An Analysis on Domestic Violence, Depression and Surge of Anger During the COVID-19 Outbreak in India

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Abstract — Covid-19, which is also referred to as Novel Coronavirus Disease, has begun in China and has rapidly crossed multiple national borders and infected people all over the world, where India has been severely affected by this outbreak in almost all sectors; as a result of the threat of the spread of this viral disease, India, at the beginning, has been forced to shut down all general activities and to force a tight lockdown to restrict human interactions. These sudden restrictions and orders have puzzled and affected the common public in many ways, such as emotionally, physically, financially, and career-wise, halting their potential improvements, and have also ruined many people's livelihoods and the rhythm of life in India. Although the process of unlocking has started and successfully implemented, at the time of post lockdown, people were not afraid of the coronavirus at the same time, due to the experiences of facing rapid attacks from new variants such as Delta, Delta Plus, and Omicron, triggered different psychological and social problems in the living society. In this connection, this research paper exclusively focuses on the sudden rise of domestic violence, depression, and surge of anger between people since the virus outbreak in India. This study covers various associated issues as well as views on financial and social issues and government actions to control the spread of the virus when these negative characteristics make the situation more vulnerable. Thus, through the findings and analysis of this paper, it is useful to know the pulse of common people in India and their tactics to handle these situations which also prevents negativity in people because of these crucial circumstances.

Keywords—— Depression, Emotional, Financial, Frustration, Indians, Lockdown, New Normal, Post-Lockdown

I. INTRODUCTION

Covid-19, also known as coronavirus disease, is an infectious disease caused by a newly discovered virus called "Corona", and the specific number '19' was the founding year of this virus in December 2019. Roy et al. (2020) mentioned that "A cluster of about 40 cases of pneumonia of unknown aetiology has been reported, some of which are vendors and dealers in the Huanan Seafood market" (Roy et al., 2020, p. 1) in China at the beginning stage of this viral illness. However, in March 2020, the World Health Organization officially declared the illness a pandemic. The shape of this virus is like “Crown” which is why it is called Corona. Even though the word Corona is
derived from the Latin language-based word, it also signifies Crown the same. Nevertheless, there is still a suspected origin of the new coronavirus and no official information is given, but cases started to increase rapidly at that time. In addition, several news outlets and scholars say that coronavirus was born in China and spread worldwide. Many experts believe that the coronavirus has only been detected as Severe Acute Respiratory Syndrome (SARS) in 2004, and where this SARS destroyed many people in China, Ncov-19 is an update of the SARS virus. All of these viruses belong to the "Coronaviridae" class. However, SARS-2004 mortality rates are more dangerous than Ncov-19 (Novel Corona Virus -2019), but Ncov-19 is higher than SARS in dissemination, but the fatality risk is small, with 1 out of 5 cases of the case of Covid-19 seriously being until the second wave. However, this cluster or family is expanded into several new mutations or variations such as Delta, Delta Plus, Alpha, and Omicron mutations and several other upcoming versions of the Coronavirus until the present scenario.

Regardless of Variants or strains, either it is ordinary, Delta, Delta Plus, or Omicron and more, the Covid-19 symptoms will be classified into two types: 1) symptomatic and 2) asymptomatic. In contrast, non-symptomatic forms of the corona are difficult to classify because there are no symptoms of human illness. However, according to the World Health Organization, there is a clear definition of the symptomatic version of this disease, according to the World Health Organization "The symptoms of Covid-19 starts from fever, dry cough, and tiredness. Other symptoms that are less common and may affect some include aches, nasal congestion, headache, conjunctivitis, sore throat, diarrhea, loss of taste or smell, or a rash on skin or discoloration of fingers or toes' (WHO, 2020, p. 1). Initially, the signs begin with a mild effect, but when a patient neglects the disease, he or she ends with pneumonia. Nevertheless, with the aid of doctors and their reliable medical prescriptions, the maximum number of patients recovered from this disease in 2020. In addition, the problems associated with Covid-19 transmission should be considered. Means, wearing masks, and hand glows should strictly maintain social distance, should not allow the outsider to be physically touched, and have proper vaccination. Currently, several pharmaceutical firms, international institutions, and government healthcare agencies in many countries have attempted to find vaccines and medical drugs that partially heal this disease outbreak. However, in a parallel way, new virus variants and their influential waves arise with mutations worldwide, which continue to occur as long as the coronavirus transmits through the community, and the delta and omicron mutant genera will continue to evolve.

The whole world is stagnant, and the spread of this virus slows down during the lockdown. This pandemic has affected the world in many ways, including financially, emotionally, physically, and diplomatically. However, many countries attempt to eliminate or partially eliminate the lockout without other options to save their land from other problems such as financial crises, inflations, recessions, and hunger deaths. Although the WHO cautioned against these acts, it said this could lead to an increase and uncontrollability of the spread of the coronavirus, which is currently occurring. Since this Covid restrictions and lockdowns, due to the breakage of the financial chain system, African countries' citizens are dying with starvation more than the disease on the other side. Even in developed countries, people are also losing their hopes towards tomorrow's livelihood, which was reflected through the power of purchasing goods; in this case, people prefer to save money as a precaution step to face the future’s uncertainty rather than to spend it.

