

## COVID -19 Lockdown and Effect on Individual Economy in the Lucknow city

Aishwarya Awasthi, Shivendra Kumar Singh

Department of Community Medicine & Public Health King George's Medical University, Lucknow, Uttar Pradesh

### CORRESPONDING AUTHOR

Dr.Aishwarya Awasthi, SRF (ICSSR), Department of Community Medicine & Public Health King George's Medical University, Lucknow, Uttar Pradesh 226003

Email: [aishanth16@gmail.com](mailto:aishanth16@gmail.com)

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### ARTICLE CYCLE

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### ABSTRACT

The COVID-19 pandemic has exhibit deep stress all over the world. Despite recent speculative suggestions of poorer psychological state in all age in India, since the beginning of the pandemic, there are no systematic efforts to help consequences. This research tried to report on the content of effect of lockdown on individual economy in Luck now city, those who could also be notably liable to negative emotions alongside news on the impact of corona virus on their lives. These impacts consecutively related to negative have an effect on. Participants' high worries centred on economy attainments, social and recreational activities, and physical health. A lot of females than males disturbed regarding educational attainment and physical health whereas a lot of males disturbed regarding economical, social and recreational activities. Thus, Indian individuals report important impact of the pandemic on varied aspects of their life and area unit notably disturbed regarding economical and educational attainments, social and recreational activities and physical health. During pandemic and lockdown people lost their jobs, their business were closed, they have had no option for their livelihood They were suffered from more stress. They were panic to thought about how to move their family life. How to secure their family. Thus Pandemics are extremely impactful and endangering the protection and traditional functioning of the community.

### KEYWORDS

Social Economical, Covid-19, Education, Family, Youth, Attainment

### INTRODUCTION

Emergencies and pandemics are renowned to guide to massive scale psychosocial impact. The psychological impact might embrace emergency or pandemic-induced distress (e.g. concern of the virus, death anxiety, subtle anxiety that is future familiarized, grief, physical isolation of people, families or

communities resulting in non-pathological distress and psychological state issues in an exceedingly little minority), worsening of pre-existing issues (e.g. severe mental disorder; alcohol abuse) and humanitarian aid-related issues (e.g. anxiety because of a scarcity of knowledge concerning food distribution). Due to continue lockdown and excess expenditure

on health life of people became financial imbalance. This bad condition of economic is still exist today due to loss of earning member, loss of job, dump of business, loss of health etc.

### Literature Review

Emergency-induced social and economic. Emergencies are doubtless to have an effect on plenty, bound teams of people like ladies, children, elderly, poor, migrants, frontline employees, marginalized and people with pre-existing vulnerabilities etc., are doubtless to be disproportionately full of the emergencies.(1) Psychosocial impact created by the epidemics will exceed the individuals' and community's management capability, usually resulting in high levels of distress; the results of which may last longer even once the happening has concluded. (2,3) highlighted that healthcare professionals and frontline workers often face anxiety, grief, and societal disapproval during epidemics. These emotional and social burdens complicate their ability to provide effective care and maintain personal well-being. Studies suggest that supportive interventions are crucial to mitigate these adverse effects and improve both mental health and professional performance. Physical isolation of people, families or communities exposed to virus will produce an extra risk for psychosocial issues (IASC 2015). (4) The COVID-19-led fall down in India may have shrunk the country's middle-class population by 32 million, pushing 75 million more people into poverty in 2020. The Pew report is based on an examination of World Bank data. The difference between the two countries can also be explain by the position and path of their economies. India went through its most horrible recession in 40 years with enormous job losses in FY 2020-21. (5) Released by the International Monetary Fund estimated India's economy would contract by eight percent in FY21 while China would expand by 2.3 percent in the same period. Prior to the pandemic, it was anticipated that 99 million people in India would belong to the global middle class in 2020. However, a year into the pandemic, this number is estimated to be 66 million. Meanwhile, the number of poor in India is projected to have reached 134 million, more

