

# Mental health intervention program during the COVID-19 for mexican adults

## Programa de intervención en salud mental durante el COVID-19 para adultos mexicanos

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### SUMMARY

**Introduction:** *The current pandemic caused by COVID-19 is a public health emergency with serious economic, educational, and social consequences. Its consequences are not only manifested in physical aspects, it is increasingly evident that this crisis is producing alterations in the mental health of the population, which is why it is of utmost importance to analyze the repercussions that COVID-19 could cause on mental health and the measures for its prevention and control, as well as the strategies to favor it.*

**Objective:** *To evaluate an intervention program in times of COVID-19 and the positive impact on mental health through strategies, to reduce sequelae caused by the pandemic.*

**Methods:** *The study participants were 34 people from the city of León, Guanajuato, the Kessler Scale (K-10)  $\alpha = 0.901$  was applied, with an explanatory scope, and the Students T-test for related samples was used.*

**Results:** *There is a significant difference in the results obtained before and after the application of the intervention carried out ( $p=0.0001$ ), the COVID-19 begins to be identified as a problem of major difficulty when observing the havoc caused, as the new normality is installed, and people begin to identify the prevalence of anxiety, fear, insecurity, own before the unknown, therefore, it is necessary to take measures aimed at favoring mental health.*

**Conclusions:** *It is recommended the creation and dissemination of intervention strategies to reduce psychological distress in people impacted by COVID-19, as well as the prevention and diagnosis of mental disorders. Brief psychotherapy is a tool currently in vogue because it focuses on solving and providing solutions to complex problems through simple, planned, and intentional tools.*

**Keywords:** *Mental health, psychological distress, COVID-19, clinical psychology, online intervention, Mexico.*

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### RESUMEN

**Introducción:** *La actual pandemia ocasionada por el COVID-19 es una emergencia de salud pública con graves consecuencias a escala económica, educativa y social. Sus consecuencias no sólo se manifiestan en aspectos físicos, cada vez es más evidente que esta crisis está produciendo alteraciones en la salud mental de la población, razón por la cual es de suma*

*importancia analizar las repercusiones que sobre la salud mental pudiera provocar el COVID-19 y las medidas para su prevención y control, así como las estrategias para favorecerla.*

**Objetivo:** *Evaluar un programa de intervención en tiempos de COVID-19 y la incidencia positiva en la salud mental a través de estrategias, con la finalidad de reducir secuelas originadas por la pandemia.*

**Método:** *Los participantes del estudio fueron 34 personas de la ciudad de León, Guanajuato, se aplicó el instrumento Escala de Kessler (K-10)  $\alpha = 0,901$ , con un diseño no experimental, transversal, exploratorio-descriptivo, se utilizó la prueba T de Students para muestras relacionadas.*

**Resultados:** *Existe una diferencia significativa en los resultados obtenidos antes y después de la aplicación de la intervención realizada, el COVID-19 empieza a identificarse como un problema de dificultad mayor al observar los estragos causados, a medida que se instala la nueva normalidad, las personas empiezan a identificar la prevalencia de ansiedad, miedo, inseguridad, propio ante lo desconocido, por lo tanto, es necesario tomar medidas destinadas para favorecer la salud mental.*

**Conclusiones:** *Se recomienda la creación y difusión de estrategias de intervención para reducir el malestar psicológico en las personas impactadas por el COVID-19, así como la prevención y el diagnóstico de trastornos mentales. La psicoterapia breve es una herramienta en boga actualmente debido a que se centra en resolver y dar soluciones a problemas complejos mediante herramientas simples, planificadas e intencionadas.*

**Palabras clave:** *Salud mental, malestar psicológico, COVID-19, psicología clínica, intervención en línea, México.*

## INTRODUCTION

At the global level there is an exceptional situation due to the advance of the pandemic produced by the SARS-CoV-2 coronavirus, which brings with it a series of consequences at the physical level, including severe acute respiratory syndrome, and at the social level due to the unprecedented measure of preventive and obligatory social isolation used by the great majority of countries. This situation generates a psychosocial impact that has been insufficiently addressed due to its unique and transcendental character, which is why it is of utmost importance to analyze the repercussions that COVID-19 could cause on mental health and the measures for its

prevention and control, as well as the strategies to promote it (1-14).

