

The Psychosocial Effect of COVID-19....



**The Psychosocial Effect of COVID-19 on Persons Infected and Recovered as Reported by
Participants: The Case of EkaKotebe General Hospital**

DawitHussen

A Thesis Submitted to Addis Ababa University School of Social Work in Partial Fulfillment of
the Requirements for the Degree of Master of Art in Social Work

(Healthcare concentration)

Addis Ababa University

Addis Ababa, Ethiopia

June, 2023

Addis Ababa University

College of Social Sciences

School of Social Work

The Psychosocial Effect of COVID-19 on Persons Infected and Recovered: The Case of
EkaKotebe General Hospital.

By: DawitHussen

Advisor: WassieKebede (PhD)

A Thesis Submitted to Addis Ababa University School of Social Work in Partial Fulfillment of
the Requirements for the Degree of Master of Art in Social Work

(Healthcare concentration)

June, 2023

Addis Ababa University**School of Graduate Studies**

This is to certify that the thesis prepared by DawitHussenentitled “*The Psychosocial Effect of COVID-19 on Persons Infected and Recovered as Reported by Participants: The Case of EkaKotebe General Hospital*”, which is submitted in partial fulfilment of the requirements for the Degree of Master of Arts in Social Work complies with the regulations of the university and meets the accepted standards with respect to originality.

Signature by the Examining Committee:

_____ Advisor	_____ Signature	_____ Date
_____ Examiner (internal)	_____ Signature	_____ Date
_____ Examiner (external)	_____ Signature	_____ Date

Declaration

I declared that this thesis entitled “*The Psychosocial Effect of COVID-19 on Persons Infected and Recovered as Reported by Participants: The Case of EkaKotebe General Hospital*” submitted by DawitHussen for the requirements of the degree of masters in social work (MSW) is my original work and has not been presented by other scholars anywhere in universities and other research institutions. The works of other authors or researchers used in the working of the paper are properly cited and acknowledged.

DawitHussen

Signature: _____

Date: _____

Place: Addis Ababa University, Ethiopia

Abstract

This research assessed the psychosocial effects of COVID-19 on recovered patients from the pandemic. The study employed qualitative research method using in-depth and key informant interview as method of data collection. The method of data analysis employed was phenomenological analysis. The major finding of the study are recovered patients have experienced psychosocial effects such as fear, worry, depression, feeling of uncertainty PTSD, loss of hope, stigmatization, social isolation, and discrimination. In order to minimize such effects, all stakeholders including healthcare professionals, healthcare system managers, policy makers, members of MHPSS teams should work in collaboration.

Key words: COVID-19, Psychosocial Effects, Survivors

Acknowledgement

First and foremost, I thank God for helping me not only on this study but throughout my entire life. I would like to express my deepest gratitude and appreciation to my advisor

DrWassieKebede, for his unwavering encouragement, insightful feedback, and constant guidance throughout the entire process. Your expertise and mentorship have been instrumental in shaping the direction of the project.

I extend my gratitude to my family and friends (Dada, Azeb, Aman and Mulatu)for unwavering support, understanding, and encouragement through this journey. Their belief in me has been a constant source of motivation and inspiration.

Furthermore, I want to acknowledge the support and resources provided by Addis Ababa University, school of social work and EkaKotebe General Hospital. The facilities, library resources, and technical assistance have greatly contributed for this study.

To everyone mentioned above and those who may have not been named but played a significant role, I am truly grateful for your contributions. Your support has been invaluable, and I am honored to have had the opportunity to work alongside such exceptional individuals. Thank you all for your unwavering support and dedication.

Table of Contents

Contents	Pages
Abstract.....	v
Acknowledgement	vi
Table of Contents	vii
List of Tables	x
List of Figure.....	xi
Chapter One: Introduction	1
1.1 Background.....	1
1.2 Statement of the Problem.....	4
1.3 Research Objective	6
<i>1.3.1 General Objective</i>	6
<i>1.3.2 Specific Objectives</i>	6
1.5 Significance of the Study	7
1.6 Scope of the Study	7
1.7 Limitation of the Study	7
1.8 Definitions of Terms	7
1.8 Organization of the Study	8
Chapter Two: Literature Review.....	9
2.1 Overview of COVID-19	9
2.2 Psychological Effect of COVID-19	16
2.4 Theoretical Background.....	20
<i>2.4.1 System Perspective</i>	20
<i>2.4.2 Bio-psychosocial and Spiritual Model</i>	20
2.5 Conceptual Framework.....	22
2.6 Summary of Literature Review.....	23
Chapter Three: Research Methods.....	24
3.1 Philosophical Paradigm	24
3.2 Research Design.....	24
3.3 Study Setting.....	25
3.4 Inclusion and Exclusion Criteria.....	25

3.4.1. <i>Inclusion Criteria</i>	Error! Bookmark not defined.
3.4.2 <i>Exclusion Criteria</i>	Error! Bookmark not defined.
3.5 Participants of the Study	25
3.7 Method of Data Collection.....	26
3.8 Data Gathering Procedures	26
3.9 Method of Data Analysis	27
3.10 Quality Assurance.....	27
3.11 Ethical Considerations	28
Chapter Four: Findings of the Study.....	30
4.1 The Background Information of Participants.....	30
4.2 Psychological Effects of COVID-19.....	31
4.2.1 <i>Anxiety and Depression</i>	32
4.2.2 <i>Fear and Worry</i>	33
4.2.3 <i>Feeling of Uncertainty</i>	35
4.2.4 <i>Loss of Hope</i>	37
4.2.5 <i>Post-Traumatic Stress Disorder (PTSD)</i>	38
1.3 Social Effect of COVID-19.....	40
2.6.1 <i>Social Isolation</i>	40
2.6.2 <i>Restriction of Movement</i>	41
2.6.3 <i>Suspension of Gathering in Worship Centers</i>	43
4.3.4 <i>Discrimination and Stigmatization</i>	45
Chapter Five: Discussion	48
5.1 Psychological Effects of COVID-19.....	48
5.2 Social Effects of COVID-19	49
Chapter Six: Conclusion and Recommendations.....	54
6.1 Conclusion	54
6.2 Recommendations.....	55
6.3 Social Work Implication	56
6.3.1 <i>Social Work Implication for Practice</i>	56
6.3.2 <i>Social Work Implication for Education</i>	57
6.3.3 <i>Social Work Implication for Research</i>	57
6.3.4 <i>Social Work Implication for Policy</i>	58

References.....	xi
Annexes	xxiv
Annex 1.....	xxiv
Annex 2.....	xxv
Annex 3.....	xxvii
Annex 4.....	xxviii
Annex 5.....	xxviii

List of Tables

Table 1 Socio-Demographic Information of Participants36

Table 2 Socio-Demographic Information of Key Informants38

List of Figure

Figure 1 Conceptual Framework30

Acronyms and Abbreviations

COVID-19 - Coronavirus Disease 2019

EKGH- EkaKotebe General Hospital

IASC- Inter-Agency Standing Committee

ICU- Intensive Care Unit

MHPSS- Mental Health and Psychosocial Support

PTSD- Post Traumatic Stress Disorder

SARS- Severe Acute Respiratory Syndrome

SARS-CoV-2 – Severe Acute Respiratory Syndrome Coronavirus 2

WHO- World Health Organization

UNICEF- United Nations International Children's Emergency Fund

Chapter One: Introduction

This chapter presents with the introductory part of the study. It includes the background of the study, with main focus on the psychosocial effects of covid-19 on the survivors of the pandemic. It also presents statement of the problem, objectives the study, significance of the study, scope of the study definition of the terms and organization of the study.

1.1 Background

Corona virus disease is a type of illness brought on by the SARS-COV-2 virus, which was first discovered in Hubei, China, in 2019 (Lu et al., 2020). Since its inception the COVID-19 pandemic has affected every aspect of human life, putting the planet in an unprecedented state of emergency (Chakraborty, 2020). The world health organization (WHO) proclaimed a global pandemic on march 11, 2020, in response to the infectious virus rapid spread, with the intention of controlling the situation cautiously and coordinately (WHO, 2020).

Following the WHO's designation of COVID-19 as a global pandemic, numerous nations started to implement preventive measures, while others implemented stringent lockdown procedures to deal with the issues. As seen in many locations, businesses have been suspended with the exception of those that are absolutely necessary for life (Pedrosa et al., 2020).

Several studies have been conducted in relation to COVID-19 focusing on its clinical manifestations, physical health outcomes, seriousness of respiratory symptoms, the possibility of long term problems, and the requirement for medical responses. But, the effect of COVID-19 is extends beyond. For example, Bodrud-doza et al., (2020) looked at the psychosocial and socio-economic crisis in Bangladesh. According to their research, a sizable portion of population has

felt insecure as result of job and life loss. To alleviate the situation, psychological distress and to add protection to the community's wellbeing, well planned actions must be taken. Similar research was conducted by Saladino et al., (2020) on the psychological and social effects of showed that COVID-19 had an effect on the most vulnerable segment of the population, which included developing post-traumatic stress disorder (PTSD), anxiety, and depression and having effect on interpersonal relationships.

Similar type of study conducted by Giusti et al., (2020) examined the COVID-19 outbreaks psychological effects on healthcare professionals. During COVID-19 crisis they have observed that high level of burnout as well as other additional psychological symptoms among healthcare personnel. The emotional effects of COVID-19 pandemic on dental health teaching hospital also studied by Mahendran et al., (2020) indicated the significant prevalence of generalized anxiety disorder. They recommended that checking healthcare professionals readiness prior to deployment, and including healthcare professionals in to planning team address those problems.

Another research by Moradi et al., (2020) on psychological disturbances of survivors of COVID-19 demonstrated that, during pandemics like COVID-19, patients endure disturbances such as living in limbo, psychological distress behind the wall, and psychological burden of being carrier in addition to the physically and mentally tough symptoms of disease. Moreover, a review by Hosseinzadeh, (2022) indicates that COVID-19 was one of the most serious health crises in recent history of world and currently putting significant effects on society. Long term quarantine, anxiety-provoking issues including the likelihood of catching the illness, future work prospects, and family financial sources may all be required to be managed at home.

Multiple studies have been undertaken in our country with a focus on the pandemics various components, such as prevalence, mitigation, interventions, and consequences on various facets of the population. Kassaw, (2020) investigated the scope of psychological issues and related factors among Addis Ababa populations in response to the COVID-19. The study finding indicated that the majority of the participants had reported experiencing mild to severe psychological difficulties, such as stress, anxiety, and depression during the early stages of the COVID-19 on Ethiopia. The study suggests that all parties involved should do their share to educate the public about COVID-19 prevention and control through various social media channels.

At the University of Gonder, Mokenen et al., (2020) conducted their study on the psychological effects of COVID-19 on graduating class students. According to the finding, the majority of students have dealt with psychological issues related to COVID-19 on varying degrees. Stress, anxiety, and depression are the psychological issues that students encounter most frequently. The researchers recommended that the University should set up center of interventions and create a resource base or psychological intervention team in order to address such issues.

Regarding the psychosocial effects of COVID-19 on the survivors of the pandemic, several studies have been conducted. After getting admitted for contracting COVID-19 and getting recovered many individuals have gone through difficult times. For instance, according to Hunag et al., (2022) COVID-19 survivors have been experienced both physical and mental distress with varied degrees. Other finding by Olufandewa et al., (2022) also suggests that the psychological effects experienced by survivors include guilt over the likelihood that they may have exposed others to disease, nightmares, suicidal thoughts, stigmatization, incorrect

judgment, and discrimination, among other things. Recovered patients from COVID-19 had high levels of post-traumatic stress, particularly young patients with comorbidities conditions, symptomatic COVID-19 and female patients having found to some mild anxiety and depression (Jafri et al., 2022).

Individual's psychosocial wellbeing may be affected during times of crisis. Throughout its history, Ethiopia has encountered numerous pandemics (KitawandKaba, 2020). The pandemic has affected many individuals' psychosocial aspects of their life specially; those who have been exposed to the corona virus and recovered have experienced significant effect. Hence, understanding these effects and designing strategies to address those effects in coordinated way is crucial to help those survivors of COVID-19. As result, it is now a crucial and urgent call to clearly document and explore the psychosocial effects of COVID-19 on the survivors of the pandemic.

1.2 Statement of the Problem

Several studies on the various aspects of COVID-19 have been undertaken since its onset. According to Tsamakis et al., (2020), many patients with comorbidities have expressed distress and worry. In addition to that a critical review by Dubey et al., (2020) confirmed that stigma, avoidance of neighbor, social rejection, and retreat from social life are also effects of COVID-19 infection.

A study conducted by Jafri et al., (2022) in Pakistan, Lahore on mental health status of COVID-19 survivors indicated that survivors of the pandemic have experienced high level of PTSD, particularly young patients with comorbidities, symptomatic COVID-19, and female patients having some mild anxiety and depression. In similar way other study by Gooshki et al.,

(2022) on psychological consequences and related factors among COVID-19 survivors in Southeastern Iran showed that COVID-19 survivors suffered from severe anxiety, moderate sadness and severe PTSD. The researchers recommended that necessary attention should be given to the mental health and psychosocial wellbeing of survivors by health system applying the right psychological approaches and techniques.

