1972). Relaxation therapy. *Indian Journal of Psychiatry*, 14(4), 413-416.
18. Collins C (1998). Yoga: Intuition, preventive medicine, and treatment. *J Obstet Gynecol Neonatal Nurs*, 27:563-568.
19. Desikachar K, Bragdon L & Bossart C (2005). The yoga of healing: Exploring yoga's holistic model for health and well-being. *Int J Yoga Ther*, 15:17-39
20. Collins C (1998). Yoga: Intuition, preventive medicine, and treatment. *J Obstet Gynecol Neonatal Nurs*, 27:563-568.

20. Dubey, S., Biswas, P., Ghosh, R., Chatterjee, S., Dubey, M. J., Chatterjee, S., ... & Lavie, C. J. (2020). Psychosocial impact of COVID-19. *Diabetes & Metabolic Syndrome: clinical research & reviews*, 14(5), 779-788.
21. Emmelkamp, P. M., David, D., Beckers, T., Muris, P., Cuijpers, P., Lutz, W., ... & Vervliet, B. (2014). Advancing psychotherapy and evidence-based psychological interventions. *International journal of methods in psychiatric research*, 23(S1), 58-91.
22. Fancourt, D., & Finn, S. (2019). What is the evidence on the role of the arts in improving health and well-being? A scoping review. World Health Organization. Regional Office for Europe.
23. Ghosh, A., Nundy, S., & Mallick, T. K. (2020). How India is dealing with COVID-19 pandemic. *Sensors International*, 1, 100021.
24. Gladding, S. T. (2021). *The creative arts in counseling*. John Wiley & Sons.
25. Gordon, J. S., Sbarra, D., Armin, J., Pace, T. W., Gniady, C., & Barraza, Y. (2021). Use of a guided imagery mobile app (See Me Serene) to reduce COVID-19-related stress: pilot feasibility study. *JMIR Formative Research*, 5(10), e32353.
26. Goyal, Malini (22 March 2020). "Covid-19: How the deadly virus hints at a looming financial crisis". *The Economic Times*. Retrieved 23 March 2020
27. Grover, S., Sahoo, S., Mehra, A., Avasthi, A., Tripathi, A., Subramanian, A., ... & Reddy, Y. J. (2020). Psychological impact of COVID-19 lockdown: An online survey from India. *Indian journal of psychiatry*, 62(4), 354-362.
28. Hackmann, A., Bennett-Levy, J., & Holmes, E. A. (Eds.). (2011). *Oxford guide to imagery in cognitive therapy*. OUP Oxford.
29. Hass-Cohen, N., & Carr, R. (Eds.). (2008). *Art therapy and clinical neuroscience*. Philadelphia, PA: Jessica Kingsley.
30. Hatmal, M. M. M., Al-Hatamleh, M. A., Olaimat, A. N., Hatmal, M., Alhaj-Qasem, D. M., Olaimat, T. M., & Mohamud, R. (2021). Side effects and perceptions following COVID-19 vaccination in Jordan: a randomized, cross-sectional study implementing machine learning for predicting the severity of side effects. *Vaccines*, 9(6), 556.
31. Irving, J. A., Dobkin, P. L., & Park, J. (2009). Cultivating mindfulness in health care professionals: A review of empirical studies of mindfulness-based stress reduction (MBSR). *Complementary therapies in clinical practice*, 15(2), 61-66.
32. Kaimal G, Ray K, Muniz J. Reduction of cortisol levels and participants' responses following art making. *Art Therapy*. 2016;33(2):74-80. doi:10.1080/07421656.2016.1166832
33. Kuhfield, M., & Tarasawa, B. (2020). The COVID-19 Slide: What Summer Learning Loss Can Tell Us about the Potential Impact of School Closures on Student Academic Achievement. Brief. NWEA.
34. Liu, K., Chen, Y., Wu, D., Lin, R., Wang, Z., & Pan, L. (2020). Effects of progressive muscle relaxation on anxiety and sleep quality in patients with COVID-19. *Complementary therapies in clinical practice*, 39, 101132.
35. Malchiodi, C. A. (2020). *Trauma and expressive arts therapy: Brain, body, and imagination in the healing process*. Guilford Publications.
36. Malik, M. A. (2022). Fragility and challenges of health systems in pandemic: Lessons from India's second wave of coronavirus disease 2019 (COVID-19). *Global Health Journal*, 6(1), 44-49.
37. Marino, F., Failla, C., Carrozza, C., Ciminata, M., Chilà, P., Minutoli, R., ... & Pioggia, G. (2021). Mindfulness-based interventions for physical and psychological wellbeing in cardiovascular diseases: A systematic review and meta-analysis. *Brain Sciences*, 11(6), 727.
38. Matos Machado, S., & Costa, M. E. (2015). Mindfulness practice outcomes are explained through the discourse of experienced practitioners. *Mindfulness*, 6, 1437-1447.
39. Moradi, Y., Mollazadeh, F., Karimi, P., Hosseingholipour, K., & Baghaei, R. (2020). Psychological disturbances of survivors throughout COVID-19 crisis: a qualitative study. *BMC Psychiatry*, 20, 1-8.