The current pandemic caused by COVID-19 is a public health emergency with serious social, economic, educational, and health consequences. Its consequences are not only manifested in physical aspects; it is increasingly evident that this crisis is producing alterations in the mental health of the population. However, many published studies evaluate the effects of confinement on the general population or the consequences on health personnel, there is little evidence on the psychological and cerebral effects on individuals suffering from or recovering from COVID-19, currently, research continues. Once the patient knows their diagnosis, i.e., positive for COVID-19, they begin to experience high emotional impact, and stressful and traumatic situations, which induce anxiety and increase the risk of post-traumatic stress disorder (15-26).

The negative effects of the pandemic according to a recognized researcher in Mexico are as follows: The prevalence of negative mental health effects related to COVID-19 in the sphere: of psychological, general health, and social evidence the proliferation of effects that have impacted the lives of diverse people. Undoubtedly, COVID-19 has wreaked havoc in various areas of the life of each person, this does not spare the different social classes, because the emotional stability of each person is being tested to its maximum limits, the author places on the table the relief of all that so far is considered impacted by the pandemic, there are elements difficult to examine by its subjective nature, the repercussion experienced today in terms of mental health coupled with the adaptability that every human being must develop on the eve of survival as a human (27).

For this purpose, we propose to evaluate an intervention program in times of COVID-19 and the positive incidence on mental health through strategies, to reduce sequels originated by the pandemic, to describe and make visible the diverse elements that are immersed in mental health and how it has impacted such effects, To describe and make visible the different elements involved in mental health and how it has impacted such effects, a mental health intervention program "Psychology for all" is presented, which consisted in the application of a pretest, followed by the

seven intervention sessions and the application of a post-test to plan a strategy to reinforce and enhance behaviors that contribute to mental health in the current context.

## METHODS

The participants were 34 people from the city of León, Guanajuato. Random sampling was considered, it is a non-probabilistic sample (28). Inclusion criteria: 1) voluntary participation. 2) male or female. 3) 18 to 70 years old. 4) Aware of no financial remuneration during the sessions. 5) Availability of time. 6) Availability of an electronic device with camera and audio capabilities.

### Measures

Kessler Scale (K-10) is a questionnaire developed by Ronald Kessler and Dan Mroczek to measure psychological distress in people, it evaluates the presence of symptoms of depression and anxiety presented in the last month. The (K-10) is made up of 6 Likert scale items ranging from always, almost always, sometimes, almost never, and never. It has a content validity and reliability of Cronbach's alpha 0.901 (28). The results are indicated according to their order in a single dimension: Anxiety and depression (1-6).

### Processes

Before the application of the instrument, for ethical and professional reasons, the acceptance of the informed consent is requested, making known the purposes of the research, as well as its importance for the researcher in his professional training. The data collection of the survey application was through two links: <https://prestestk10.questionpro.com> and <https://postestk10.questionpro.com>, directed to 34 participants from León, Guanajuato, it was applied individually through laptop and cell phone. This research used a non-experimental, cross-sectional, exploratory-descriptive design (28).

### Data analysis

For the processing of the information collected, the following techniques were used, such as Student's t frequencies, and ANOVA to observe the sample in the significance in age, sex, marital status, and level of study with psychological distress. Weighted proportions for the distribution of the sample (mean, standard deviation, sum, and percentages), to know the frequencies of intensity in the psychological distress suffered by the item. Frequencies, proportions, and p, among others, to detect differences between the results obtained in the Pretest and Posttest. The use of the t-test for related samples, using SPSS 25 software for statistical analysis.

### Ethical aspects

Within the research, the company committed to safeguarding, maintaining confidentiality, and not misusing what was shared in the various sessions, statistics, or any other record or information related to the aforementioned study, with which the research was carried out. Likewise, the commitment not to disseminate or commercialize the personal data contained in the information systems developed in the execution of the present study.

Informed consent was used towards the participants to safeguard the confidentiality of the data, such as accepting freely and voluntarily to be participants, there will be no unfavorable consequence in case of not accepting the invitation, there will be no expenses during the study, information about the general results of the survey will be given, the individual results of the electronic surveys will be kept with strict confidentiality by the researcher. The present research for the health area operated under the principles of the Declaration of Helsinki of the World Medical Association, such ethical considerations are based on principles of autonomy, anonymity, and confidentiality guaranteeing that the present research on human beings was carried out only by persons with the appropriate scientific and ethical education, training, and qualifications (30).

