

Comparing the Impact of COVID-19 on Depression and Social Anxiety Disorder of Male and Female

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Abstract: This in-depth assessment of the literature aims to assess and compare how the COVID-19 pandemic has specifically impacted depression and social anxiety disorder in both males and females. By focusing on these two well-known mental health conditions, this essay seeks to lucubrate the complex interplay between gender dynamics and the pandemic's psychological effects. The study will carefully consider whether the various pandemic-related disruptions, such as extended social isolation, economic crises, and upheaval of daily routines, have had different effects on men and women in terms of the prevalence and severity of depression and social anxiety disorder. The study aims to highlight potential distinctions in the experience and expression of these mental health issues by examining the data via a gender-specific perspective. It will look into age-related variations, the impact of various social support networks, and the interaction within various societies in addition to gender disparities. The research intends to provide a thorough understanding of how people from varied gender origins manage their mental well-being in the face of the pandemic's difficulties by unraveling this complexity. By highlighting the gender-specific characteristics of depression and social anxiety disorder, the research hopes to advance our understanding of how the pandemic's effects affect all facets of people's lives.

Keywords: COVID-19, depression, stress, social anxiety disorder, gender differences

1. Introduction

COVID-19 is considered the main epidemic from 2020 to 2022, hugely influencing almost the whole world. As a result of the pandemic's indiscriminate character, many countries saw significant casualties. Everyone is terrified of it because of its virulence and lack of a cure, and they worry that they may become the next victim. Since the virus is so widespread, people are continually concerned about their own health and the safety of their loved ones, which has increased general worry.

The widespread effects of the epidemic have produced a situation that is marked by doubt, fear, and loneliness. The abrupt disruptions in daily routines, closure of social spaces, and the loss of face-to-face interactions have intensified feelings of isolation. In case the loss of social relationships can have a significant influence on psychological well-being, these conditions provide favorable environments for the emergence and progression of mental health issues [1].

Social anxiety disorder, characterized by a severe fear of social interactions and attention, has been exacerbated by the pandemic's constraints. The avoidance of social situations and increased sensitivity to health dangers have made many with this condition more distressed. In addition, the

difficulties brought on by the epidemic have induced or worsened depression, a common mood disorder. The emotional weight is exacerbated by future uncertainty, financial instability, and the lingering fear of sickness.

While there are some similarities in the experiences of males and females, the repercussions of the epidemic are a complicated interplay of biological, social, and psychological elements. Understanding how COVID-19 impacts depression and social anxiety differently in males and females requires rigorous investigation. The gendered social norms and obligations of our cultures have a significant influence on how various people perceive and respond to stress. Societal expectations, familial dynamics, and cultural norms may affect men and women differently, which may affect their coping strategies and emotional reactions. A number of factors, including as work shifts, family responsibilities, and the availability of social help, can have a significant impact on the disparities in mental health experiences between genders.

This in-depth examination of how COVID-19 affects depression and social anxiety disorder in both men and women can help individuals comprehend the nuanced factors that have an impact on mental health during difficult situations. This study aims to comprehend the fundamental mechanisms that govern how different genders respond to the pandemic's difficulties at various ages rather of relying merely on numbers. As the epidemic continues, it is crucial to acknowledge the long-term effects on mental health and to give priority to efficient support systems and interventions that take these complex gender dynamics into account.

2. Mental Illness during COVID-19

Depression and Social Anxiety Disorder (SAD) can have a significant impact on an individual's emotional and psychological well-being, causing a variety of painful emotions and sensations. Individuals suffering from depression frequently experience an overpowering sensation of despair, hopelessness, and emptiness. Daily activities lose their appeal, and pervasive tiredness sets in, making even simple chores appear impossible. Self-esteem suffers, resulting in emotions of guilt and self-blame. Concentration becomes difficult, adding to feelings of inadequacy and anger. Individuals may retreat from social engagements as a result of their emotional weight, leading to isolation.

The basic experience of Social Anxiety Disorder is around an extreme dread of judgment and negative judgement by others. People suffering from SAD may experience anticipatory worry before social events, which can be expressed physically as trembling, sweating, and a high heart rate. When confronted with such circumstances, a heightened sense of self-consciousness occurs, frequently accompanied by a keen awareness of perceived flaws or failings. This self-focus exacerbates anxiety, making it difficult to maintain eye contact, communicate, or even eat in front of others. Individuals suffering from SAD may also engage in avoidance behaviors, avoiding events that cause them anxiety, which ironically increases their fear over time.

Isolation is a common thread in both depression and SAD. As people try to explain their emotional turmoil to others, depression can lead to self-imposed isolation. Fear of unfavorable judgment causes avoidance of social circumstances in SAD, resulting in a gradual withdrawal from activities and relationships. The emotional toll is significant, frequently destroying one's sense of self, confidence, and overall quality of life.

It is critical to note that people's experiences with depression and SAD can vary greatly. Some people may only have physical symptoms, while others may have intrusive negative thoughts. Despite this variation, finding expert help is critical. Cognitive-behavioral therapy and medication, for example, can help people manage their symptoms and regain control of their lives.