Numerous researches have been conducted in various African countries. According to Pavari's (2020) study on the psychosocial effects of COVID-19 in Zimbabwe, a sizable portion of the population has been affected by the pandemic. In addition to the declining value of the local currency, which directly contributed to an increase in commodity prices, the pandemic's effects on economic activity were detrimental to the low-income earning portion of population. The most prevalent psychological issues were anxiety, apprehension, hopelessness, and depression, while the social effects of the pandemic in rural and remote areas included social exclusion, mobility restrictions, and suspension of faith based organizations and lack of knowledge about COVID-19.

Gebru, (2020) studied the community coping mechanisms and the psychosocial effects of COVID-19 lockdown in Jimma. Fear, stress, loneliness, and a lack of social connection were observed. The participants identified their social support network as their primary coping strategy during the lockdown, particularly when using indigenous us knowledge, beliefs, and practices like *Iddir*, *Equb*, and *Mahber*. In order to address societal issues and crisis, the researcher advised such social activities and norms.

On the other hand Chekle et al., (2020) studied the perceived stress and its associated factors during COVID-19 among healthcare providers in Dilla, Ethiopia. The majority of

participants reported the feeling of stressed as result of COVID-19. The researchers suggested that early screening be encouraged and that frontline healthcare personnel should properly respond to it in accordance with their needs in order to address the issue.

Despite the fact that there have been numerous researches on the psychosocial effect of COVID-19, most of them concentrate on professionals (e.g.:- Giusti et al., (2020), Mahenderan et al., (2020), and Monte et al., (2020)) and larger society (e.g.:- Bodrud-doza et al., (2020), Saladino et al., (2020), Dubey et al., (2020), Kassaw, (2020), Mokenen et al.,2020), Gebru, (2020) and Chekle et al., (2020)). Studies on the psychosocial effects of COVID-19 on survivors of the pandemic in our country are very limited, as a result, the researcher found only one study which was related. Therefore, it is very crucial to conduct a study to understand the psychosocial effects of COVID-19 on the survivors of the pandemic and fill the knowledge gap on this issue. Therefore, the purpose of this study is to explore how COVID-19 has affected the psychosocial wellbeing of the survivors of pandemic.

1.3 Research Objective

1.3.1 General Objective

The general objective of the study is to explore the psychosocial effects of COVID-19 persons who have been infected by the virus and recovered.

1.3.2 Specific Objectives

The specific objectives are:

1. To explore the specific psychological effects of COVID-19 on recovered patients.
2. To assess the specific social effects of the pandemic on the persons who are recovered from the infection.

1.5 Significance of the Study

This study which explores the psychosocial effect of COVID-19 on recovered patients from pandemic is unique in Ethiopia. This study is very significant in filling the knowledge gap that exists on the issue of the psychosocial effects of COVID-19 on survivors of the pandemic. Additionally, it will be a helpful source of information for decision makers and policy makers in all levels of government entities as it presents the psychosocial effects COVID-19 on the survivors. Moreover, it will serve as reference for the next generation of research projects as it points out gaps and future focus areas to investigate further.

1.6 Scope of the Study

The study limited itself to explore the effect of COVID-19 on recovered patients from COVID-19 pandemic who were admitted to EKGH. It covers the psychological and social effects of the pandemic on the survivors of the COVID-19 those who admitted to the hospital from 2020-2022.

1.7 Limitation of the Study

This study focuses only on the psychosocial effects of COVID-19 on the survivors of the pandemic; hence, it does not include other effects on the survivors of the pandemic. It is not generalizable to other community and general population, because this study used qualitative research method with the aim of understanding and describing the experiences of participants of the study.

1.8 Definitions of Terms

Psychosocialeffect: concerning the effects of disease on the body, psychological, cognitive and social consequences of diseases including stigmatization of persons affected.

Psychological effect: experiencing fear, anxiety, worry, feeling of uncertainty, loss of hope and PTSD because of COVID-19.

Social effect: social isolation, stigmatization and discriminations experienced because of COVID-19.

COVID-19: Corona virus disease 2019

Recovered person/ Survivor: is a person who admitted to hospital for treatment of COVID-19 and recovered or survived the illness.

1.9 Organization of the Study

The study consists of six chapters; the first chapter deals with the introductory section of the study while the second chapter deals with the review of related literature. Chapter three discusses the research design and methodology and chapter four deals with the findings. The fifth chapter presents the discussion, while the final chapter six deals with the conclusion and implication for social work.

Chapter Two: Literature Review

This chapter discusses literatures and relevant studies conducted in the area of psychosocial effects COVID-19 on the survivors of the pandemic. The major issues discussed under this chapter are the general overview of the COVID-19, psychological effect of COVID-19, social effects of COVID-19 theoretical background and conceptual framework.

2.1 Overview of COVID-19

Our world has passed through times of unimaginable crisis throughout human history. The occurrence of pandemics at various points in time, which had long-lasting effect on various facets of human life, was one of the most severe crises (Huremovic, 2019). Numerous pandemics have appeared throughout human history and significantly affected the overall aspects of nations. The following pandemics have been recorded in human history: Spanish flu, Hong Kong flu, Severe Acute Respiratory Syndrome (SARS), Asian Lineage Avian Influenza A(H7N9), Ebola and Zika (WHO, 2011).

According to Piret and Boivin (2021), the Coronaviridae family of viruses, which includes the genera alpha, beta, gamma, and delta-coronaviruses, include coronaviruses, include coronaviruses. SARS CoV-2 which causes COVID-19 belongs to the beta-coronavirus family. The COVID-19 pandemic was initially discovered in Wuhan, China, in December 2019. As a result of the virus the World Health Organization has classified the illness as global pandemic (Zhu, et al., 2020).

Persons infected with COVID-19 show symptoms like fever, a dry cough, shortness of breath, weariness, myalgia, nausea/ vomiting, or diarrhea, headache, weakness, rhinorrhea, anosmia, and aguesia. It causes pneumonia, acute liver injury, heart injury,

prothromboticcoagulopathy, acute renal injury, and neurologic symptoms. Furthermore, it is very challenging for people with comorbidities like hypertension, diabetes, cardiovascular disease, chronic liver diseases, chronic kidney disease (Piret and Bovivin, 2021).

According to data from WHO as at June 20, 2023, globally, 6,943,390 deaths and 767,984,989 confirmed cases of COVID-19 have been reported to WHO (Connecting the world to combat coronavirus, n.d.). On the other hand, according to Africa Center for Disease Control and Prevention (Africa CDC), a total of 12,216,748 COVID-19 cases were reported as at June 20, 2023 (AFIRICA CDC, 2020). A total of 256,542 deaths due to COVID-19 were reported and 11,517,411 recoveries were registered on the continent. Regarding our country according to Worldometer, as of June 2023, in Ethiopia, a total number of coronavirus cases registered was 500,920, while, 488,153 were recovered from the disease. The country lost 7,574 individuals due to the COVID-19 pandemic (Ethiopia coronavirus: 2,336 cases and 32 deaths-worldometer, n.d.).

As has been seen throughout human history, pandemics have a significant effect on a country's national security, health system, psychosocial wellbeing of citizens, socio-economic disruptions, education, transportation, and so on. According to Qui et al., (2016) it leads to severe human loss, restricted access to events, economic instability, and international insecurity. As mentioned in the above data, the world has lost a number of individuals to the disease, this also implicates a number of businesses affected, and families went through difficulties, national economic burdens due to inflation coupled with climate changes and wars in different places.

Studies conducted in relation to previous pandemics also showed that the effects of a pandemic. Pandemics are complex, multi-stressor situations that can seriously impact mental health. When governments apply social limitations like stay at home directives and the shutdown

of public spaces, pandemics are particularly deadly. Although, the interventions are effective at preventing problems, their prolonged use has a detrimental impact on the community mental health (Taylor, 2022). On the other hand, a review by Brooks et al., (2020), revealed that quarantine has significant, wide ranging and occasionally long-lasting psychological effect. Since it very crucial for containing the spread of the disease, it should be conducted in a such a way bearable as possible for people through giving sufficient information why, what and how it is going to be performed.

With regard to the survivors of the pandemics previous researches indicated the psychosocial effects of pandemics. Because of the lack of investments in the healthcare system communities are prone to outbreaks and the emotional effects that they cause, which exacerbate the health needs. In line with Bortel et al., (2016) indicated that the most common effects of Ebola outbreaks includes fear, anxiety, shame, guilt, stigma , isolation, grief , loss, disruption of community trauma, discrimination, and loss of business.

In relation to the psychosocial effects of previous pandemics on the survivors of the pandemics, several studies indicated that the pandemics have affected the psychosocial wellbeing of the survivors. A research on the psychosocial effect of the Ebola outbreak revealed that survivors of the Ebola have experienced psychological stresses frequently, especially which brought on by discrimination and stigma from family and the community (James et al., 209). Furthermore, Bortel et al., (2016), indicated that survivors, contacts (people who come in to contact with infected patients), and caregivers all experienced fear, anxiety, shame, frustration, anger, stigma, and grief.

Another study that focus on the posttraumatic stress disorder and depression of 12 months after the outbreak of middle east respiratory syndrome (MERS) in south Korea found out that after 12 months the survivors of MERS approximately half of the assessed had major mental health issues, such as PTSD and depression including psychosocial discomfort that may have long term psychological effects (Park et al., 2020). As we can see from different studies conducted in relation to the nature of pandemics, their effect on the general population and survivors of the pandemic, pandemics are very devastating in every aspect of life of the human beings. Hence, understanding these different aspects of the pandemics is helpful to devise preventive and controlling strategies as well as understand what really the survivors of the pandemic have being going through.

As stated by United Nations Organization (UNO) (2020), because of COVID-19 pandemic beside the health effect Africa will face challenges like “the food insecurity, lack of medical supplies, loss of income and livelihood, difficulties in applying sanitary and physical distancing measures looming debit crises, as well as a related political and security risks” (p.1).

In recent history of Ethiopia there is a little account of documentation about the pandemics. One of these pandemics is the so called ‘*Ye HedarBeshita*’ in Amharic and also known as the great influenza epidemic (‘Spanish flu’) (Pankrust, 1975). The pandemic has caused a significant loss of lives at that time. KitawandKaba (2018) warned that the next pandemic might pose high effect on the country because of the expanding urbanization, globalization and unpreparedness. We can say that as they warned COVID-19 has caused serious damage to our country affecting every arena of the lives of the citizens.

Ethiopia has reported the first case of COVID-19 on March 13, 2020. Following the report, the country took a first major action by announcing the State of Emergency on April, 8 2020 which restricts public gatherings and other activities. In order to limit the spread of the virus the school system has been stopped (except the graduate studies that continued via virtual learning), messages has been transmitted to the society with particular emphasis to personal hygiene protection (Alemu et al., 2021; Zikarage, 2020).

As observed through history of mankind pandemics have caused a lot of devastation. In similar way COVID-19 also made the lives of people all around the world multidimensional terrible. Economic, social, physical, psychological and other effects are a few of them. The size of the issue has gotten worse in poorer nations like Ethiopia. Below few studies that show the effects of COVID-19 forwarded.

According to study conducted by Anbelu et al., (2021) there was a sizable frequency of acute psychological distress among Ethiopians who were literate. Another study by Kassaw (2020), also claims that majority of the respondents of the study had a psychological issue. Furthermore, according to systematic review conducted by Bekele et al., (2021) community, healthcare professionals, and patients all experienced significant psychological effects from the COVID-19 pandemic. Anxiety and stress were the most often reported indications of psychological challenges in the study.

Another study claims that community has an issue with reluctance adhere to the recommended measures. Misuse of preventive measures including masks, hand washing using sanitizer after contamination and lack motivation characterize their reluctance. The same study findings showed that people's susceptibility to depression symptoms and severe anxiety

symptoms increased during the outbreak. Additionally, compared to men, women are more likely to experience anxiety as well as older people more susceptible to anxiety than younger people. However, there was no clear statically significant difference in relation to depressed symptoms among age group (Disasa and Teshome, 2021).

Pandemics have huge effect on citizens of any nation, however, it has more damaging effect vulnerable segment of the community. A research conducted on the quarantine centers revealed that the rising prevalence of depression, anxiety and stress symptoms. Fear of contacting the virus, fear of discrimination after quarantine, and experiencing COVID-19 like symptoms were reported (Habtamu et al., 2021). Similar study in quarantine center found out that the majority of the participants have experienced anxiety and sadness. The predictor of sadness or anxiety among the participants included the presence of stressful life events, time spent sleeping, and the beliefs that COVID-19 could be prevented by wearing masks (Abrha et al., 2022).

In another dimension the vulnerable groups of the community are prone to the effects of COVID-19. A vulnerability assessment report from UNICEF Ethiopia outlined people affected by disease, patients, and their families. Women and girls are more at risk than men from gender perspective. Elderly people are more vulnerable to the pandemic than the young ones. People with disability and people with chronic illness are vulnerable including the children (Cancedda et al., 2020).

With regard to the psychosocial effect of COVID-19 on the survivors of the pandemic, there was only one study conducted in Ethiopia. The study conducted on the health related quality of life and associated factors among covid-19 survivors. The finding the study indicated

that survivors have experienced covid-19 effects on their physical and psychosocial wellbeing as well. Having asthma and chronic obstructive pulmonary disease, having poor health status during admission and longer stay in hospital were identified as determining factors (Kaso et al., 2022).