**RESULTS**

The most representative group of the study corresponds to males with 65.7 % and females

with 35.3 %, it is observed that the age is heterogeneous and is between 20 and 66 years, with an average of 41 years. It was noted that 54 % are married. Finally, it was found that 44 % have completed higher technical education (Table 1).

Table 1  
Sociodemographic data of the participants

Average Age			40.29	
Age range	N	%		De
20-30	12	35.3		2.9
31-40	7	55.9		
41-50	3	64.7		
51-66	12	100.0		
<b>Sex</b>				
Woman	12	35.3		0.485
Male	22	64.7		
<b>Marital status</b>				
Single	11	31.4		0.716
Married	19	54.3		
Unmarried	3	8.6		
Divorced	1	2.9		
<b>Educational level</b>				
Elementary	2	5.9		1.297
Secondary	11	32.4		
High School	3	8.8		
Technical High School	15	44.1		
Bachelor's Degree/Engineering	3	8.8		

Table 2 shows the correlations between the psychological distress perceived in the participants before and after the intervention program. The result of the psychological distress dimension is shown in the scores obtained for the pretest application, with a result of 47.9 % and 43.3 % in the scores obtained for the posttest application, which shows a statistically significant difference.

Table 2  
Psychological distress

	n	%	sd
Pretest	16	47.9	6.076
Posttest	16	43.3	3.881

Table 3 shows the parametric Student's t-test for related samples, a test for comparing two related samples, which has the following characteristics: the random assignment of the groups, homoscedasticity (homogeneity of the variances of the dependent variable of the groups), normal distribution of the dependent variable in the two groups, interval or ratio level of the dependent variable. Its function is to compare two measurements of scores (arithmetic means) and to determine that the difference is not due to chance, i.e. that the difference is statistically significant. According to the result  $p=0.141$ ,  $h_0$  is accepted and  $h_1$  is rejected, therefore, the test is parametric, observing in the present table a t value of -5.978,  $gl = 33$  degrees of freedom, and Sig. (p)=0.0001, less than 0.05 because it affirms

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that the level of psychological distress is different between the first and second measurements. Regarding the effectiveness of the intervention program in modifying psychological distress in

a group of people, there was a decrease in the level of psychological distress ( $t(33) = -5.978$ ,  $p < 0.05$  between measurements taken before and after attending the intervention program (Table 3).

Table 3  
Paired samples test

Par 1				lower	top	t	Gf	p
Sum Pretest sum Psychological discomfort - Sum Posttest sum Psychological discomfort	-3.79412	3.72363	0.63860	-5.09335	-2.49488	-5.941	33	0.0001***

\*\*\* $P \leq 0.001$

Table 4 shows an ANOVA of the educational level, showing a significant difference in the educational level completed, being statistically

significant, i.e., there are differences in the psychological distress of the sample evaluated with respect to their level of study.

Table 4  
Educational level and psychological distress

		Sum of squares	gl	Quadratic mean	F	P
Sum of Psychological Distress Pretest	Between groups	122.677	4	30.669	0.812	0.528
	Within groups	1 095.794	29	37.786		
	Total	1 218.471	33			
Sum of Psychological Distress Posttest	Between groups	142.979	4	35.745	3.199	0.028*
	Within groups	312.900	28		11.175	
	Total	455.879	32			

\* $P \leq 0.05$

**DISCUSSION**

The present research shows a series of conjectures because of the analysis to evaluate the intervention program in times of COVID-19

and the positive incidence in mental health through strategies, to reduce sequels originated by the pandemic. The above allowed responding to the general objective of the research, for this, it is essential to observe the effectiveness of the intervention program to modify the

psychological discomfort in a group of people, showing a significant decrease in the level of psychological discomfort captured by the participants. The hypothesis was based on the design and implementation of the intervention program, responding to the following: In what way does a mental health intervention program favor well-being in the population that was infected by COVID-19, being H0: The mental health intervention program does not influence and H1: The intervention program positively influences the mental health of the population that was impacted by COVID-19.