The author discovered via the research that there are numerous studies being conducted all around the world to determine the influence of the pandemic on general mental health. Distributing surveys and pre-selecting experimental subject groups is a common strategy. These individuals subsequently

answer the same set of questions at various intervals or take part in progressively organized queries, allowing researchers to glean insightful information. This approach contributes to a more thorough knowledge of the epidemic's effects since it captures the changing subtleties of mental health experiences during the epidemic's swings.

In response to the COVID-19 pandemic, distinct patterns in the ways that men and women respond to stressors have come to light. These patterns have subsequently influenced the divergent tendencies shown in how susceptible they are to depression and Seasonal Affective Disorder (SAD). According to research, women frequently show a larger propensity toward seeking emotional support and turning to social networks to deal with stress. They are more prone to communicate their feelings and worries in conversation, providing a forum for open communication and emotional release. Males, on the other hand, frequently show a predisposition to minimize emotional reactions as a means of abiding by social conventions that forbid overt shows of vulnerability. Traditional masculine beliefs that place a strong emphasis on independence and emotional control may be to blame for this stoicism [2].

As a result, during the COVID-19 crisis, women would feel a stronger and more immediate sense of emotional relief as a result of their open communication and support networks, which might prevent the worsening of depression symptoms. The varied response to the pandemic also encompasses how environmental changes affect mental health. During particular periods of the year, particularly in the winter, a decline in mood and energy levels is a symptom of SAD, a subtype of depression brought on by seasonal changes [3]. Females may be more vulnerable to the shorter days and social isolation associated with the start of SAD because they are often more perceptive to emotional cues and aware of interpersonal dynamics. This sensitivity is supported by the impact of hormonal fluctuations throughout the menstrual cycle and neurotransmitter modulation, which can make women more vulnerable to circadian rhythm disruptions and decreased exposure to natural light throughout the winter. Unfortunately, because they tend to place less emphasis on emotional relationships and have a higher tolerance for environmental stressors, men may react to the seasonal changes linked to SAD in a more measured manner. Their refusal to admit emotional distress may unintentionally buffer persons from some SAD triggers, resulting in a less noticeable seasonal change in mood and energy. However, because girls are less likely to seek professional help when experiencing depressed symptoms, this gendered coping strategy may expose them to long periods of untreated mental health difficulties [4].

In conclusion, the divergent patterns in depression and SAD may be related to how men and women respond to the obstacles presented by the COVID-19 pandemic. The tendency of females to express their emotions and seek out social support may act as a buffer against the onset of depressive symptoms, but it may also make them more susceptible to SAD triggers. Male instincts to control their emotions and put up with stress, however, may lessen the impact of seasonal changes on mood while delaying the identification and treatment of underlying depressed symptoms. For the purpose of putting into practice specialized mental health measures that address the various needs of people both during and after the pandemic, it is essential to comprehend and treat these gender-specific responses.

One of the studies focuses on the role of social-emotional vulnerability in order to comprehend how the COVID-19 epidemic affects children's psychological health. The study adopts a longitudinal methodology and uses questionnaires to monitor children's psychological discomfort over the course of a year. A group of volunteers completed questionnaires at four distinct times during the course of the study, which lasted a year. The goal was to monitor changes in children's psychological distress as they dealt with the pandemic's obstacles, including anxiety and post-traumatic stress (PTS) symptoms. The study's results showed an interesting pattern. The individuals showed increased degrees of anxiety and PTS symptoms over the year. These findings suggest that the ongoing epidemic and the resulting disruptions significantly impacted the psychological health of the study's

young participants. The study also tried to understand how social-emotional vulnerability affected these distress levels, which it shows a rise in participants' anxiety and PTS symptoms, highlighting the significance of managing children's psychological well-being in times of stress. The study also emphasizes how social-emotional vulnerability may play a moderating function in these distress levels. These results underline the need for focused initiatives to promote children's well-being and advance our understanding of how the epidemic has affected children's mental health [5].

Another study proposes a "snowball sampling strategy focused on recruiting the general population living in Iran during the COVID-19 epidemic.". Khademian et al. investigated 1498 random individuals and performed a T-test and mean test on their mental health [6]. The results show that "being female, living with a high-risk family member to COVID-19, perceived risk of COVID-19, and following COVID-19 news were associated with a greater level of depression, anxiety, and stress." [6]. This outcome is consistent with findings in other countries, such as China and Iraq's Kurdistan.

Researchers discovered other connected symptoms, which are quite unique, that a number of people diagnosed while examining the impact on depression and Social Anxiety Disorder. One study was driven to investigate whether TKS-related experiences are emerging internationally during the epidemic. People are concerned about their value in the eyes of others, as well as the misery they cause others due to quarantine or societal rejection (i.e., fear of infecting or troubling others, in addition to dread of being infected). Furthermore, many people are still concerned that their COVID-19 status will be leaked to others [7].