Another perspective to look in to the situation of pandemics is also available. Although, the devastation posed by pandemics are very clear and damaging, pandemics still give an opportunity to advance scientific knowledge, research, innovation in medicine and so on. In line with this a study by Nelson (2020), indicated that the presence of fewer traffic accidents, minimized crime rates, and disappearances of some infectious disease were observed. Furthermore, it paves the way for developing innovative ways of addressing areas neglected for years like mental health (Esterwood and Saeed, 2020). A website known as Parent have listed ten positive side of the pandemic. More family time, new family traditions, the increased focus on mental health, greater self-sufficiency and better problem solving, better technology skills, broader educational offerings, improved sibling bonds, a greater sense of community, practical understanding of hygiene, and better stress management skills were outlined on the website as positive side of the pandemic (Perry, 2022).

As indicated in the above literatures COVID-19 has enormous effect on the nation, community, individuals, survivors, and particularly vulnerable segment of the population. The effects of the pandemic was incomparable with anything, because it has crashed the economy, threatened the national security of nations, ravaged millions of lives, bankrupted number of business, affected families, impacted the mental health and psychosocial wellbeing of the individuals and so on. But also gave the opportunities the nations to improve on their healthcare system, give more attention to neglected health care focus like mental health, opened doors for innovations and conducted things in new ways. Hence, understanding the various effects posed

by the pandemic helps to better understanding the situations and its effects on the survivors of the pandemic.

2.2 Psychological Effect of COVID-19

Pandemics have hit the world several times in past history of humanity. It puts huge effects on nations, communities, individuals, survivors and vulnerable group of communities through economic disruptions, social discontentedness, on their physical, effect on mental health and psychosocial wellbeing of individuals. Although, prevention efforts made to stop the spread of COVID-19 were crucial, it is evident that they also have a substantial effect on society's mental health. According to Lankrew and Gelaw, (2022), the pandemic is a serious public health disaster in the world that has had a profound impact on Ethiopia's society and way of life. People experienced inescapable psychological distress, worry, sadness, denial, terror, and fear as result of the COVID-19 pandemic. In addition to the pandemic itself, COVID-19 also has emotional, behavioral and psychological effect on communities (Pedrosa et al., 2020). Fear of contracting the virus, uncertainty, stressors like the death of loved one, previous medical issues, and financial hardships are all thought to have an effect on the community emotional and behavioral wellbeing.

Yao et al., (2021) conducted a study in Singapore on the psychological effects of COVID-19 on cancer patients, their caregivers, and healthcare professionals discovered that there was a significant level of perceived danger, anxiety, and worries. To address the aforementioned challenges the research recommended that the importance of specialized intervention tailored to the needs of those populations. Another study conducted by Yitayih et al., (2021), on psychological impact of COVID-19 among visitors of Jima university medical

center in Jima, indicated that high frequency of acute stress syndrome. Participants believed that COVID-19 causes stigma, mild to moderate insomnia and low social support.

At the University of Gonder, Mokenen et al., (2020) conducted their study on the psychological effects of COVID-19 on graduating class students. According to the finding, the majority of students have dealt with psychological issues related to COVID-19 on varying degrees. Stress, anxiety, and depression are the psychological issues that students encounter most frequently. The researchers recommended that the University should set up center of interventions and create a resource base or psychological intervention team in order to address such issues. Study by Simegn et al., (2022) also revealed similar findings stating that the students in Ethiopian universities had a high level of stress during the final stages of pandemic. Contributing factors for the stress include extreme COVID-19 sensitivity; sleep issues, low self-efficacy, and loneliness. On the other hand, another study that included the students from conflict areas revealed that students have experienced a high risk of mental distress. The same study confirms that being women, being given special consideration from security and safety, having witnessed a gunshot, experiencing sexual assault related to a conflict, and performing below expectations were all important signs of mental distress (Madoro et al., 2021).

According to reports, the COVID-19 may have an effect on healthcare professionals too, making them more susceptible to high levels of burnout, which could have an effect on patients care management (Blake, 2020). In some circumstances, the underlying problem might be triggered by the anxiety and worry associated with the sickness. The disturbance of prior daily routines and other issues that may cause feelings of anxiety, abandonment, loneliness, and stigmatization are to blame for its rise (Saha, 2020). In a similar way, another study by Hassen et al., (2023), indicated the prevalence of stress and anxiety among healthcare workers were

reported in Ethiopia. Moreover, study conducted in Amanuel hospital by Mekarim indicated that both the health care staff and supportive staff have experienced psychological issues like anxiety, depression, wordiness loneliness, sadness and discomfort. The same paper showed that administrative and supportive staffs of the hospital have experienced more anxiety and depression than clinical staff.

With regard to the survivors of the pandemic, a study by Jaferi et al., (2022) showed that survivors of COVID-19 have faced mild depression, anxiety, and PTSD. Those feelings were higher among survivors who have comorbidities, long term hospitalizations and ICU (intensive care unit) complications. In similar way another study by Olufadewa et al., (2020) confirms the presence of common psychological effects like anxiety, worry, fear, feeling of uncertainty among the survivors of COVID-19.

2.3 Social Effect of COVID-19

According to Qui et al., (2020) pandemic has a major effect on the social aspects of the nations. The previous pandemics like SARS, led to the closure of schools, economic activities, banning travel, suspending different events like sports, submits, and concerts which cost a lot.

Changes in the community's routines as well as imposed limitations like 'stay at home' have facilitated various forms of abuse. During the lockdown, domestic violence and other types of abuse have been rampant. Alcohol has been banned in several areas to lessen the risk of pandemic and domestic violence exposure. However, such actions have helped to increase the number of patients in India who exhibit abstinence syndrome (Pedrosa et al., 2020).

A cross-sectional study by Buonsenso et al., (2020) on the social effects of COVID-19 in low resource setting with the goal of addressing social effects of COVID-19 during lockdown on

rural village revealed a high prevalence of weekly income reductions, the inability to feed families, and a prevalence of anxiety due to job loss because of the lockdown. The researchers recommended that the importance of raising money to deal with such issues in rural areas with scarce resources.

According to UNICEF (2020), the pandemic in Ethiopia has made conditions worse for the populations most vulnerable and marginalized groups. Domestic violence and other stressors like strict lockdowns, school closures (for children) and job loss creates additional burden to the nation unless special attention is given to such group of population.

Discussing the social effects of COVID-19 Olufadewa et al., (2020), states that survivors of COVID-19 have stigmatization in different forms. Furthermore, even the families of the survivor are equally by the stigma. Number of social effects has been experienced by survivors of the COVID-19 which includes labeling, isolation, stigmatization and discrimination (Chew et al., 2021).

On the other the measures taken by governments to contain the spread of the pandemic has resulted in number of social crisis which includes disruption of business, entertainment, transportation and education Hasan et al., (2020). In similar way Mukhopadhyay, (2020) indicated that the social and economic challenges were experienced by survivors due to the restriction of movement, panic buying, fear of infection, losing of job and adjusting to the new norms.

Furthermore, Uzobo et al., (2022) the people's reactions towards COVID-19 survivors were pity, hatred, disrespect and isolation. Some individuals even discounted the illness as fraud and developed mistrust for those who survived the illness. Without a doubt, the form and style of

stigmatizations that the survivors encountered were mostly psychological. The study indicated that the survivors of the pandemic responses to stigma and prejudice were suicidal ideation, emotional outburst, inferiority complexes, and similar behaviors.

2.4 Theoretical Background

The study considers system perspective and bio-psychosocial and spiritual model in trying to understand the psychosocial effect of COVID-19 on survivors of the pandemic. The following section presents fundamental principles of the two theories.

2.4.1 System Perspective

According to the system approach, social systems that are well-organized and integrated produce human behavior through the reciprocal interactions of their members. Social systems are therefore believed to maintain a state of relative stability. Every component of the system performs a crucial maintenance function, and the various sections tasks are coordinated to create a well-functioning whole. It also presupposes that social consensus and shared values keep social systems intact. All members strive to maintain and restore the homeostasis, or balance, which is normal or healthy condition of affairs that is the emphasis. Each component of the system is thought to benefit from what is good for the whole, and conflict and change are perceived as threats to be overcome (Hutchison and Charlesworth, 2011).

2.4.2 Bio-psychosocial and Spiritual Model

The core ideas of Bio-Psychosocial and Spiritual Model, the framework is about the viewing the person holistically. The biological, psychological, and social aspects of an individual are the main components of the model. The biological component is about the person's knowledge of physical and model issues. This element is typically evaluated to understand how

an individual's biology functions, including their genetic makeup to determine whether they are genetically predisposed to certain disease. The second component of the model is about person's psychological makeup. This characteristic of person's emotional make up, self-worth and self-esteem. This has to do with the person's thoughts, perceptions, attitudes and chemical equilibrium. The third component of the model is social. The social context of the individual is made up of the interactions with others, relationships, cultural customs, rituals, and community ideals (Rogers, 2010). The model's fourth element is individual's spirituality. It refers to people or groups courting the transcendent, however it may be constructed. People express their spirituality through non-secular activities or through their interactions with nature, music, art and other forms of expressions. Anyone who seeks ultimate transcended meaning, regardless of their affiliation with a particular religion, is said to be spiritual (Sulmasy, 2002).

The research process in this study is guided by the bio-psychosocial and spiritual model and system perspectives. Because these theories provide us with a thorough understanding of how COVID-19 affects survivors of the pandemic. According to Hutchison and Charlesworth (2011), the fundamental tenets of bio-psychosocial and spiritual model are supported by sound conceptual, theoretical, and empirical evidence that there is connection between physical, psychological, social, and spiritual experiences. Understanding the interrelatedness, interdependence, and a state of homeostasis of systems is made much easier with the use of a systems approach. It directs how we see how organized, integrated social systems interact and work to produce human behavior.

2.5 Conceptual Framework

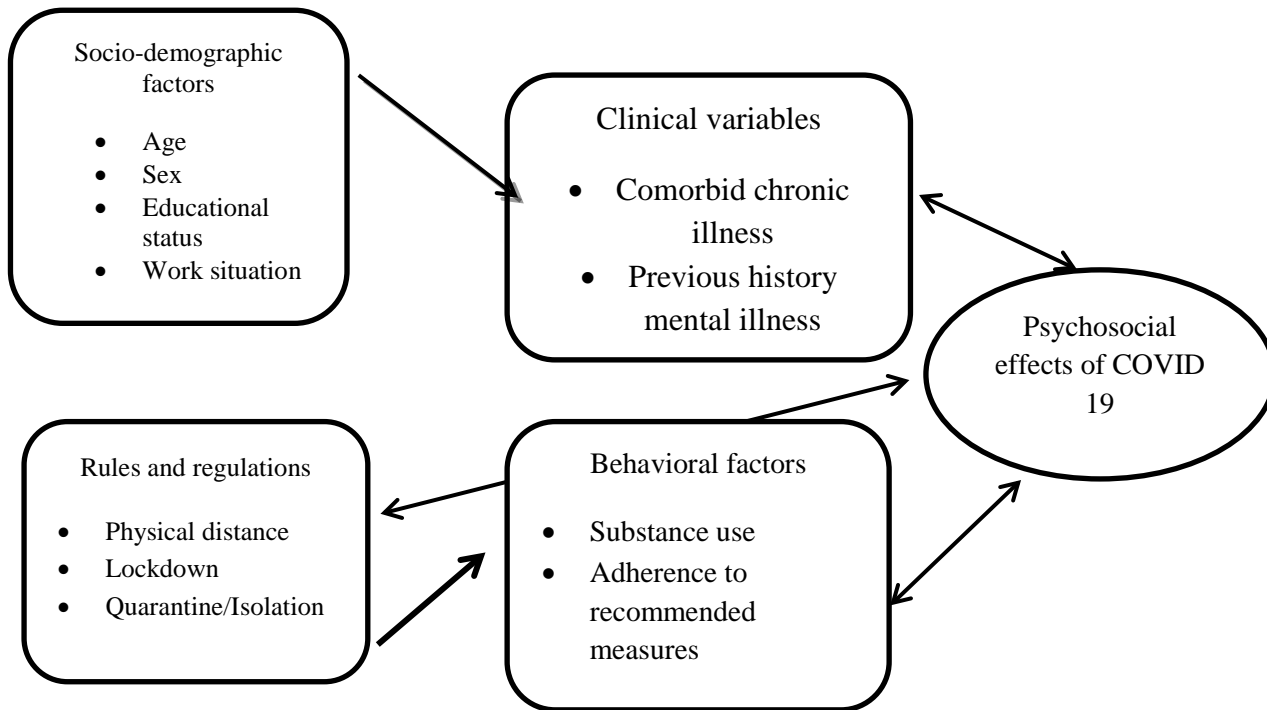


Figure 1: Conceptual framework adopted from Dubey et al., (2020) and Mongeda et al., (2021)

Conceptual framework provides the researcher with clear understanding of the problem at hand and led the way and guides the study. Moreover, the framework shows different elements come together to facilitate research and clear understanding of the findings. Therefore, the above figure of interrelated shapes shows concepts that are interrelated, connected and linked showing how one concept is influenced by another and how it influences others and be factor or cause of another problem. As we can see from the above drawing the psychosocial effects of COVID-19 emanates from different factors, for instance someone can be affected their psychosocial wellbeing as a result of rules and regulations imposed to control the spread of the virus. In opposition to that claim if someone infected by COVID-19 they under go through quarantine or isolation even treatment center, being at such centers by itself creates a psychosocial disturbance

to that person. Adhering to the rules and regulations imposed in one hand good but it also difficult for those who abuse substances. The other issue is that studies confirmed that psychosocial effects can vary based on gender, age, work situation, educational status and on the other hand some factors like previous history of mental illness and comorbid chronic illness affect the psychosocial wellbeing of person differently. The above conceptual framework was only used to understand the problem under discussion, it was not used to do analysis and make generalizations.