It has been demonstrated over time that brief psychotherapy programs have had a significant impact on the problem behavior to be addressed. A Mexican doctor created a brief intervention program for adolescents based on cognitive-behavioral treatment for young people who use addictive substances such as alcohol, marijuana, cocaine, and inhalants. This program is based on the Social Learning Theory and its objective is to promote a change in the pattern of substance use and to maintain this change, to avoid health and personal problems associated with alcohol and drug use (31), the sessions created for the mental health intervention program "Psychology for all" were based on brief psychotherapy, cognitive-behavioral treatment adding valuable content under the humanistic-existential approach, the brief humanistic interventions allow the person to be aware of the here and now appropriate to overcome the various demands that COVID-19 has brought.

Under the modality of a preventive intervention program regarding the various forms in which violence is presented, a study was applied to 32 young people, a plain language was used with scenarios, such as schools, parks, and streets, for approximately less than 4 months, greater impact was evidenced among the different young people, in the activities carried out finding the use of techniques of expression, analysis of situations, discussion, modeling, skills development programs, under a thematic structure, for example, What is violence? Definition of violence, elements, and types, among others. It should be noted that a pretest and post-test were carried out after the intervention with an evaluation instrument to assess competencies pre- and post-intervention, and the objectives

of the course were found to be met (32). The present research measured through a scale the psychological discomfort in people before and after the intervention program, significant differences were found in pre- and post-test with a solid tendency for its establishment, this may perhaps be due to events experienced and/or seen that allowed adding value to this study so that the change is permanent in time.

A study conducted on people with severe mental disorders (SMD) who are doubly affected as a result of their mental health (MH) and the effects of internalized stigma (IS) was considered conducive. Defined as a subjective process characterized by the acceptance and application of stereotypical beliefs associated with the disorder, negative feelings resulting from adherence to stereotypes, and self-discriminatory behaviors (33). Although it has been demonstrated that IE produces greater social anxiety and depressive symptomatology, as well as less help-seeking, difficulty in functioning, and lower quality of life, there are currently no intervention programs capable of reducing it in all its dimensions; therefore, the general objective was based on taking advantage of the accumulated knowledge to design and evaluate the effectiveness of a new intervention program that combines different strategies to achieve a global reduction of self-stigma and improve recovery variables associated with it. It seems that the accumulated knowledge adds an important value to the reduction of EI, valuable information that could give reference to the present research because the knowledge of the person, that is, the educational level completed, contributes to the reduction of psychological distress.

In addition to the aforementioned study, there is the Psicofight Project, in which twelve video cases were presented whose content is singular and focused on a conflict or frequent incident in private homes, as indicated by different surveys, reports, and testimonies published in different media. In each of these cases, an emotion (unconscious psychophysical reaction) and its corresponding feeling (conscious interpretation of the emotion) are presented, based on a situation dramatized by a character, who turns to a professional for advice and guidance (34). In the present research, there was the role of a facilitator, who was present in case the person

wanted to address him at any time to give support and be channeled to the corresponding area, it should be noted that the fact of watching videos contributed to the sensitization of the participants regarding their own emotions.

Another study showed that the development of web-based interventions for substance abuse in Latin America is a new field of interest with great potential for expansion to other Spanish-speaking countries. This study deals with a project aimed at developing and evaluating the usability of the web-based Drug Abuse and Depression Assistance Program (PAADD) and also at building a systematic frame of reference for the development of future web-based programs. PAADD aims to reduce substance use and depressive symptoms with cognitive-behavioral techniques translated into Web applications, with the involvement of a counselor to provide support and guidance (35). The web-based program may have advantages over traditional face-to-face therapies due to its low cost, wide accessibility, anonymity, and independence from time and distance factors, users reported as enjoyable the fact that they could take the sessions from anywhere and at any time, this study adds value to the virtual interventions that stand out today due to the pandemic.

Another valuable study to observe is the prenatal predictors of postpartum depression and postpartum depressive symptoms in Mexican mothers. This longitudinal study was based on being able to predict symptoms related to depression at 6 weeks and 6 months of pregnancy, together with the respective diagnostic interview, to facilitate strategies that add value to the quality of life of the mother and her child, and therefore, to the environment in which she lives (36,37). The correct elaboration of grief in time facilitates the resolution of this, it is important to highlight the preventive work, today the various platforms allow access to tools and resources of value to mental health.

