EPP0585

Universal protective and risk factors of mental health during the COVID-19 pandemic: The role of compassion and fears of compassion

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Introduction: The COVID-19 pandemic has had an unprecedented detrimental impact on mental health in people around the world. It is therefore important to examine factors that may buffer or heighten the risk of mental health problems in this context.

Objectives: The current study explores the buffering effects of different flows of compassion (for self, for others, from others) and the magnifying effects of fears of compassion on the impact of perceived threat of COVID-19 on indicators of mental health and psychosocial wellbeing.

Methods: 4057 adult participants collected from the general community population across 21 countries from Europe, Middle East, North America, South America, Asia and Oceania, completed self-report measures of perceived threat of COVID-19, compassion, fears of compassion, social safeness, loneliness, depression, anxiety, stress, posttraumatic stress and growth.

Results: Self-compassion moderated the impact of perceived threat of COVID-19 on depression, anxiety and stress, whereas compassion from others moderated the effects of fears of COVID-19 on social safeness. Fears of compassion moderated the impact of perceived threat of COVID-19 on psychological distress. Only fears of compassion from others moderated the effects of fears of COVID-19 on social safeness. Furthermore, social connection (compassion and social safeness) predicted higher post-traumatic growth and traumatic stress, whereas social disconnection (fears of compassion and loneliness) predicted increased traumatic symptoms only. Social connection heightened the impact of perceived threat of COVID-19 on post-traumatic growth, while social disconnection weakened this impact. Social disconnection magnified the impact of the perceived threat of COVID-19 on traumatic stress. The effects were consistent across countries.

Conclusions: Our findings highlight the universal protective role of compassion and social connection in promoting resilience and buffering against the harmful effects of the COVID-19 pandemic on mental health and psychosocial wellbeing. Furthermore, our results reveal that fears of compassion have a magnifying effect on the damaging impact of the COVID-19 pandemic on mental health.

Disclosure of Interest: None Declared

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Psychiatric symptoms in general population and health personnel during the second and third waves of COVID-19 in Mexico

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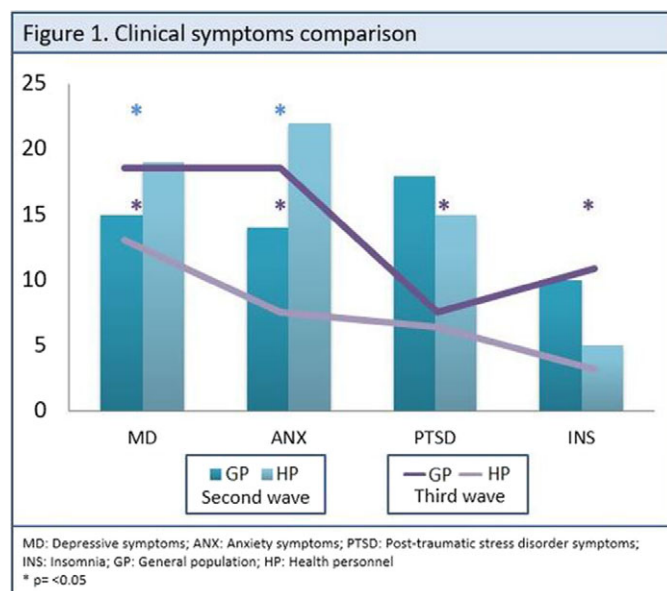*Corresponding author.

Introduction: The COVID-19 pandemic has significantly affected mental health. However, its impact between different pandemic waves and different populations has been scarcely studied.

Objectives: The aim of this study was to analyze the differences in psychiatric symptomatology between the general population (GP) and health personnel (HP) during the second and third waves of COVID-19 in Mexico.

Methods: 404 participants were included as part of a cross-sectional study conducted during the COVID-19 pandemic, using an online survey. Second wave covered from September 27, 2020 to April 17, 2021 and the third wave covered from June 6, 2021 to October 23, 2021. GP refers to Mexican residents during the pandemic, and HP includes healthcare workers (doctors, nurses, residents). Socio-demographic data were collected and scales of depression (Patient Health Questionnaire 9), anxiety (General Anxiety Disorder -7), insomnia (insomnia severity index), and post-traumatic stress (Impact of event scale revised) were applied. We gather information in a database in Excel, for later analysis using IBM SPSS Statics 21. Traditional descriptive statistics for quantitative variables and frequencies for qualitative variables were obtained. Association and statistical correlation were analyzed using Chi2 tests.

Results: 71.3% of the collected sample were female, mean age 35.5 (sd= 11.6), the 62.5% consisted of health personnel, the majority were single 48.9%, with postgraduate education 48.9%, middle class (97.2%). A higher percentage of symptoms of depression and anxiety was observed in health personnel compared to the general population during the second wave of COVID-19 (33.9% vs. 19.5%, p=0.047; 18.2% vs. 39.3%, p=0.006). However, during the third wave of COVID-19, more depressive, anxious and insomnia symptoms were observed in the general population compared to health personnel (73.9% vs. 44.4%, p=0.020; 73.9 vs. 25.9%, p= 0.000; 43.5% vs. 11.1%, p=0.008) (Figure 1).

Image:

Figure 1. Clinical symptoms comparison

MD: Depressive symptoms; ANX: Anxiety symptoms; PTSD: Post-traumatic stress disorder symptoms; INS: Insomnia; GP: General population; HP: Health personnel
* p= <0.05

Conclusions: Health personnel presented more depressive and anxious symptoms during the second wave of COVID-19 compared to the general population, however, the results were inverse during the third wave, showing more psychiatric symptoms in the