2.6 Summary of Literature Review

Throughout human history, pandemics have had a substantial effect on variety of facets of life. The national security, healthcare system, psychological, socioeconomic disruptions and education of a society are all significantly impacted by pandemics. In addition to those measures taken to control the spread of the virus also have huge effect on the psychosocial wellbeing of COVID-19 survivors. Furthermore, survivors of the pandemic have experienced depression, anxiety, stress, PTSD, isolation, stigma, discrimination, and other psychosocial effects. Fear of contracting the virus, having contact with returnees from the abroad, fear of losing loved ones, prolonged stay at hospital, and going through intensive care unit were considered to be factors that determine the psychosocial welling of the survivors. The literature also tried to cover the theoretical background and conceptual framework that were important for understanding the nature of problem both from the perspective of the theories as well as the conceptual framework. To sum-up, as we can see the literature, these experiences were similar to what the survivors of the previous pandemics (Ebola and MERS) have experienced. Therefore, Understanding those effects from the previous studies is crucial for understanding the overall situation of participant's current study.

Chapter Three: Research Methods

This chapter presents the research method employed in conducting the study. It presents the overall research methods employed with justification. The major issues discussed in the chapter are philosophical paradigm, research design, sampling technique, method of data collection, method of data analysis, quality assurance and ethical considerations.

3.1 Philosophical Paradigm

The researchers' position on reality is expressed in their philosophical paradigm. The paradigm employed in this study is constructivism or subjective because the purpose of the study was to understand and describe the participants experience. The proponents of this paradigm, according to Blaxter et al., (2006), consider interpretation of the social world as culturally derived and historically placed, concerned more with understanding than explaining. People also perceive comprehension of environment in which they work and live.

3.2 Research Design

A qualitative method is used to research the psychosocial effect of COVID-19 on recovered patients. According to Alison and Bowles (2003), qualitative research method favors to come up with knowledge of social reality or phenomenon from observable pattern of life. The goal of the qualitative research approach is to achieve depth rather than breadth by gathering and evaluating material in non-numeric forms with a focus on delving into the specifics of a small number of examples thought to be fascinating Blaxter et al., (2006). This type of method tries to understand a given research problem or topic from the perspective of local population which is very useful for researchers to get a rich and complex understanding of specific social context (Mack et al., 2005). Therefore, phenomenology was employed as a research design of the study.

3.3 Study Setting

EkaKotebe General Hospital is one of the public hospitals in Addis Ababa. It is located in front of St. Gabriel Orthodox Church in Wereda 12, Yeka sub city. The hospital was established in October 1, 2019 with the aim of providing health services. Initially the hospital was built to provide healthcare services to the community with 350 beds capacity in which half of it designated to psychiatric services. The reason for selecting study setting is that up until recent the hospital has served as national center for treatment of COVID-19 patients.

3.4 Inclusion and Exclusion Criteria

The inclusion and exclusion criteria are essential for any research study. Thus, in this study the inclusion criteria was; all patients who have been infected and recovered at EKGH. The exclusion criteria were patients with psychiatric illness and children.

3.5 Participants of the Study

Being able to choose people or places that would effectively conceive the problem and study question is the fundamental basis of qualitative research (Creswell, 2014). The objective is to select the sample based on a few factors that are thought to be crucial for the specific study (Singh, 2006). Accordingly, non-probability sampling was employed specifically, convenience sampling technique in order to gather important information from recovered patients and employees.

It is hard to choose how many people you may include in the study while using purposive sampling technique. Instead, the researcher is free to continue using the sampling method of his choice up until the point at which the data saturated (Dawson, 2009). However, according to Creswell, (2014), the minimal number of participants in the study is four-five individuals who

can participate in face to face interview with unstructured, open-ended questions. In this study, 11 individuals who recovered from COVID-19 at EKGH have participated on the face to face interview.

3.7 Method of Data Collection

The method of data collection is a way to obtain data for the research project. In this study, the researcher conducted in-depth interviews with the study participants in order to collect crucial information and understand more about the psychosocial effect of COVID-19 on survivors of the pandemic.

3.8 Data Gathering Procedures

The in-depth interview with participants of the study was conducted in EkaKotebe General Hospital. Three participants of the study agreed to participate on the interview, as they come for their scheduled checkup after getting discharged from the hospital. In order to get more participants the researcher contacted the hospital authorities to get contacts of the participants who recovered at EKGH. 12 participants were agreed to participate out of 40 contacts obtained from the hospital and eight of them come and participated on the interview. The researcher attempted to create a conducive environment with the participants to facilitate the data collection by designing a good time plan and taking into account all ethical considerations. Additionally, the researcher requested permission from the participants to utilize an audio recorder during the interview. Hence, I employed audio recording for in-depth interviews and key informant interviews for both the participants and key informants of the study. Different pseudo name was assigned for each participant to maintain confidentiality of information obtained from the participants.

3.9 Method of Data Analysis

In order to determine what is significant to convey to others, analysis of qualitative data entails dealing with data organizations, segmenting into manageable pieces, and looking for patterns and themes (Bodgan and Biklen, 1992). Because of this, the researcher employed the phenomenological data analysis. The reason for employing phenomenological analysis was that, this method provides the best way to analyze the subjective lived experiences of individuals who experienced similar issues. Therefore, using this method to analyze the psychosocial effects of COVID-19 on the survivors of the pandemic was important to achieve the objective of the study.

3.10 Quality Assurance

There is always a risk of an unfair, dishonest, or unethical investigation, according to Kruger and Neuman (2005). All social science researchers aspire to conduct research that is impartial, faithful, fair, and honest. Therefore, peer debriefing was employed to ensure the quality of this research. Peer debriefing is described by Lincoln and Guba (1985) as “the process of exposing oneself to disinterested peers in a manner paralleling analytical sessions and for the purpose of inquiry that might otherwise remain only implicit within the researcher's mind” (p.3). It will lessen the likelihood of incorrect translations and data presentations.

Another strategy to insure the quality of the study was the utilization of member validation. According to Creswell (2014) member validation involves participants being asked to confirm the information they have provided by looking at the final report or specific topic descriptions. To this end, selected participants were participated in follow-up interviews to allow them to confirm the veracity of the data they had provided.

3.11 Ethical Considerations

Regardless of the approach, qualitative research may face ethical issues that will surface during data collection in the field, in analysis and disseminating qualitative reports (Sarantakos, 2005). BodganandBilken, (1992) group's ethical issues into informed consent procedures, deception, confidentiality toward participants and protecting the anonymity and privacy research participants. Therefore, in this study the researcher consciously considered ethical issues in seeking consent, right to participate and withdraw avoiding deceptions, maintain confidentiality, respecting the privacy and protecting the anonymity of sample respondents.

Chapter Four: Findings of the Study

In this chapter, findings are presented which are organized in line with the objective of the study and the research questions. The chapter begins with background information on the participants, followed by the major findings of the study. The major findings the study were categorized under four major themes. They include: the psychological effects of COVID-19 on recovered patients, the social effects of COVID-19 on recovered patients, the response to psychosocial needs of COVID-19 patients, and the coping mechanisms of COVID-19 recovered patients.

4.1 The Background Information of Participants

This section contains profiles of 11 survivors of COVID-19 who participated in the study. Background information of participants included their pseudo names, age, sex, educational level, religion, marital status, and occupation. The listed profile was presented just to provide a description of the participants and was not used in analysis whatsoever.

Table 1:- *Background Information of Participants*

No	Pseudo name	Age	Sex	Marital status	Religion	Educational level	Occupation
1.	Aberash	27	F	Single	Protestant	BSc	Public servant
2.	Ayelech	56	F	Married	Orthodox	3 rd grade	private
3.	Anbese	41	M	Married	Orthodox	12 th grade	Public servant
4.	Abebech	45	F	Married	Orthodox	12 th grade	Public servant
5.	Hinsarmu	40	M	Married	Protestant	BA	Public servant
6.	Kebede	49	M	Married	Orthodox	Illiterate	Daily laborer
7.	Abel	62	M	Married	Orthodox	10 th grade	Private
8.	Shamsia	40	F	Married	Muslim	Diploma	Public servant
9.	Elsa	43	F	Widow	Orthodox	Diploma	Public servant
10.	Dagne	29	M	Married	Orthodox	BSc	Public servant
11.	Munira	38	F	Married	Muslim	8 th grade	Unemployed

The table below presents socio-demographic information of key informants. The key informants of this study were service providers to the COVID-19 patients including social workers, nurse and management staff of the hospital. The table contains names, sex, age, marital status, educational level, religion, occupation and position in the hospital.

Table 2:- *Socio-demographic information of key informants*

No.	Pseudo Name	Sex	Age	Marital Status	Educational Level	Religion	Profession	Position
1.	Mikiyas	M	30	Married	BA	Orthodox	Social Worker	Social Work Department Head
2.	Daniel	M	29	Single	BA	Orthodox	Social Worker	Social Worker
3.	Samira	F	33	Married	BSc	Muslim	Nurse	Nurse
4.	Henok	M	45	Married	MD	Orthodox	Physician	Quality Department Head

4.2 Psychological Effects of COVID-19

This section of the paper presents different psychosocial effects of COVID-19 experienced by participants of the study. Participants of the study revealed that they have experienced different psychological effects in different forms. The main findings of the study in

relation to the psychological effects of COVID-19 include anxiety and depression, fear and worry, feeling of uncertainty, loss of hope, and PTSD. Each of these psychological effects is briefly presented below.

4.2.1 Anxiety and Depression

One of the reactions that the participants had when they initially learned they were COVID-19 effects was anxiety and depression. The participants said that they were traumatized when they initially learned that they had COVID-19 because of the information that was spreading about the rising death toll around the globe. Aberash recalls her encounter as follows:

The overwhelming panic and difficulty focusing have both happened to me. And occasionally the stressful circumstances I was in made me feel depressed. Not getting your families, being unable to leave whenever you want the hospital, especially when I read of stories about not being able to meet your families and possibly dying alone.

Participants' reactions when they hear of their COVID-19 status varies, other participants confirmed that they experienced feelings like fear, being confused, being shocked, feeling anxious, traumatized, and doing unexpected things. On the other hand some patients do unexpected things due to fear of the COVID-19.

Elsa recalls her experience as follows:

I was quite anxious and worried that I would be one of the first victims, when I heard that there was a first case in our neighborhood. I learned it, while I was in hospital for testing to determine whether I have COVID-19. I promptly left the hospital after learning the news since I didn't want to wait for the outcome.

Before even the confirmation can be made, I have travel to my families in Hosaina countryside for around three months. Since I have a virus in my blood, and the overwhelming rumors about those who have comorbid illness will suffer more than others game me a shock.

In general psychological effects experienced by participantsdiffers from each other as they calmed that they have encountered psychological effects because COVID-19. Participant's reactions also varies from person to person the common experiences they reported are being fearful, anxiety, confusion, being anxious, and traumatization. However, there few participants who did unexpected things as know their COVID-19 status.

4.2.2 Fear and Worry

Participants of the study had experienced that fear and worry after hearing that they are been confirmed to be COVID-19positive. The participants of the study confirmed that at first the fear of death was enormous and later consistently worried about suffering and death from the illness.

Anbase said he was not worried about himself. In his own words:

I have never worried about myself, but the idea of leaving my young children without a breadwinner terrifiedme. We hear throughout the day how many people have died as result of the virus, and I have also heard about it, so i have been really concerned. I was concerned about leaving kids without a father. I know how hard it is to live without a dad, I had the fear that it may happen to my children too.

Others fear and worry because of the uncertainty about the pandemic which may also be reasons for infecting their loved ones and traumatizing news updates of COVID-19 taking lives. For instance, Abebech confirmed that it was traumatizing for her to hear her status because of the family situations.

Ababech recalls the situation that left her with trauma. She reported:

My family and I live together in the same house; I was the first one to get sick. I was quite concerned for my grandfather because he had diabetes and might get corona from me. I was always worried about him. We unfortunately lost him during that period. Corona left me with heart scars that will never heal and I constantly hold myself responsible for losing him.

Others fear and worry because they may be isolated from families and friends, may lose their jobs and unable to earn income as result which may experience financial difficulties. Aberash was one of the participants who claimed that she was worried a lot about her family. She described:

The rising cost of living and restriction of movement to get what you want were very worrisome. Later with only minor mobility restriction, things resolved, and I was allowed to leave the hospital and once again assist my family members.

Other participants (Elsa, Abebech and Dagne) have stated that they have been shocked at first when they heard their COVID-19 results. Their major concerns were almost similar for all of them.

Elsa stated her experience as follows:

I have one child whose father died few years back. I am raising her working alone. As a result, I had a severe fear of dying and struggled to relax for long time. I was also quite concerned about my child's future. Being upfront about my HIV/AIDS diagnosis has made me widely known among neighbors, and because I already face a lot of stigma and discrimination, adding this was really challenging.

According to the participants of the study, they feared and worried a lot because of different reasons. The major reasons reported by the participants were fear of death, losing of families and friends, losing of a job, uncertainty about the illness, fear of infecting their loved ones and worried about the fate of their families and children in case they died.

