Original Research

Psychological problems associated with coping strategies: a web-based study in Peruvian population during the COVID-19 pandemic.

Ames- Guerrero, R.J.¹, Barreda-Parra A.², Huamani- Cahua J.C³, Banaszak-Holl J.⁴

¹Universidad Católica de Santa María, ²Universidad Nacional de San Agustín.
³Universidad Católica San Pablo. ⁴Monash University

Corresponding Author:

Rita J. Ames- Guerrero

Universidad Católica de Santa María
San José, San Jose s/n Cercado, Arequipa- Perú.

Email: rames@ucsm.edu.pe

ABSTRACT:

BACKGROUND: The Coronavirus disease has quickly spread to all corners across Latin-American countries. Its exponential capacity has overwhelmed even the most resilient health systems (1). The already significant impact of the Coronavirus (COVID-19) on the global scale is worsened by psychological responses that may aggravate the health crisis.

OBJECTIVE: This study is aimed at collecting demographic information, prevalence of psychological morbidities and associated coping styles during the COVID-19 pandemic on Peruvian population. **Methods:** This cross-sectional study was conducted through online survey using snowball sampling techniques after the state of emergency was declared in Perú. The General Health Questionnaire (GHQ -28) identify somatic symptom, anxiety/ insomnia, social malfunctioning and depression prevalence and the Coping Strategy Questionnaire (COPE-28) maps strategies addressing recent stress.

RESULTS: We collected data from 434 self-selected participants within 18-68 years old (ME =33.87), by analysing the socio-economic information in which the majority of the respondents were women (61.3%), aged between 18 and 28 (41.7%), from well-educated groups ($\geq 85.0\%$), Peruvian (94.2%), working citizen (57.4%) and single (71.20 %). Nearly 40.8% rated psychological problems, expressing fear of being infected by coronavirus (71.43%). Regression analysis shows that female gender is associated to higher somatic ($p < 0.001^*$, C.I: -2.75 to -.99) and anxiety/insomnia symptoms ($p = 0.00^*$, C.I: -2.98 to 0.84). Depression and social dysfunction are experienced at any age. Educational status is protective against developing psychological disorders ($p < 0.05$). While active responses (Acceptance and Social support) are scarcely used by individuals with psychological problems; Passive strategies are commonly reported (Denial, Self-Distraction, Self-Blame, Disconnection, and Emotional discharge).

CONCLUSION: These findings provide a better understanding of psychological disorders resulting from the current pandemic in Peruvian population. This evidence informs the need to strengthen mental health programs, especially in less privileged groups after the Covid-19 pandemic.

KEYWORDS: Mental health, Psychological morbidities, Coping Strategies, Public health, Primary prevention.