than double the 59 million expected prior to the recession. According to the report, the poverty rate in India, (6) rose to 9.7 percent in 2020, a sharp increase from the January 2020 forecast of 4.3 percent.(7) The authors analyze how income inequality exacerbated health outcomes and the broader consequences of the outbreak on different income groups. The research highlights the urgent need for targeted public health interventions and policies to support vulnerable populations during global health crises. (8) explores the multifaceted impact of the COVID-19 pandemic on low- and middle-income countries (LMICs). The authors discuss how these countries faced unique challenges during the pandemic, including strained healthcare systems, economic disruptions, and difficulties in implementing public health measures According to Dang.(9) Impact of the COVID-19 pandemic on various occupations during the initial national lockdown in Vietnam and how different sectors were affected, including shifts in employment patterns, job losses, and economic challenges faced by workers.(10) et.al addresses the psychological impact of the COVID-19 pandemic, focusing on mental health strategies to manage issues beyond just paranoia and panic. (11) Explain the effects of the COVID-19 pandemic on household income and food security in Kenya and Uganda through a rapid assessment. (12) Their article explores the socio-economic impacts of the COVID-19 pandemic on household consumption and how the pandemic has affected spending patterns and exacerbated poverty, particularly among vulnerable populations.(13) '*Pradhan Mantri Garib Kalyan Package Insurance Scheme for Health Workers Fighting COVID-19*' extended for another 6 months. The scheme, initially introduced to provide financial support and insurance coverage to healthcare professionals, was extended for an additional six months.(14) examines how risk factors for severe illness from COVID-19. The study highlights that disparities exist, with certain populations facing a higher risk of severe outcomes due to socioeconomic and racial factors, (15) explores the psychological impact of the COVID-19 pandemic on the Indian population. The study

assesses the level of knowledge, attitudes, and anxiety related to the pandemic and examines perceived needs for mental healthcare. (16) conducts a systematic review of existing literature on the role of social media during outbreaks of emerging infectious diseases. The study evaluates how social media platforms influence public awareness, spread information, and impact outbreak management.

**Objectives:** The main objective of the present research is based on following points such as:

1. How Economical loss is critical to scale back measures to stop and revive poverty and lack.
2. How persons with low economic conditions might have difficulties in implementing measures to stay safe, healthy and better condition.
3. How social distancing and self-isolation, travel restrictions, reduced manpower across all economic sectors, Job loss, faculty closure.
4. To know disruption of family or bread earner loss or loss on income leads to minimized demand for commodities and made product. Increased demand for medical provides enhanced demand in food sector.
5. How enhanced violence due to imbalanced economic structure of Panic-buying and storage of food product, Poor people, homeless people, refugees, and migrants square measure disproportionately stricken by the health and economic impacts of COVID.

## **MATERIAL & METHODS**

**Study Type & Study Design-**This study is based on primary data collected from family of COVID patient.

**Study Setting-**The study is conducted on the Covid-19 patient of the different colonies of city Lucknow Uttar Pradesh such as Jankipuram, Faizullaganj, Daliganj, Gomtinagar, Takrohi, Krishna Nagar, Balaganj, Chawk, Hazaratganj, Indiranagar, Alambagh, Sarojini Nagar, Nilmatha and other approximately all sub areas of Lucknow City's 5 demographic zones.

**Study Population & Study Duration-**The research population which is sampled under this study is belong to earning group. 2023. The data collection duration is approximately Six month (August 2022 to February2023)

**Sample Size-** The sample size is total 2068 individuals, suffered and survived from covid-19 of different zones of Lucknow city.

**Inclusion & Exclusion Criteria-**Those individuals and families who were suffered from COVID 19 wave one and wave second.

**Strategy for Data Collection-** Only those people were selected, who have COVID Infection and impact. Proforma of In-depth interviews were used to collect the data.

**Data Analysis-** Qualitative analysis is used to get the result of the study; despite of above technique these tools were also used.

- Google form entry
- Secondary technical data as Name, demographic entry and phone number through hospitals, friends, relatives and local NGO.
- Tele calling with recordings of audio.
- Excel data entry for records.