4.2.3 Feeling of Uncertainty

The participants of the study reported that they were not certain about what will happen next. With the sudden restriction of movement and lockdown of the city, the disruption of living patterns created a huge feeling of uncertainty. Following those measures taken by the government, participants recall the feeling of uncertainty they have experienced.

Kebede was one of the participants of the study and he recalls his experience as follows:

I am the breadwinner for my family; I am the only one who supports my three children and wife by working as daily laborer. All of the sudden work stopped, there was no transportation, and total lockdown was announced. On top of that, I have been confirmed to have been COVID-19 positive; I was taken to quarantine center and then here EkaKotebe Hospital which served as a quarantine center. I

didn't know what to do. I was not sure what will happen next or what will happen to my children if I die. I have never been confused to this extent.

On the other hand, other participants also felt the uncertainty posed by the pandemic. As reported by the participants since the nature of the illness was not clearly known, it was very difficult not to feel the confusion because of the uncertainty surrounding the illness. In a similar expression Abebech recalled her experience during that time. She said:

I have no idea what is going to happen next, so I was worried a lot. They took me suddenly to isolation center and it was the hardest two weeks of my life I didn't know what to do and do not know what will happen next with my children and family. I was confused what to do and I was upset and blamed God for bringing me to this hard life situations.

Another participant also claimed that the confusion was due the uncertainty about the pandemic; especially Elsa claimed that the rumors about the fatality of the illness on the people with comorbid illness were very unsettling. Elsa had reported similar experience. In her own word:

I was not sure what was going to happen in my life while I was in the hospital. 'I have been worried about how I will get through this, get out of this hospital, and get back to my child. I asked similar boring questions again and again to the doctors in the hospital about my status and making it alive out of the hospital. The level of uncertainty rose when I heard that would have to move to the intensive care unit for close observation and better management of the condition. I was not sure if I could make it out of the ICU, and I was worried much.

The findings of this study shows that participants have experienced some level of uncertainty about the future amide in the time of COVID-19 pandemic. The reasons for such uncertainty were attributed to the unknown nature of the illness, rumors about pandemic especially on those who have comorbid illness, the rising death toll. However, Hinsarmu was certain that this all wave of uncertainty will pass. He reported: “I was not confused what will happen next. After I knew my positive COVID-19 status, I directly went to prayer and repentance to God and I was sure he will deliver me from this burden”.

1.2.4 Loss of Hope

Participants of the study have experienced a loss of hope after being diagnosed with COVID-19 and joining quarantine and treatment centers. This is one of the common psychological experiences the study participant had experienced specially those who had comorbid illness.

Shamsia explains her experience as follows:

I have been hearing a lot of information about COVID-19's effect on HIV-positive individuals. At that point, I began to take greater precautions to prevent the infection, but things didn't turn out the way I had hoped. I was terrified to death when I learned the tests result. I felt hopeless.

Other participants have reported that the feeling of hopelessness caught them when they heard of they need to undergo another treatment level in hospital like surgery and going through intensive care unit. Here, going through ICU is one of the toughest stages of the treatment process while fighting COVID-19. Abel stated his encounter as follows: “When the doctors told

me to go through surgery, I felt numb. I feared that I will not make it out of surgery. The feeling of hopelessness had taken me. I do not know what to do”.

Munira also confirmed she had similar feeling like the above participant during that time. She stated her experience as follows:

It devastated me knowing that I might have to transfer to intensive care unit because many patients who do so do not survive. This is more terrible news following the COVID-19 infection. When I learned the outcome, I was friend. It was even worse to hear that I would have to go into an ICU. At that moment, I felt hopeless, worthless, and weak; I could not do anything.

The participants of the study confirmed that they have felt hop lenses because of the nature of the illness, their own specific situations and the rising death toll of the pandemic. As reported by the participants, having comorbid illness or having chronic illness has huge effect on their recovery too. Coupled with vast media coverage of the situation and the dying people they observe in the ICU, they have reported that the situation was worrisome for people with comorbid illness.

4.2.5 Post-Traumatic Stress Disorder (PTSD)

Participants of the study have reported that they have experienced some flashback of their past experiences. This form of psychological problem usually known as PTSD which is a type of trauma that arises from experiencing or witnessing traumatic events like combat, crime, major accidents, natural disaster, rape or violent personal assault. The participants of the study have reported that they have experienced such form of experiences that triggered while they recall those times.

Abel recalls his experience of PTSD as follows:

Every single pain I felt comes back to me whenever someone mentions COVID-19. I continue to worry that it will return and cause me to relive that unfortunate time in my life. Sometimes I will be scared to death when I hear cough sounds, even at home. I constantly protect myself by wearing a mask wherever I go, especially when I take a taxi, attend a conference, or go anywhere else where I have suspicion that there may be airborne illness.

Since recovering from the pandemic participants claimed that they have experienced disturbing flashbacks. Such experiences were mainly reported from those who underwent through ICU and surgical war as well as those who had chronic illness. The other participant claims experiencing the same encounter, but in different way than others. Dagne shares his encounter as follows:

Whenever I recall that time at the hospital, I feel like I am terrified; sometimes it even disturbs me in my dreams. Therefore, I try to avoid recalling that time. Instead, I try to take care of myself as much as possible, and I still practice preventive measures like avoiding crowd, always wearing a mask, and frequently washing my hands. That way, I can be certain that I am also preventing other illness.

PTSD was one of the psychological effects experienced by the participants of the study. Such experiences were reported from some of the participants some of them still fear the idea of having conversation about their experiences, one of them also claimed that he had become very

obsessed with the taking precautionary measures like wearing masks, avoiding crowds, and washing hands frequently.

1.3 Social Effect of COVID-19

The other major finding of the study is social effects of COVID-19 which is presented with subthemes. The subthemes of social effects of COVID-19 are social isolation, restriction of movement, suspension of gathering in worship center, and discrimination and stigma. Findings on each of these social effects of COVID-19 are presented below.

2.6.1 Social Isolation

The participants of the study have reported that they have felt loneliness although its degree varies. Due to the contagious nature of the pandemic anyone suspected of COVID-19 has to be isolated immediately from others. It was one of the hard things to do for those who do not have enough rooms for such purposes. Ayelech recalls the moment as follows:

I live with my two children in a room I have rented. It was difficult to do the isolation protocol living in one room. My children keep coming to me. I did not know what to do when the health authorities informed me of my results and advised me to isolate myself immediately. I informed them I don't have extra rooms for isolation; they sent me to an isolation center. So, it was one of the most difficult times for me at that moment.

The measures taken to prevent contagious spread of the illness has also influence on the day to day activities and interaction of the people. Participants of the study confirmed that they were also influenced by those sudden measures and it was challenging for those who do not own their own homes or live in single room.

Hinsarmu recalls that he and his families were very confused of what to do after hearing that they are both diagnosed with COVID-19. He expressed the frustrating situation in his words:

I have no idea what to do; our home is very narrow, and we could not isolate ourselves immediately, and health authorities did not come early to take us to the isolation center. Our neighbors also stopped their interaction with us completely. I felt like we committed a huge crime against them at that moment, but now I think they were right to do that because of the lack of enough information about the pandemic at the moment. Later on, things went better after getting more information about COVID-19 from the health professionals, especially the way the doctors made us calm down and open about it in very simple terms, and that was very helpful at that time. That encouraged me to assist new patients in our room voluntarily in the hospital.

Social isolation was reported from the participants of the study. The major reasons for such social isolations were not having more than one room so that they can effectively and properly isolate themselves until health authorities take them to the treatment centers. Others claimed that before being admitted to the treatment center they have went through isolation center which was very difficult, as the attention given to the participants were not similar with that treatment centers. The participants claimed that the food, the follow-up, and the setup of the centers were not suitable.

2.6.2 Restriction of Movement

The finding of the study shows that restriction of the movement has put the participants of the study under difficult situation. Following the imposition of lock down and restriction of

movement the existing living pattern of people has been disrupted. The participant of the study confirmed that the disruption of work, school, community engagement and other activities has put family functioning under pressure.

Ayelech recalls the moment and expressed the situation as follows:

Since I am the only breadwinner of the family, the disruption of work and finding me in the hospital was so difficult. I was confused and did not know what to do to help my family, especially financially. Even before coming to the hospital, the restriction of movement had an unimaginable effect on my work. I have small scale trade ('Gulit') work on the side of the street, selling cabbages, carrots, potatoes, tomatoes and other vegetables. The sudden restriction of movement has made the early days of COVID-19 very harsh for those of us who works as street vendors. There were limited numbers of consumers who visited us on the street, which led to a very low income that even did not cover our daily expenses for our family. On top of that, the rising costs of living influenced our lives.

The effect of restriction of the movement was also another issue that affected the participants. The restriction of movement has affected small business of the participants, limiting their incomes and also the rise of cost on the other hand. In a similar way Dagne stated that:

The disruption of work has affected family members and even the nation. The restriction of movement affected the income of our small scale business, which we rely on for a living. It was not able to generate extra income we could spend on our daily living costs. Therefore, I have to spend my small savings for the daily expenses and living costs.

The restriction of movement has put a lot disruption in daily living pattern of the community. However, some individuals claim that they have got an opportunity to engage with their family members after a long time. In this regard Abel states that he has got a chance to have appropriate interaction with his child after long time. Abel expressed in his own words that:

The restriction of movement has been challenging since we were not accustomed to it. I personally lost a lot of profits within few days because my business involved the trade of perishable items. However, it has given me the chance to really know my daughter, play with her, and watch out for her. Apart from the challenges, I also recall having that opportunity.

The disruption of daily activities by the imposed restriction of the movement has affected their daily living pattern including their business. Other participants also confirmed that beside the decline of daily income from their business they have observed the rising cost of items on the made life challenging. However, one participant in particular claimed that he had the opportunity to spend his time with families properly after a long time.

2.6.3 Suspension of Gathering in Worship Centers

The other common thing observed from the response of the study participants were the effect of COVID-19 on mass gathering to practice prayers and suspension of religious activities as a group. The study participants which are followers of different religious denominations have indicated that they have been affected by the suspension of such gatherings in religious places.

This has been described by Kebede as follows:

The interruption of religious activities by the church was the other challenging thing I went through. My home during my difficult times was 'Kidhanemihret',

but I was unable to visit when I needed her blessings, even if I still have a lot to be grateful for.

The participants claimed that suspension of religious activities have affected them in different ways. Dagne who is follower Muslim religion recalls his experience as follows:

The stoppage of religious activities had a significant effect on my life, especially since I was unable to attend Friday prayer 'Juma' in mosque. We visit the mosque every Friday to offer prayers to Allah. My family and I have been affected by the suspension, which has taken away from us some of most joyful and beautiful religious activities.

The participants of the study claimed that suspension of religious activities affected them. Such effect differs the level involvement in their religious practice was affected. Hinsarmu who is protestant explains that the effect of suspension of religious activities during the restriction of movement.

Church services are very important part of my life, but during that time, suspensions of religious activities affected our life pattern. Before being admitted to the hospital for COVID-19, I could not go to my church because it was suspended at that time; I had to pray at home. Since I preach sometimes, I have to go to church and pray preach and do my fellowship with God and people of God; however, that was difficult, I missed my church a lot, which was very disappointing. Because, whatever the problem is, I believe that it cannot be beyond the capacity of God almighty, who sustains the living and nonliving things of the earth with his superpower. I was even against those directives that

suspended the religious activities from being held with their usual ceremonies and activities that support and encourage the followers of the faith.

The suspension of religious activities at worship center was one the effects reported by the participants of the study. The close involvement with religious activities have affected their reliance on their God/Allah as they claim the need be closest in times of the difficulties and challenges in their lives. The suspension neglected them such opportunity as they claimed in the report. Even one the participants clearly opposed the idea of suspension of religious activities effect stating that everything is possible with God.

4.3.4 Discrimination and Stigmatization

The other finding from the study is discrimination and stigmatization. The participants in the study explained that they have experienced some level of discrimination and stigma because of the corona virus pandemic. The participant's claim that the reason for the discrimination were because of contracting the pandemic, fear of getting infected and previous history of having other chronic illness. Such treatments were observed from neighbors, friends, colleagues and service providers.

Elsa recalls her experience as

There was huge stigmatization and labeling among community during COVID-19. During the early days after getting confirmation of being effected, I have been discriminated against. The level of discrimination at that time even exceeded the normal; level because, in part, I live with the virus and, in part I got COVID-19, which was very hard for me at that time. I heard that my neighborsrumored about

me and made me good issues for their coffee time ‘□□□□□□□□□□□□□□□□’ and

I will not forget that time.

Another issue during COVID-19 time was the way people treat you right after knowing the COVID-19 status. In this regard participants claimed that they feared that being taken to hospital by the military men made them worry as their treatment were very harsh. In this regard Munira stated that there was stigma and discrimination related with COVID-19 positive. Munira explained:

During that time, I have been isolating myself until the health officers come and take me to the hospital. I was shocked that there were police officers with the health officers who came with the ambulance to take me; I felt as if I had committed a crime. The commands of the officers are difficult, and that was where I started to be worried and fear that a same treatment will continue in the hospital too.

The stigma and discrimination experienced by the participants includes colleagues from the work environment. Such treatments were observed in relation to the fear of contracting the virus. Shamsia also recalls that moment and she said that:

On the other hand, after contracting COVID- 19 and getting appropriate treatment in the hospital, I get back to my work. However, the way they treated me was very strange; they refused to come close to me, and my boss informed me that I should get an additional day off work. That was a horrible experience, and I was very angry the way they treated me.