40. Palanimeera, J., & Ponmozhi, K. (2023). Yoga Posture Recognition by Learning Spatial-Temporal Feature with Deep Learning Techniques. *International Journal of Image and Graphics*, 2450055.
41. Racine, N., McArthur, B. A., Cooke, J. E., Eirich, R., Zhu, J., & Madigan, S. (2021). Global prevalence of depressive and anxiety symptoms in children and adolescents during COVID-19: a meta-analysis. *JAMA pediatrics*, 175(11), 1142-1150.
42. Riva, G., Bernardelli, L., Browning, M. H., Castelnovo, G., Cavedoni, S., Chirico, A., ... & Wiederhold, B. K. (2020). COVID feel good—an easy self-help virtual reality protocol to overcome the psychological burden of coronavirus. *Frontiers in psychiatry*, 11, 563319.
43. Robledo Yamamoto, F., Vaida, A., & Vaida, S. (2021). From therapy to teletherapy: relocating mental health services online. *Proceedings of the ACM on Human-Computer Interaction*, 5(CSCW2), 1-30.
44. Run-Kowzun, T. (2020). The Effect of a 7-Week Progressive Yoga Intervention on Hamstring Flexibility (Doctoral dissertation, The William Paterson University of New Jersey).
45. Sangster, A., Stoner, G., & Flood, B. (2020). Insights into accounting education in a COVID-19 world. *Accounting Education*, 29(5), 431-562.
46. Sengupta P (2012) Health Impacts of Yoga and Pranayama: A Stateof-the-Art Review. *Int J Prev Med* 3: 444458.
47. Shah, K., Mann, S., Singh, R., Bangar, R., & Kulkarni, R. (2020). Impact of COVID-19 on the Mental Health of Children and Adolescents. *Cureus*, 12(8).
48. Shelton, C. J., Kim, A., Hassan, A. M., Bhat, A., Barnello, J., & Castro, C. A. (2020). System-wide implementation of telehealth to support military Veterans and their families in response to COVID-19: A paradigm shift. *Journal of Military, Veteran and Family Health*, 6(S2), 50-57.
49. Shivakumar, S., & Balakrishna, M. (2022). CONCEPTS OF YOGA AND FITNESS. *Ashok Yakkaldevi*.
50. Simpson, S., Richardson, L., Pietrabissa, G., Castelnovo, G., & Reid, C. (2021). Videotherapy and therapeutic alliance in the age of COVID-19. *Clinical psychology & psychotherapy*, 28(2), 409-421.
51. Sukumaran, S., Asokan, D., Sukesh, N., & Vijayan, V. (2020). Using pranayama or yoga breathing to mitigate stress and anxiety during the COVID-19 pandemic. *Yoga Phys Ther Rehabil*, 5(1076), 2577-0756.
52. Suryadevara, V., Adusumalli, C., Adusumilli, P. K., Chalasani, S. H., & Radhakrishnan, R. (2020). Mental Health Status among the South Indian Pharmacy Students during Covid-19 Pandemic Quarantine Period: A Cross-Sectional Study (preprint).
53. Tomar, A., & Gupta, N. (2020). Prediction for the spread of COVID-19 in India and effectiveness of preventive measures. *Science of The Total Environment*, 728, 138762.
54. Usiskin, M., & Lloyd, B. (2020). Lifeline, frontline, online: adapting art therapy for social engagement across borders. *International Journal of Art Therapy*, 25(4), 183-191.
55. Vishwakarma, D., Gaidhane, A. M., Choudhari, S. G., & Gaidhane, A. (2022). The global impact of COVID-19 on the mental health of the general population: A narrative review. *Cureus*, 14(10).
56. Vyas, Mahesh (21 April 2020). "Unemployment rate touches 26%". Centre for Monitoring Indian Economy. Retrieved 24 April 2020.
57. Wetik, S. V., Grace, P. B., & Fressy, L. N. (2021). Dukungan Kesehatan Jiwa Dan Psikososial (Dkjps) Covid-19 Pada Masyarakat Kategori “Orang Sehat” Di Desa Seretan Kecamatan Lembean Timur, Sulawesi Utara. *Jurnal Kreativitas Pengabdian Kepada Masyarakat (Pkm)*, 4(1), 213–218. <https://doi.org/10.33024/jkpm.v4i1.3247>
58. Wile, N. (2014). Yoga teacher training.
59. World Health Organization. (2016). WHO Global report on diabetes.
60. World Health Organization. (2020). Coronavirus (COVID-19) events as they happen. 2020. URL: <https://www.who.int/emergencies/diseases/novelcoronavirus-2019/events-as-they-happen>.

61. Zaccaro A, Piarulli A, Laurino M, Garbella E, Menicucci D, et al. (2018). How Breath-Control Can Change Your Life: A Systematic Review on Psycho-Physiological Correlates of Slow Breathing. *Front Hum Neurosci* 12: 353.11(1), 329.
62. Zangani, C., Ostinelli, E. G., Smith, K. A., Hong, J. S., Macdonald, O., Reen, G., & Cipriani, A. (2022). Impact of the COVID-19 pandemic on the global delivery of mental health services and telemental health: systematic review. *JMIR mental health*, 9(8), e38600.
63. Zhu, J. L., Schülke, R., Vatansever, D., Xi, D., Yan, J., Zhao, H., & Wang, S. (2021). Mindfulness practice for protecting mental health during the COVID-19 pandemic. *Translational Psychiatry*.