Qualitative analysis is outlined as in variety of text knowledge from interview transcripts is usually hooked in to the researcher's integrative, analytical skills with the private data of social context from wherever the info is collected. Therefore, knowledge terminated with the analysis is in variety of numeric graph.

## **RESULTS**

Effect of less income or no income on day feeding habit of peoples during covid-19 and post Covid conditions as per tables (1,2,3,4).Probability of skipping breakfast and lunch increased as the amount of leisure increased and due to less availability of resources, they combined lunch and breakfast.Habit of snacking between meals probably stop due to health concerns and also their habit directly depends on subject to availability of such things.Quantity/portions of meals and snacks reduced and directly proportional to the amount of availability of resources.Daily intake of fruits and vegetables reduced and directly proportional to the amount of availability of resources.More inclined towards intake of a balanced diet

(including healthy ingredients such as whole wheat, pulses, legumes, eggs, nuts, fruits and vegetables) and directly proportional to the amount of availability of resources. Consumption of junk food/fast food and fried food totally avoided or reduced due to health concerns and also their habit directly depends on subject to availability of such things. Intake of sugar-sweetened beverages, sweets /candies/ chocolate (carbonated soft drinks, sugar-sweetened juices) totally avoided or reduced due to health concerns and also their habit directly depends on subject to availability of such things. Household income in India was drastically impacted due to the corona virus (COVID-19) lockdown as of April 12, 2020. There was a significant decrease in the level of income with households reporting a fall in income from about nine percent in late February to a whopping 45.7 percent in mid April. Rise in income saw a diverse trend representing similar results; from 31 percent in late February to 10.6 percent on April 12, 2020. The country went into lockdown on March 25, 2020, the largest in the world, restricting 1.3 billion people, extended until May 3, 2020.

The pandemic impacted incomes in a regressive manner. Poorer households were impacted more, suffering a sharper drop in their incomes as compared to richer ones. During the first wave of the pandemic, the top quartile (top 25%) of the all-India population suffered the least with average monthly incomes dropping by 33% between February and April 2020. The corresponding drop in incomes for the remaining three-quartiles of the population was 46% on average. The fall in incomes during the first wave was more pronounced in the urban sector, and spread monotonically over the distribution – the drop was the highest for the bottom quartile, followed by the second, followed by the third, and the least for the top quartile. Individuals belonging to households in the bottom quarter of the urban population saw an income drop of 57% between February and April 2020, while those in the top quartile suffered a drop of 40%.

**Recovery was sharper for the poor:** Before the coming of the second wave in February 2021, income recovery was sharpest for individuals from households in the bottom quartile, and the least for those from the top quartile. To be sure, in absolute terms the latter's incomes were more than three times higher that of the former. By January this year, incomes for the bottom two quartiles (bottom 50%) had recovered fully, i.e., gone back to pre-pandemic levels; while those for the top two quartiles continued to remain 5-6% below pre-pandemic levels. Urban incomes experienced a slower recovery.

**Recovery for permanent salaried jobs:** The income recovery story aligns with emerging employment trends wherein recovery was quicker and complete for the more precarious jobs (casual/daily wage workers and self-employed), while it remained slow and incomplete for salaried workers. Even till August 2021 (the latest period for which we have employment data) only 48% of them got back to salaried jobs. The similarity with the income story becomes apparent when we notice that daily-wage, and self-employed workers are more likely to be in the lower income groups, and salaried workers are more likely to belong to the high-income groups. Even though the impact of the second wave on incomes was smaller in magnitude in comparison to the first wave, it was significant. The drop in incomes was similar for the bottom and top quartiles, but was the highest for the middle two quartiles or the middle 50% of the distribution.