The stigma and discrimination experienced varies from participant to participants. For instance, some colleagues of participants were shocked and others cry because of the fear that have had also contracted the virus. Anbase also claims that he has not been treated well at work after the COVID-19; he states his experience as follows:

I have been working in an office, and I have given my sample test for COVID-19. After three days, the health authorities called me and informed me to get isolated until they come and take me to the hospital. One of my colleagues has started crying after hearing my status; in fact, she was pregnant, but I didn't come close to her those few days, and other staff members of the organization have also refrained themselves from coming close to me. At that time, my boss called me from the other office and told me to leave the office and wait for the health authorities at home.

Discrimination and stigmatization were experienced by the participants of the study because of contracting the virus. Such treatments of participants were forwarded from the colleagues, friends, neighbors and community. As per the report of the participants, the fear of getting infected, having previous chronic illness and inhumane treatments from the authorities while taking them to centers were the main reasons attributed to the stigma and discrimination.

Chapter Five: Discussion

This study focused on the psychosocial effects of COVID-19 on recovered patients. The chapter presents the discussion in line with the findings of the study. The findings of the study are compared with the existing literature that has been done so far. In the following pages the major themes from findings which are psychological effects of COVID-19, social effects of COVID-19, response to intervention of COVID-19 and coping mechanisms of COVID-19 by patients were discussed in detail.

5.1 Psychological Effects of COVID-19

The findings of the study showed that participants of the study have experienced various psychological effects because of COVID-19. The list of the psychological effects identified from the findings of the study are anxiety, fear, worry, depression, loss of hope, feeling of uncertainty and PTSD. In line with this study, a research conducted by Olufadewa, et al. (2020) revealed that psychological effects like anxiety, worry, fear, and feeling of uncertainty were identified. The survivors of COVID-19 experiences of such psychological effects are related with the uncertainty about the illness, isolation, disturbing health information from health authorities. In same way, Jafri et al. (2022) reported that survivors of the COVID-19 pandemic have experienced mild depression, anxiety and PTSD on various scale. Such feelings of the psychological effects were more prevalent especially among those who have comorbid illness. In similar way COVID-19 survivors experience PTSD due to the long term hospitalization and ICU related complications at hospital (Huang, et al, 2022). Therefore, as seen from the findings of the study survivors have experienced different psychological effects which were similar with other studies. With regard to, the level anxiety, depression or PTSD the current study could not confirm, because the method employed to examine the problem was not standardized tools.

These studies also agree that factors that can be attributed for psychological effects on the patients recovered from COVID-19; such factors are fear of re-infection, traumatic experience in ICU, being hospitalized for long time, other ongoing health concerns like comorbid illness. Moreover, low quality of life, severity of the illness and existence of comorbid illness can worsen the psychological effects experienced by survivors.

Another study confirms that a significant number of survivors are experiencing physical or mental distress to varied degrees. People with PTSD suffer to a greater extent from ongoing respiratory difficulties, trouble sleeping, worry and worry, and poor quality of life (Huang et al., 2022). Sher (2020) goes further and claim psychological effects experienced by survivors especially depression signals that they are at risk of committing suicide. Therefore, greater attention is required to address the unique needs of COVID-19 survivors including their mental and psychosocial wellbeing. The current study results are consistent with the most of the findings of previous ones, however, as seen in Sher (2020), the current study did not find that survivors reporting their suicidal ideation or thoughts. In general, the major psychological effects of the pandemic on the survivors were anxiety, fear, worry, depression, loss of hope, feeling of uncurtaining and PTSD. These are consistent with results of the previous studies.

5.2 Social Effects of COVID-19

Social effects of COVID-19 on survivors can vary from place to place and from culture to culture. However, this study indicated that common social effects of COVID-19 on recovered patients are social isolation, restriction of movement, suspension of faith based organizations and discrimination and stigmatization. Those social effects of COVID-19 on the survivors experienced those effects because of the measures taken to contain the spread of the pandemic, with regulations that go against the daily routines of the survivors and in turn contributed to the

isolation from the community, financial difficulties, stigma and discrimination in community, social networks and even in their own families.

Study conducted by Olufawedwa et al., (2020) revealed that COVID-19 survivors have experienced stigmatization like it was observed in previous epidemics. Such experience of stigma might lead to discourage the need to seek medical treatment or also subject to face social avoidance, physical violence and denial of basic services. In similar way another study by Kang et al., (2023) indicated that COVID-19 survivors have experienced both perceived and enacted stigma from their social relations, work place that has resulted with up to lose of job. The study added that aggravating factors for such stigmatizations are being transported by ambulance, receiving a case number, going through isolation and quarantine. Moreover, a study by Chew et al., (2021) indicated that not alone the survivors of the COVID-19 but their families also been targeted and experienced similar effects of such as labeling, isolation, stigmatization and discrimination. The findings of this study shows similar issues with the above claims, as participants confirmed they have been discriminated and stigmatized because of being COVID-19 positive. They claimed that even their family members were discriminated and isolated from community engagements.

On the other hand survivors of the pandemic also affected by both social and economic effect these effects include stigmatization and discrimination at work, unemployment and financial challenges after the recover. Mukhopladhayay, (2022), revealed that the common social and economic challenges that affected the overall wellbeing of the community are restriction of movement, panic buying, fear of infection, losing job and adjusting to new norms.

In the current study, patients experienced challenges of the financial difficulties as they lost their previous work because of the illness that took longer time to recover. Similarly, a study by Waters, (2023), confirms that reduced hours or job loss were linked to high financial toxicity, high material and behavioral financial hardship for any reason, and high material and financial hardship for any reason. Beside all these issues the long term effects of COVID-19 might be altering the career paths of many individuals who recovered from the pandemic due to the challenges posed by illness changing psychical appearances and developing long term diseases and lose of previous work. In line with this the current study Shah et al., (2021) also showed that the majority of survivors have spoken of experiencing agony, discomfort, and being unable to perform their daily tasks.

Furthermore, a truly holistic approach to patient care must take into account the patients physical, psychological social and spiritual needs (Sulmsay, 2002), which is consistent with the findings of the current study as a number of patients experienced biological (physical pain), psychological (psychological experiences like anxiety, fear, PTSD), social (stigma, isolation loss of jobs) and spiritual (uncertainty about the future). Hence, it is very important to understand the complexities of such problems by nature and bring on better ways of dealing with such problems without relying on single factor or to approach the problem in holistic way to obtain more effective, efficient and sustainable result.

With regard to suspension of religious activities and practices the study finding shows that participants were very worried about it because they consider religious activities as their source of strength and getting in contact with their God/Allah. In line with current study, another study conducted in Nigeria by Omopo, (2021) indicated that at first both religious leaders and their congregation were surprised with measurement taken by authorities. Later on they became

familiar with new normal employing nonphysical and technology supported worship and services. Often such religious activities and practices are considered as important coping mechanisms to get relief from their overwhelming situation which resulted from the pandemic. As cited in Isiko, (2022) (Sibley andBubilia, 2012) natural calamities and pandemics according to earlier researches cause people to become more religious and turn to God. But in case of this pandemic people were argued to close their worship places to contain the pandemic and tried new means of worshipping their God. However,still people consider their religious activities as means of coping strategies. This is consistent with findings of this study, which revealed participants considered religious activities as important coping strategies to get relief from COVID-19 related stress and uncertainty. Others even opposed against the measures that suspended mass gathering worship claiming that for God everything is possible.

System perspective is a perspective that views human behavior as result of reciprocal interactions persons operating within organized and integrated social systems. Due to the nature of systems when one system mal-functions it will affect other interrelated and interdependent sub systems and leads to fail (Hutchison andCharlesworth, 2011). According to Hasen et al., (2020), the COVID-19 pandemic had unanticipated effects on every aspects of life, including the business, entertainment, transportation and education. The domain of unintended consequences, which is crucial area in systems thinking perspective,was also highlighted. This means the overall systems have been heavily affected by the pandemic.

Moreover, lives of people lost, number of individuals has lost their jobs and people experienced psychosocial challenges including stigma, isolation, discrimination, anxiety, fear, hopelessness and PTSD. Therefore, understand COVID-19 as a major threat to the bigger

systems and subsystems is very important in order to help survivors of the pandemic and prevent or minimize challenges that might be posed in the future.

Chapter Six: Conclusion and Recommendations

This chapter presents three major sub topics including the conclusion, recommendations and implication. The conclusion part summarizes the overall aspects of the study. The second part of the chapter which is recommendations, presents major recommendations based on the findings of the study. The last part of the chapter provides implications of the study in relations to social work education, practice, research, and policy.

6.1 Conclusion

COVID-19 has affected the lives of many individuals worldwide placing long term effect on the recovered patients. Those who recovered from COVID-19 have had a variety of difficulties as result of contracting COVID-19. Understanding the psychosocial effect of COVID-19 on recovered persons is crucial for addressing the specific needs of COVID-19 survivors and creating better intervention strategies in the event that another pandemic

Patients who have recovered from COVID-19 have experienced different psychological symptoms, including PTSD, anxiety and depression, fear and worry, feeling of uncertainty, loss of hope and others. The major causes of these psychological effects are uncertainty about the disease, the worry about reinfection, fear of infecting loved ones, fear of letting their children grow without father, experience of being in an intensive care unit and prolonged hospitalization.

Other social effects of COVID-19 include social isolation, suspension of religious activities, and restriction of movement, stigmatization and discrimination. Even though these measures played a critical role in preventing the spread and devastation caused by COVID-19, they have also minimized community engagement and opened the door for stigmatization and

discriminations. The major causes for such effects were the fear of infecting and infected by the virus and lack of knowledge about the pandemic.

On the other hand, recovered patients from COVID -19 are more resourceful than ever compared to survivors of previous pandemics because there are so many professionals, including medical professionals, psychologists, social workers and other mental health professionals, who could provide services for recovered people who need them. These specialists can help recovering patients with their challenges and stressful situations by offering medical treatment, psychotherapy, crisis intervention, psycho-education, and advocacy and counseling services.

To conclude, recovered patients from COVID-19 face considerable psychosocial difficulties. Fear, anxiety, despair, social isolation, discrimination and stigma are the most frequent difficulties that recovering patients face. However, is feasible to lessen or offset the psychosocial consequences of COVID-19 on recovered patients with the use of collaborative support system that consists of healthcare providers, mental health experts, psychologists, social workers, community leaders, health system managers, and policy makers. Therefore working in collaboration will significantly improve both the general wellbeing and better function of a society as a whole.

6.2 Recommendations

Based on the findings of the study the following recommendations are forwarded. All stakeholders should pay attention to the psychosocial wellbeing of the survivors of the pandemic. By doing so, the survivors get a relief from their major concerns. In event of such pandemics, the government should setup awareness raising campaigns to address issues related with stigma and discrimination. The practitioners should work in collaboration in order to address the specific

psychosocial needs of the survivors of the COVID-19; especially major healthcare plans should involve professionals from different disciplines including psychologists and social workers. Moreover, the government should enact policies, strategies, and regulations that raise the psychosocial wellbeing of the survivors of the pandemic. In other words, the survivor's need more attention than we can imagine therefore, addressing such issues with great care requires the consideration of the survivors issues in in policies, strategies and regulations of the country. The other thing is, the government should give more attention to the psychosocial issues by recruiting new members of the mental health and psychosocial professionals and strengthening the existing departments with man power and financial resources. Conducting further research should also prioritize to get deep understanding of the long-term psychosocial effects of COVID-19 on survivors. In general, the psychosocial needs of the survivors of the pandemic requires due attention from all stakeholders. Therefore, working in collaboration including the survivors, their families, community leaders, religious leaders, healthcare leaders, and policy makers towards addressing the specific needs of the survivors of the pandemic is crucial.

6.3 Social Work Implication

This section presents the findings of the study in relation to social work implication with regard to practice, education, research, and policy.

6.3.1 Social Work Implication for Practice

Social work practice is essential and integral part of bio-psychosocial and spiritual intervention in health care social work practice. As indicated in the findings of the study many patients have experienced fear, anxiety, loss of hope, PTSD, isolation, stigmatization and discrimination.

Beside existing social work practice social workers should develop their knowledge and skill gained from the COVID-19 pandemic practice contribute to the creation of experience sharing opportunities and lesson learned and transfer those knowledge and skills for other social work professionals in non-health care sector and future generation of social workers. On the other hand, social workers should participate on awareness raising programs through training, seminars, research presentation and so in with special attention to marginalized and vulnerable segment of the society. The other related issue is that social workers practice compared to other mental health professionals very limited and not competitive, therefore efforts should be made to improve such gaps.

6.3.2 Social Work Implication for Education

Social work education should focus on producing more competent social work practitioners to boldly integrate social work profession in medical health facilities and institutions. When compared to other health related professionals social workers have low knowledge of medical aspect, including difficulties in conducting individual psychotherapy, and counseling sessions. The social work education should try to create more professionals with know how practical translations of the knowledge and skills gained from the school.

6.3.3 Social Work Implication for Research

Social workers have to engage themselves in doing research on different aspects of health related issues. There is huge gap of knowledge in their areas of pandemic research, it's even nothing on the survivors of pandemics and its effect on the patients, their families, communities and nationwide. Additional researches should be conducted in relation to the effect COVID-19 on the relations with parents, children with their parents, and its effect on the vulnerable segment

of the society. Otherwise, it is going to be difficult to make social work practice and its importance known and well established in the health care system.