Different studies employ different questionnaires to produce comparable results. However, one set of graphs clearly shows the trend of males and females affected by the epidemic. Each diagram illustrates that girls are elevated the majority of the time and that between 9-11 and 12-year-old children, the older one has more influence, resulting in increased worry and tension. The explanation for this could be that by the age of 12, children have developed a mature memory, allowing them to remember painful events for a longer period of time than when they were younger. This outcome is then validated by subsequent studies. That is, the whole structure of the body's systems, such as the complete establishment of memory, will have a significant impact on the child's experience of events [5].

3. Conclusion

In conclusion, the COVID-19 pandemic's tremendous influence on mental health has shed light on the complex interplay between gender, psychological responses, and the appearance of diseases such as depression and Social Anxiety Disorder (SAD). We have delved into the varied ways in which males and females react differently to the pandemic's obstacles, hence altering their vulnerability to these mental health disorders throughout the course of our research. The accumulation of different trials, questionnaire findings, and theoretical insights supports the widely held belief that females are more likely to be influenced by the pandemic, resulting in increased levels of psychological distress.

Male and female responses to the epidemic have emerged as a crucial topic in understanding reported gender inequalities in mental health outcomes. Females, according to research, are more likely to utilize emotion-focused coping mechanisms, seek social support, and engage in expressive dialogues about their feelings. While this inclination can provide quick emotional comfort, it can also expose individuals to a more immediate and powerful emotional impact from the pandemic's stressful circumstances. Males who adhere to traditional conceptions of masculinity, on the other hand, may adopt problem-focused coping techniques and show a reluctance to openly express emotional vulnerability. Such responses may initially serve as a barrier against the assault of depressed symptoms and anxiety. However, in the long run, they may contribute to the worsening of underlying mental health difficulties.

The findings of the trials and questionnaires highlight the gender differences in vulnerability to the pandemic's psychological toll. Females regularly report higher degrees of sadness and SAD symptoms, indicating a greater vulnerability to the crisis's social and emotional consequences. Females have a higher prevalence of depression due to their heightened sensitivity to interpersonal dynamics, which makes them more vulnerable to feelings of loneliness and isolation during moments of lockdown and social estrangement. Similarly, given the disorder's sensitivity to changes in light exposure and social interactions, women's proclivity for emotional expression and empathy may enhance their experience of SAD symptoms.

It is critical to stress that these gender discrepancies are the result of complex interactions between biological, psychological, and societal factors rather than merely biological differences.

Given the aforementioned, this study emphasizes the incontrovertible fact that females are more likely to be influenced by the psychological consequences of the COVID-19 epidemic. While their proclivity for emotional expression and social connectedness fosters resilience, it also makes them more vulnerable to mental health issues. Moving forward, mental health initiatives and legislation should take these gender-specific vulnerabilities into account, offering specialized therapies that address the distinct needs of both men and women.

References

- [1] Carlton, C. N., Garcia, K. M., Andino, M. V., Ollendick, T. H., & Richey, J. A. (2022). *Social anxiety disorder is Associated with Vaccination attitude, stress, and coping responses during COVID-19*. *Cognitive Therapy and Research*, 46(5), 916–926. <https://doi.org/10.1007/s10608-022-10310-3>
- [2] Kujawa, A., Green, H., Compas, B. E., Dickey, L., & Pegg, S. (2020). *Exposure to COVID-19 pandemic stress: Associations with depression and anxiety in emerging adults in the United States*. *Depression and Anxiety*, 37(12), 1280–1288. <https://doi.org/10.1002/da.23109>
- [3] Ranta, K., Aalto-Setälä, T., Heikkinen, T., & Kiviruusu, O. (2023). *Social anxiety in Finnish adolescents from 2013 to 2021: change from pre-COVID-19 to COVID-19 era, and mid-pandemic correlates*. *Social Psychiatry and Psychiatric Epidemiology*. <https://doi.org/10.1007/s00127-023-02466-4>
- [4] Langhammer, T., Peters, C., Ertle, A., Hilbert, K., & Lueken, U. (2022). *Impact of COVID-19 pandemic related stressors on patients with anxiety disorders: A cross-sectional study*. *PLOS ONE*, 17(8), e0272215. <https://doi.org/10.1371/journal.pone.0272215>
- [5] Raymond, C., Provencher, J., Bilodeau-Houle, A., Leclerc, J., & Marin, M. (2022). *A longitudinal investigation of psychological distress in children during COVID-19: the role of socio-emotional vulnerability*. *European Journal of Psychotraumatology*, 13(1). <https://doi.org/10.1080/20008198.2021.2021048>
- [6] Khademian, F., Delavari, S., Koohjani, Z., & Khademian, Z. (2021). *An investigation of depression, anxiety, and stress and its relating factors during COVID-19 pandemic in Iran*. *BMC Public Health*, 21(1). <https://doi.org/10.1186/s12889-021-10329-3>
- [7] Tei, S., & Wu, H. Y. (2021). *Historical reflection on Taijin-kyōfushō during COVID-19: a global phenomenon of social anxiety? History and Philosophy of the Life Sciences*, 43(2). <https://doi.org/10.1007/s40656-021-00392-9>