**Table 1 Employment Type**

Occupation	Number
Full time	258 (12.5%)
Part time	85 (4.1%)
Unemployed	258 (12.5%)
Self-employed	85 (4.1%)
Homemaker	258 (12.5%)
Student	1119 (54.2%)
Retired	0 (0%)

**Table 2 Food Habits**

Food Habit Change	Number
Yes	774 (37.5%)
No	861 (41.7%)
May be	345 (16.7%)
Can't say	85 (4.1%)

**Table 3 Type of Intake**

Healthy Products Intake	Number
Daily	861 (41.7%)
Some days in a week	258 (12.5%)
Some days in a month	345 (16.7%)
Subject to availability	603 (29.2%)

**Table 4 Financial condition**

Economic crisis	Number
Yes	1461 (70.8%)
No	429 (20.8%)
Can't Say	171 (8.3%)

**Table 5 Routine**

Day to Day Activities	Number
More so than usual	87 (4.2%)
Same as usual	1635 (79.2%)
Less so than usual	171 (8.3%)
Much less than usual	171 (8.3%)

## DISCUSSION

As our earlier research has shown (State of Working India 2021), the poorest segment of the population in the months of March and April 2020 lost their entire income. It seems inevitable that such households must have borrowed heavily to survive the initial months of complete lockdown. Furthermore, measuring this indebtedness is difficult owing to the informal nature of borrowing. Nevertheless, we find evidence for increased indebtedness after the pandemic from several purposive surveys. This suggests that even as the poorer sections of the population find their employment back and return to monthly income levels similar to their earnings pre-pandemic, these households are likely to bear the burden of long-term indebtedness. The numbers suggest it is vital to remain cognizant of these differential long-term consequences of the pandemic, particularly while designing policies and schemes to assist different segments of the population. The understanding of recovery should be inclusive, and must go beyond headline income and employment statistics. The Union Budget should make provisions for fiscal support to vulnerable households, in the form of adequate allocations for MGNREGS, expanded food support, and introduction of urban employment programmes which continue to be critical for restoring and strengthening aggregate demand of not just a small section but all stakeholders in the economy.

## CONCLUSION

Middle class income group are mostly affected by the crisis followed by pandemic. Most of the job losses have been seen in the same economic group and private sector are mostly affected. Situation of Business class group are worsen due to lock down and check on transport sector tasks. Feeding habit of middle class people have been hampered due to not availability of resources. Proper medical treatment also not available for middle, poor and people below poverty due to empathy of govt and officials and also not availability of resources related with money concern. Middle class people were avoided to go to hospital and taken care at home for Covid complications. Due to less money during Covid or job loss, nutritional content in diet of family reduced. Most of kids have faced lack of education due to fee concern. Many women health complications have emerged or worsen due to job loss. Elite classes have not shown any as such economic impact in or after COVID.

## RECOMMENDATION

This study has public health importance that government should always aware and alert for this type of alarming conditions. Although during this pandemic all sector of Indian Government support the whole population still Government play important role to ensure people for their more better life for future, so that people feels more protected in every aspect of their life.

## LIMITATION OF THE STUDY

The number of the units of analysis we used in our study is dictated by the nature of research problem we are investigating. As if our sample size is too little, it will be hard to come across most important relationships from the data, as statistical tests in general require a larger sample size to make certain a representative allocation of the population and to be consider representative of group of citizens to whom results will be widespread or transfer. A lack of data or of reliable data will likely require us to limit the extent of our analysis, the size of our sample, or it can be a considerable obstacle in result a movement and a meaningful relationship. We need to not only explain these

restrictions but provide strong reasons why we believe data is missing or is unreliable. However, don't just throw up your hands in frustration; use this as a chance to describe a need for future research based on designing a diverse method for gathering data. Citing prior research studies forms the basis of our literature review and helps lay a groundwork for understanding the research problem we are investigating. Depending on the scope of our research topic, there may be little, if any, prior research on our topic. Before assuming this to be true, though, consult with a librarian! In cases when a librarian has confirmed that there is little or no earlier study, we may be required to develop a totally new research.

### RELEVANCE OF THE STUDY

Pandemic impact is not only on health but also life of people & countries economy.

### AUTHORS CONTRIBUTION

Both authors have contributed equally.

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### CONFLICT OF INTEREST

There are no conflicts of interest.

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### DECLARATION OF GENERATIVE AI AND AI ASSISTED TECHNOLOGIES IN THE WRITING PROCESS

The authors haven't used any generative AI/AI assisted technologies in the writing process.

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