6.3.4 *Social Work Implication for Policy*

Policy is the most important tool that will transform the nation's system not only health care, but also in other areas of engagement, if designed and translated in to action appropriately. Therefore, the existence of well-articulated policy in health care system is very crucial to address any health related challenges. Social workers should advocate for the involvement of vulnerable group of society to be considered in special way during health care policies and strategies enactment and application in the health care system. The national healthcare policy should consider the issues of the survivors of the pandemics. Social workers should follow up with the concerned body to institute psychosocial service provision teams that will follow up the right of citizens including the right of survivors of the pandemic.

References

- Abraha, M., Ayano, G., Bayissa, D., Getachew, A., and Bekele, M. (2022). Depression and anxiety among quarantined population during the COVID-19 outbreak in central Ethiopia. *Global Public* 2(7): e0000115. <https://DOI.org/10.1371/journal.pgph.000011>
- AFRICA CDC. (2020). *Africa CDC - COVID-19 Daily Updates*. Africa CDC. <https://africacdc>.
- Alemu, A., Wubshet, N., Ayale, A., and Kebede W. (2021). Mental health and psychosocial responses to COVID-19 in Ethiopia: Lessons learnt from the first year of pandemic. *Ethiopian journal of health development*, 35, 1-6
- Amadasun, S. (2020). Social work and COVID-19 pandemic: An action call. *International Social Work Vol. 63*(6) 753–756 DOI: 10.1177/0020872820959357
- Ambelu, A., Birhanu, Z., Yitayih, Y. (2021). Psychological distress during the COVID-19 pandemic in Ethiopia: an online cross-sectional study to identify the need for equal attention of intervention. *Ann Gen Psychiatry*. <https://doi.org/10.1186/s12991-021-00344-4>
- Andrew K., (2004). *Strategies for ensuring trustworthiness in qualitative research projects*. Education for information, North Umbria University, Newcastle, UK.
- Barber and Walczack (2009, April 12-17). *Conscience and critic: peer debriefing strategies in grounded theory (paper presentation)*. Annual Meeting of the American Educational Research Association. Conference 2009, San Diego, California.
- Bekele, F., Mechessa, D. F., and Sefera, B. (2021). Prevalence and associated factors of the psychological impact of COVID-19 among communities, health care workers and

- patients in Ethiopia: A systematic review. *Annals of Medicine and Surgery, Volume 66*, 2021, 102403, ISSN 2049-0801, <https://doi.org/10.1016/j.amsu.2021.102403>.
- Blake, H., Bermingham, F., Jahnso, G., and Tabner, A. (2020). Mitigating the psychological effect of COVID-19 on healthcare workers: a digital learning package. *Int. J. Environm. Res. Public health 17*, 2997; doi: 10.3390/ijerph17092997
- Bodrud-Doza, M., Shammi, M., Bahlman, L., Islam, A., and Rahman, M. (2020). Psychosocial and Socio-Economic Crisis in Bangladesh due to COVID-19 Pandemic: A Perception-Based Assessment. *Front. Public health 8*:341. Doi: 10.3389/fpubh.2020.0
- Bogdan, R. C. & Biklen, S. K. (1992). *Qualitative research for education. An introduction to theory and methods*. Boston, MA: Allan and Bacon. Publications, Inc.
- Bortel, T., Basnayake, A., Wurie, F., Jambai, M., Koroma, S., Muana, A., Hann, K., Eato, J., Martin, S., and Nellums, L. (2016). psychosocial effects of an ebola outbreak at individual, community and international levels. *Bull worl health organ 94*:210-214. Doi: <http://dx.doi.org/10.2471/BLT.15158543>.
- Braun, V., and Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology, 3*(2), 77–101.
- Brooks, K., Webster, R., Smith, L., Woodland, L., Wessely, S., Greenberg, N., Rubin, G., (2020). The psychological impact of quarantine and how to reduce it: rapid review of the evidence. *Lancet 395*: 912–20 [https://doi.org/10.1016/S0140-6736\(20\)30460-8](https://doi.org/10.1016/S0140-6736(20)30460-8)
- Buonsenso, D., Cinicola, B., Raffaelli, F., Sollena, P., and Iodice, F. (2020). Social consequences of COVID-19 in low resource setting in Sierra Leone, West Africa. *International journal of infectious diseases 97*:23-26

- Chakraborty, N., (2021). The COVID-19 pandemic and its effect on mental health. *Progress in neurology and psychiatry*. Vol. 24(2)
- Chekole, A., Minaye, Y., Abate M. and Mekuria, B. (2020). Perceived Stress and Its Associated Factors During COVID-19 among Healthcare Providers in Ethiopia: A Cross-Section Study. *Hindawi: Advances in Public Health Vol. 2020*
- Chew, C., Lim, X., Chang, C., Rajan, P., and Yun, N. (2021). Low Experiences of social stigma among patients tested positive for COVID-19 and their family members: a qualitative study. *BMC Public Health 21:1623* <https://doi.org/10.1155/2020/5036861>
- Coppola, I., Rania, N., Parisi, R. and Lagomarsino, F. (2021). Spiritual Well-Being and Mental Health During the COVID-19 Pandemic in Italy. *Front. Psychiatry 12:626944*. doi: 10.3389/fpsyt.2021.626944
- COVID-19 socio-economic Vulnerability Assessment of Ethiopia*. (n.d.). Retrieved June 22, 2023, from <https://www.unicef.org/ethiopia/media/3541/file/COVID-19%20socio-economic%20Vulnerability%20Assessment.pdf>
- Creswell, J.W. (2014). *Research design: Qualitative, quantitative, and mixed methods approaches 4th ed.* Los Angeles, CA: Sage
- Dawson, C. (2009). *Introduction to research methods: a practical guide for everyone undertaking a research project 4th ed.* Beg broke, UK: How to books.
- Disasa, B. and Teshome, E. (2021). The Impact of the COVID-19 Epidemic on Mental Health Among Residents of Assela Town. *Psychology Research and Behavior Management:14* Pages 957—970 DOI <https://doi.org/10.2147/PRBM.S287477>

Dubey, S., Ghosh, R., Chatterjee, S., Dubey, M. J., Chatterjee, S., Carl J., and Lavie (2020). Psychosocial effect of COVID-19. *Diabetes & metabolic syndrome: clinical research & review*; 14s

Eserwood, E. and Saeed, A. (2020). Past Epidemics, Natural Disasters, COVID19, and Mental Health: Learning from History as we Deal with the Present and Prepare for the Future *Psychiatric Quarterly* <https://doi.org/10.1007/s11126-020-09808-4>

Ethiopia Coronavirus: 2,336 Cases and 32 Deaths - *Worldometer*.(n.d.). [Www.worldometers.info](http://www.worldometers.info).
<https://www.worldometers.info/coronavirus/country/ethiop>

Galbadage, T., Peterson, B., Wang, C., Wang, S. and Gunasekera S. (2020). Biopsychosocial and Spiritual Implications of Patients With COVID-19 Dying in Isolation. *Front. Psychol.* 11:588623. DOI: 10.3389/fpsyg.2020.588623

Gebru, A. (2020). Psychosocial Effects of COVID-19 Lockdown and Coping Strategies of the Community, Jimma University, Southwest Ethiopia. *African journal of social work*, 10(3)

Giusti, E., Pedrolì, E., Aniello, Badiale, C., Pietrabissa, G., Manna, C., StrambaBadiale, M., Riva, G., Castelnuovo, G. and Molinari E (2020). The Psychological Effect of the COVID-19 Outbreak on Health Professionals: A Cross-Sectional Study. *Front. Psychol.* 11:1684. Doi: 10.3389/fpsyg.2020.01684

Gooshki, A., Mangelian, P., Asadi, N., and Salmani, M. (2022). Psychological consequences and the related factors among COVID-19 survivors in southeastern Iran. *Health Sci. Rep.* 5: e755. doi:10.1002/hsr2.755

- Habtamu, K., Desie, Y., Asnake, M. (2021). Psychological distress among Ethiopian migrant returnees who were in quarantine in the context of COVID-19: institution-based cross-sectional study. *BMC Psychiatry* 21, 424 <https://doi.org/10.1186/s12888-021-03429-2>
- Hanckle, B. (2009). *Intelligent research design: a guide for beginning researchers in social sciences*. New York USA: Oxford university press.
- Hasen A., Seid A., and Mohammed A. (2023). Anxiety and stress among healthcare professionals during COVID-19 in Ethiopia: systematic review and meta-analysis. *BMJ Open* 13:e070367. doi:10.1136/bmjopen-2022-070367
- Hosseinzadeh P, Zareipour M, Baljani E, RezaeeMoradali M. (2022). Social Consequences of the COVID-19 Pandemic: A Systematic Review. *Invest. Educ. Enferm.* 2022; 40(1):e10. DOI: <https://doi.org/10.17533/udea.iee.v40n1e10>.
- Huang, L., Xu, X., Zhang, L., Zheng, D., Liu, Y., Feng, B., Hu, J., Lin, Q., Xi, X., Wang, Q., Lin, M., Zhou, X., He, Z., Weng, H., Deng, Q., Ding, B., Guo, J. and Zhang, Z. (2022). Post-traumatic Stress Disorder Symptoms and Quality of Life of COVID-19 Survivors at 6-Month Follow-Up: A Cross-Sectional Observational Study. *Front. Psychiatry* 12:782478. doi: 10.3389/fpsyt.2021.782478
- Huremovic, D. (2019). Brief history of pandemics. *Psychiatry of pandemics*. doi:10.1007/978-3-030-15346-5_2
- Hutchison, E., and Charlesworth, L. (2011). *Theoretical perspectives on human behavior*. In Hutchison (Ed.), *dimension of human behavior: person in environment* 4th ed., pp.34-69). Sage publications, Inc. thousand oaks, California.

- Isiko, P. (2022). Covid-19 and its Effect on Religiosity: Reflections on Religious Life and Practice in Uganda. *Journal for the Study of Religion* DOI: 10.17159/2413-3027/2021/v35n1a2
- Jafri, R., Zaheer, A., and Fatima, S. (2022). Mental health status of COVID-19 survivors: a cross sectional study. *Virol J* 19, 3. <https://doi.org/10.1186/s12985-021-01729-3>
- James, B., Wardle, J., Steel, A., and Adams J. (2019) Post-Ebola psychosocial experiences and coping mechanisms among Ebola survivors: a systematic review. *Trop Med Int Health.*(6):671-691. doi: 10.1111/tmi.13226.
- Kaba, M., and Kitaw Y., (2020). Novel corona virus (2019-nCoV)-reminiscent of Spanish flu: A challenge to global public health system. *Ethiopian journal of health development* 34(1)
- Kang, J., Kim, H., Yi, J., Lee, Y., Lee, H., Song, H., Park, Y., Oh, S., Yoon, D., Choe, G., Lee, J., Choi.,H., Sim, M., Yu, S., Paik, W. and Park, HY. (2023).Causing trouble and being transmissible: COVID-19 survivors' experiences of stigma and discrimination in South Korea. *Front. Psychiatry* 14:1103572. doi: 10.3389/fpsyt.2023.1103572
- Kaso, W., Tesema, G., Hareru, E., Kaso, T., Ashuro, Z., Talemahu, A., Jore, T., Kassa, R., Agero, G., and Hailu, A. (2022).Health-Related Quality of Life and Associated Factors Among Covid-19 Survivors. Experience from Ethiopian Treatment Centers. *Infect Drug Resist.* 15:6143-6153. doi: 10.2147/IDR.S386566.
- Kassaw Ch. (2020). The Magnitude of Psychological Problem and Associated Factor in Response to COVID-19 Pandemic among Communities Living in Addis Ababa,

- Ethiopia, March 2020: A Cross-Sectional Study Design. *Psychology Research and Behavior Management* 13 631-640
- Kreuger, L. W. & Neuman, W. L. (2006). *Social work research methods: qualitative and quantitative applications*. New York: Pearson Education, Inc.
- Lankrew, T. and Gelaw, B. (2022). Psychological impacts of COVID-19 outbreak in Ethiopia: a systematic review and meta-analysis doi: <https://doi.org/10.1101/2022.07.27.2227810>
- Li, Y. & Jun Peng, J. (2021). Does social support matter? The mediating links with coping strategy and anxiety among Chinese college students in a cross-sectional study of COVID-19 pandemic. *BMC Public Health* 21:1298 <https://doi.org/10.1186/s12889-021-11332-4>
- Lo Bianco, G., Di Pietro, S., Mazzuca, E., Imburgia, A., Tarantino, L., Accurso, G., Benenati, V., Vernuccio, F., Bucolo, C., Salomone, S. and Riolo, M. (2020). Multidisciplinary Approach to the Diagnosis and In-Hospital Management of COVID-19 Infection: A Narrative Review. *Front. Pharmacol.* 11:572168. DOI: 10.3389/fphar.2020.572168
- Lu, H., Stratton, C. W., and Tang, Y. W. (2020). Outbreak of pneumonia of unknown etiology in Wuhan, China: the Mystery and miracle. *J. Med. Virol.* doi:10.1002/jmv.25678
- Mack, N., & Woodson, C. (2005). *Qualitative research methods: A data collector's field guide* (pp. 1–12). FliUsaid. <https://www.fhi360.org/sites/default/files/media/documents>
- Madoro D, Mengistu N, and Molla W. (2021). Association of Conflict-Affected Environment on Ethiopian Students' Mental Health and Its Correlates During COVID-19 Era. *Neuropsychiatr Dis Treat.* 17:3283-3292. doi: 10.2147/NDT.S338073.