Based on the evaluation of the intervention program in times of COVID-19 and the positive impact on mental health through strategies, the contribution of the present research consists of the design and implementation of an intervention program based on 7 sessions of approximately fifty-three minutes each, where the various people

had the opportunity to participate and express themselves voluntarily, through the completion of the Kessler Test before and after the intervention program, the final result being the statistically significant decrease in psychological distress. In addition to the finding regarding the level of education completed by the participants, it seems that the level of education completed contributes to the reduction of psychological distress in people, i.e., the accumulated knowledge that each person has regarding a variety of topics could add value significantly to the reduction of psychological distress.

Programs based on brief psychotherapy can contribute substantially to clinical psychology because they can play a fundamental role in the quality of life of individuals, families, and communities, among others since their field of action includes the prevention and diagnosis of mental disorders. Thus, research from the qualitative approach involves disciplines such as clinical, social, community, and medical anthropological psychology and has had relevant contributions to the understanding and resolution of the problem by considering the context in which it makes sense.

A remarkable point is the increase of interventions at the virtual level that brought with it the new normality before COVID-19, perhaps in the beginning the virtual options were chosen by a certain population due to various influential elements, for example, the time factor, reasons that permeated this choice, before the pandemic, many people, institutions or other organizations have needed virtual interventions, In the face of the pandemic, many people, institutions or other organizations have seen the growing need to adapt to the new demands, this favored the mental health intervention program because people in one way or another have had to put into practice or learn what is related to the virtual field, including platforms such as Google meet, Microsoft Team, among others, regardless of age, a reason that invites to follow up the population participating in the program.

The intervention program revealed several important elements to consider in future replications, among them, the possibility of expanding it to other cities and perhaps other countries, considering the language, since

COVID-19 has had an impact on everyone at some point in their lives, It is important to update the content of the program in a way similar to a living guide where it is possible to innovate and generate valuable content taking into account the main topic. One of the weaknesses could be the population evaluated, a population of thirty-four people were used, in future interventions the increase of the population would be an important issue to consider because the larger the sample, the greater the probability of finding significant results.

A key point and perhaps it may sound paradoxical to the reader is the pandemic is seen as a threat to the design, development, and implementation of the program, because the pandemic came to make changes and new adjustments, to mention an example, ideally the program could have been done in person and an adjustment made was the virtual adaptation, bringing with it elements that were difficult to control, such as the availability of time, the right environment, computer equipment, interruptions, various commitments of the participants, among others. Among the strengths found are the willingness and participation of people, together with the easy and fast application instrument, the Zoom platform free to the general public, the Question Pro platform of easy and enjoyable access, the final product created by each participant, and the link sent with various materials for people who completed the program.

Brief psychotherapy adds value because the patient can see how fear works, observing which resources are used and which are not, to visualize exactly the source of the fear and thus be able to dismantle it. Thus, this therapy focuses on finding the solution and, besides holding on to these tools, it offers durability over time. In the work of the clinical psychologist, several proposals can be considered, among them, the updating in COVID-19, for example, there are workshops or free and virtual courses that allow enriching the practice, also to exercise sensitivity and professionalism at the moment that the option of making a correct referral could be presented, because the intervention program should not under any circumstances lend itself to individual consultations unless these are raised outside the program. Protect one's integrity and provide support to others. Helping others in need can

be beneficial, not only to the person receiving it but also to the giver and working together as one community can help create solidarity in addressing COVID-19.

Viewing opportunities to amplify the positive and encouraging stories and images of local people who have had COVID-19, for example, stories about people who recovered or cared for a loved one during recovery and who are willing to talk about this experience. Recognize the importance of caregivers and health care workers who are caring for people with COVID-19 in one's own community. Also, recognize the role they play in saving lives and keeping their loved ones safe. Using appropriate ways to exchange messages with people who have intellectual, cognitive, or psychosocial disabilities and are infected or have been infected with COVID-19 and using ways to communicate that do not rely exclusively on written information will encourage responsibility for self-care.

Last but not least, maintaining good mental health and coping with the stresses of everyday life and new normalcy will help them to be better prepared to perform their duties. Keep in mind that this situation will not go away overnight and that the focus should be on long-term occupational capacity rather than repeated responses to short-term crises.

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