- Mahendran, K., Patel, S. and Sproat C. (2020). Psychosocial Effects of the COVID-19 Pandemic on Staff in a Dental Teaching Hospital. *British Dental Journal Vol. 229 No. 2*
- Mekarim, H. (2022). Anxiety, Depression and Coping Mechanisms during covid-19 among Staff of Amanuel Mental Specialized Hospital. AAU <http://etd.aau.edu.et/bitstream/handle>
- Mogeda S., Abeer A. and SawzanB. (2021). The psychological and social effects on personal stress for residents quarantined for COVID-19 in Saudi Arabia. *Elsevier Vol. 35 3 p 311-316*
- Mokenen, G., Workineh, S., Ali, S. and Muluneh, Y. (2020). The Psychological Effect of COVID-19 Pandemic on Graduating Class Students at the University of Gonder, Northwest Ethiopia. *Dove Press Journal: Psychology and Behavior Management 14 109-122*
- Monte, C., Monaco, S., Mariani, R. and Di Train, M. (2020). From Resilience to Burnout: Psychological Features of Italian General Practitioners during COVID-19 Emergency. *Front. Psychol. 11:567201. doi: 10.33889/fpsyg.2020.567201*
- Moradi, Mollazadeh, F., Karimi, P., Hosseingholipour, K. and Baghaei, R. (2020). Psychological disturbances of survivor throughout COVID-19 crisis: a qualitative study. *BMC Psychiatry 20:594* <https://doi.org/10.1186/s12888-020-03009-w>
- Mukhopadhyay (2022). Psycho-social effect of pandemic among COVID-19 survivors. *World Journal of Advanced Research and Reviews, 16(01), 018–026* Article DOI: <https://doi.org/10.30574/wjarr.2022.16.1.0977>
- Nelson B. (2020). The positive effects of COVID-19 *BMJ; 369:m1785* doi:10.1136/bmj.m1785

- O’Caoimh, R., O’ Donovan, R., Monahan, P., Dalton, O’Connor, C., Buckley, C., Kitty, C., Fitzgerald, S., Hartigan, I., and Comally, N. (2020). Psychosocial Effect of COVID-19 Nursing Home Restrictions on Visitors of Residents with Cognitive Impairment: A Cross-Sectional Study as Part of the Engaging Remotely in Care (Eric) Project. *Front. Psychiatry* 11:585373. Doi: 10.3389/fpsy.2020.585373
- Olufadewa, I., Adesina, M., Oladokun, B., Baru, A., Oladele, R., Iyanda, T., Ajibade, O., & Abudu, F. (2020). “I Was Scared I Might Die Alone”: A Qualitative Study on the Physiological and Psychological Experience of COVID-19 Survivors and the Quality of Care Received at Health Facilities. *International Journal of Travel Medicine and Global Health*, 8(2), 51-57. doi: 10.34172/ijtmgh.2020.09
- Omopo, B. S. (2021) Effect of Covid-19 on Religious Practices and Religious Conviviality in Ibadan: The Place of Religious Leaders in Maintaining Close-Knit Religious Communities. [Research Report] IFRA-Nigeria Working Papers Series 82, IFRA-Nigeria.2021, pp.1-26.ffhal-03416177f
- Park, Y., Park, B., and Lee, H. (2020). Posttraumatic stress disorder and depression of survivors 12 months after the outbreak of Middle East respiratory syndrome in South Korea. *BMC Public Health* 20, 605 <https://doi.org/10.1186/s12889-020-08726-1>
- Pavari, N. (2020). Psychosocial Effects of Covid-19 Pandemic in Zimbabwe. *Journal of Public Administration and Governance* ISSN 2161-7104, Vol. 10, No.3
- Pedrosa, A., Bitencourt, L., Froes A., Cazumba, M., Campos, R., De Brito, S. and Simoes, E. (2020). Emotional, Behavioral and Psychological Effect of the COVID-19 Pandemic. *Front. Psychol.* 11:566212. doi:10.339/fpsyg.2020.566212s

- Piret J. and Boivin G. (2021).Pandemics throughout History.*Front. Microbiol. 11*:631736. doi: 10.3389/fmicb.2020.631736
- Qui, W., Rutherford, S., Mao, A., and Chu, C. (2016) The pandemic and its effects. *Journal of health culture and society. Vol. 9-10*doi: 10.5195/hcs.2017.221
- Reddv, V., Karri, S. R., Jezreel, T., Afeen, S., and Khairkar, P. (2020). Psychosocial Effect of COVID-19 Lockdown on Mental Wellbeing among 11 States of India: A Markov Modeling Approach. *Journal of Psychiatry and Psychiatric Disorders 4*: 158-174.
- Rogers, A. (2010) *Human behavior in the social environment: new directions in social work 2nd ed.* Rutledge, Taylor & Francis, 270 Madison Avenue, New York, USA.
- Saha, K., Eric D., and Chouldhury C. M. (2020). Social Media Reveals Psychosocial Effects of the COVID-19 Pandemic. *medRxiv 07.20170548*; doi: <https://doi.org/10.1101/2020.0>
- Sarantakos, S. (2005). *Social research.(3rd Ed)*.Palgrave Mac-Millan, New York.
- September 30, C. P., & 2021. (2021, September 30). *Silver Linings: Positive Effects of the COVID-19 Pandemic on Children. Parents.*
<https://www.parents.com/kids/health/childrens-mental-health/silver-linings-positive-effects-of-the-covid-19-pandemic-on-children/>
- Shah R, Ali F., and Nixon J., (2021).Measuring the effect of COVID-19 on the quality of life of the survivors, partners and family members: a cross-sectional international online survey.*BMJ Open11*:e047680. doi:10.1136/ bmjopen-2020-047680
- Sher L. (2020). Are COVID-19 survivors at increased risk for suicide? *ActaNeuropsychiatrica 32*:270. doi: 10.1017/neu.2020.21

- Shi, C., Guo, Z., Luo, C., Lei, C. and Li, P. (2020).The Psychological Effect and Associated Factors of Covid-19 on the General Public in Hunan, China.*Dove press*.Volume 13 P3187-3199.
- Simegn, W., Yohannes, L., Seid, M., Kasahun, E., Sema, D., Flatie, A., Elias, A. and Dagne, H. (2022). Perceived stress and associated factors among university students in Ethiopia during the late stage of the COVID-19 pandemic: A cross-sectional study. *Front. Psychol.* 13:978510. doi: 10.3389/fpsyg.2022.978510
- Singh, k. (2006).*Fundamentals of research methodology and statistics*. New Delhi, India: new age international publishers.
- Sladino V, Algeri D. and Auiemma V. (2020).the Psychological and Social Effect of COVID-19: New Perspectives of Wellbeing. *Front. Psychol.* 11:577684. Doi:10.3389/fpsyg.2020.577684
- Sulmasy, P. (2020).A bio-psycho-social-spiritual model for the care of patients at the end of life.*The gerontologist vol. 42*, special issue III, 24-33
- Taylor, S., (2022).The psychology of pandemics.The annual review of clinical psychology.*Annu.Rev.Clin.Psychol.* 18:2.-2.29 <https://doi.org/10.1146/annurev-clinpsy-072720-020131>
- Tsamkis, K., Rizos, E., Jmanolis, A., Chaldou, S., Kypourpouls S., Demetros S. A., Tsiptsios, S. D. and Triantafyllis, A. (2020) COVID-19 pandemic and its effect on mental health of health care professionals.*ExpTher Med.* 2020 Jun;19(6):3451-3453. doi: 10.3892/etm.2020.8646.

- UNICEF Ethiopia Socio-economic impacts of COVID-19.* (n.d.). Retrieved June 22, 2023, from <https://www.unicef.org/ethiopia/media/3056/file/Socio-economic%20impacts%20of%20COVID-19.pdf>
- Uzobo, E., Nwanwene I., & Ojo, T. F. (2022). The lived social experience of COVID-19 survivors in southwestern Nigeria. *Journal of Social, Behavioral, and Health Sciences*, 16(1), 211–225. <https://doi.org/10.5590/JSBHS.2022.16.1.15>
- Waters, R., Kaddas, H., Berghuijs, T., Lopez, V., Warner, L., Ou, Y., Ramsay, M., Palmer, A., Ray, N., Tsukamoto, T., Fair, B., Lewis, A., Linder, L., Gill, D., and Kirchhoff, C. (2023). COVID-19–Related Employment Disruptions and Increased Financial Burden among Survivors of Adolescent and Young Adult Cancer. *Journal of adolescent and young adult oncology Volume 00*, Number 00, Mary Ann Liebert, Inc. DOI: 10.1089/jayao.2022.0099
- World Health Organization. (2020). *Novel Coronavirus (2019-nCoV) situation reports*. [Www.who.int. https://www.who.int/emergencies/diseases/novel-coronavirus-2019](https://www.who.int/emergencies/diseases/novel-coronavirus-2019)
- World Health Organization. (2022). *WHO Coronavirus (COVID-19) Dashboard*. Covid19.who.int. <https://covid19.who.int/?mapFilter=deaths>
- Yi, N., Zhou, S., Tan, H., Ishak, B., Goh, S., Chua, Y., Chia, X., Chew, L., Shwe, T., Mok, Y., Leong, S., Lo, Y., Ang, T., Leow, L., Lam, J., Kwek, W., Dent, R., Tuan, J., Lim, T., Hwang, K., Griva, K., and Ngeow J. (2021). Understanding the psychological effect of COVID-19 pandemic on patients with cancer, their caregivers, and health care workers in Singapore. *JCO Global Oncol* 6: 1494-1509

Yitayih, Y., Lemu, K, and Mekonen, S. (2020) Psychological impact of COVID-19 outbreak among Jimma University Medical Center visitors in Southwestern Ethiopia: a cross-sectional study *BMJ Open* 11:e043185. doi: 10.1136/bmjopen-2020-043185

Zhu, N., Zhang D., Wang, W., Li, X., (2020). A novel corona virus from patients with pneumonia in china, 2019. *The New England Journal of Medicine* 382:727-733 doi: 10.1056/NEJMoa2001017

Zikarge, M. H., (2020) COVID-19 in Ethiopia: assessment of how the Ethiopian government has executed administrative actions and managed risk communications and community engagement. Department of Journalism and Communications, Bahir Dar, Ethiopia. *Dove press limited.*

#HealthyAtHome.(n.d.). Www.who.int. Retrieved June 22, 2023, from <https://www.who.int/campaigns/connecting-the-world-to-combat-coronavirus>

Annexes

Annex 1

Consent form

My name is DawitHussen, and I am a post graduate student at Addis Ababa University, School of Social Work. I am conducting a qualitative study on the psychosocial effect of COVID-19 on the survivors of the pandemic. This study is conducted as partial fulfillment of my master's degree in social work. The purpose of this study is to understand the effect of COVID-19 on the survivors of the pandemic. The study's findings are believed to serve as a starting step to understand the psychosocial effects of COVID-19 on the survivors. Secondly, it will also assist health and other concerned institutions who are working in the area of pandemic treatment. Your participation in the study is much appreciated and will consist of an interview. Please know that this interview will be audio recorded to assist me to analyze it later on. Your participation in this study is voluntary. Please note that you will not be paid for the participation in the interview. You can withdraw and discontinue participation at any time without penalty. If you decline to participate or withdraw from the study, the investigator will keep confidentiality. You may choose skip any question that you are not interested to respond or quit the interview session at any time.

If you have a concern about this study, please speak to me (Tel

+251909904690/+251916610183 or [email: devhussen@gmail.com](mailto:devhussen@gmail.com) or the advisor Dr.

WassieKebede at Addis Ababa University, School of Social Work, tel. 0911442701, email:

wassiek7@gmail.com. I read (listened) and understood the explanation provided to me. I have

had all my questions answered to my level of satisfaction and voluntarily agree to participate in this study.

I have been given a copy of this consent form.

Signature _____

Annex 2

Interview Guide

I. Interview guiding questions for participants

1. Background questions

- a. Age _____
- b. Sex _____
- c. Educational background _____
- d. Marital status _____
- e. Number of family _____
- f. Occupation _____
- g. Religion _____

2. Would you please share with me about your current living condition?

- a. Are you a breadwinner of the family?
- b. What is the main source of income of the family?
- c. Do you live with the family?
- d. Do you own your current house?

3. How did you describe your feeling when you heard about you were going to be admitted to the hospital for COVID-19?
4. How do you describe the effects of COVID-19 on you and your family?
(Health effect, emotional effect, psychological effect, social effect and economic effect)
5. What services did you get from the EKGH?
6. How do you evaluate services and the overall treatment you received from the EKGH?
7. Have you experienced any other challenges because of your infection by COVID-19?
8. If you have been experiencing any challenges, how did you cope with the challenges?
9. Do you have any additional points to add?

Annex 3**Interview Guide for Key Informant**

1. Background questions
 - a. Age _____
 - b. Sex _____
 - c. Marital status _____
2. What services do you provide for your client infected with COVID-19?
3. From your experience what are the major problems encountered by COVID-19 patients?
4. Are there any mechanisms to address those problems?
5. How do patients view your services?
6. What do you think are the most difficult challenges during serving COVID-19 patients and their family experienced?
7. Have you experienced any challenges in relation to your work on the line of duty?
8. What coping mechanism did you use to overcome the challenges?
9. Do you have any additional comments?