II. THE IMPACT OF COVID-19 OUTBREAK ON INDIAN GENERAL PUBLIC

Now, in the Indian case, India is geographically the seventh largest nation and the second most populated. In contrast with the rest of the planet, India is distinct and it is difficult to deal with the coronavirus outbreak. However, knowing the transmission of this Covid-19 disease in India from its beginning before explaining the key material is essential. Since the arrival of the pandemic, India has implemented a strict level lockdown due to the huge population. However, according to the news sources, the first case was verified in the Thrissur district of Kerala State on 30 January 2020 in a student who had come home for a vacation from Wuhan University in China. Later, the fire of Covid-19 sprays all over India, however, due to sincere efforts of Doctors, Medical Supporting staff, cleaning staff, and Police, this disease somewhat slowed in the processing of rising cases. Controlling the pandemic is becoming a difficult task in India, even step-by-step, following the unlocking procedure to stabilise the livelihoods of Indian citizens. However, instead of normalisation, the situation is becoming more complicated because people are dying with starvation rather than diseases in India at that time.

India's migrant labour issue struck just weeks after the government imposed a rigorous lockdown. Millions of daily wage labourers in the cities and towns of India faced starvation, and Prime Minister Narendra Modi immediately imposed the world's strictest state-wide lockdown with only four hours' notice and no backup plans and solutions, which was criticised at the highest tone.
against the government mechanism and policies. Later, the
lockout relaxation started gradually in May 2020, but
officially, an experimentally unlocking phase was
announced in June 2020. However, great criticism is made
of these relaxations, and several figures indicate that Covid-19
cases and death rates are often increased by these
relaxations which is unfortunate. In India, Total cases have
escalated by the middle of July 2020 and in the starting of
the month October 2020 the total cases are 6.84 millions
and 5.88 million people recovered but 1,06,000 died but
these numbers are temporary because their rapid growth
occurred in 2021 due to the intervene of Delta variant,
which drastically increased the count of deaths and
diseased people in double of the above count. At another
side of this, where the till the Omicron era of 2022 in
India, based on the statics of Trending Economics the
count of deaths enlisted as 5.15 Lakhs where the cases
registered 42.9 million until February 2022. Since the
outbreak of the virus, various international bodies, such as
WHO, recommended that India should not revoke the
Covid regulations and advised to follow them strictly;
however, India revoked the Covid regulations gradually
for various reasons associated with multiple significant
national elements and for people’s needs. Later, India
slowly started unlocking procedures, irrespective of the
rising cases of corona disease. However, several months
earlier, India strictly implemented the lockdown because it
knew what would happen when the disease spread across
the country. However, the world’s most severe lockdown
affected various sectors in the country (India). In this
coordination, Ahmad et al. (2020) in their study remarked
that the jobs of approximately 100 million or more Indians
are at stake during and after the Covid-19 shutdown. Non-
food stores have shuttered their operations, and food
businesses are facing significant losses (Ahmad et al.,
2020). Statistics may show outline numbers such as sectors
and divisions, but in terms of financial, social, health,
mental, and various other aspects, people at the grassroots
level are much more affected by this outbreak because a
discounted number and statistics is nothing but the
downfall of several individuals, families, communities,
and working agencies.

However, it appears that the destruction of this disease will
slow down by the end of 2020, but in 2021, new variations
known as Delta and Delta plus emerged. Before that,
people in India were hopeful—or at least cautiously
optimistic—that the pandemic would fade into the
background by summer 2021, while there was still a
chance that new mutations in this virus may bring it back,
and this time it would be considerably worse. However,
before the Delta’s intervention in India, the government
introduced a mass vaccination campaign for Covid-19
prevention in India began on 16 January 2021. Oxford-
Covishield Astra Zeneca and Bharat Biotech Covaxin were
the two vaccines employed in this study. This drive has
already surpassed 6,00,000 people in its first four days,
and the government declared and implemented to increase
the batches of vaccine release for the public in the
following days to secure citizens’ immunity. However,
there is still a segment of the population that is suspicious
of the Covid-19 vaccine, where in the study on India’s
sentiment on vaccination, the researchers called Dubey and
Dutt (2021) opined that “Emotions like trust and
anticipation were more in the case of Covishield than in
Covaxin. On the other hand, Covaxin exhibited more
anger and disgust than Covishield. These results can be
attributed to the doubts raised on the approval of Covaxin,
as well as the politics involved regarding it” (Dubey &
Dutt, 2021, p.4). In another case, India’s administration
was eager to export its own people’s quota of vaccine to
the world, but that it neglected its own citizens, which had
a significant impact on the people’s vaccine-taking ratio
because of the lack of vaccines and fuelled high death rates
in the second wave time, which caused the nation to
crumble (Bajekal, 2021). Delta variations first appeared in
the United States at that time. While the majority of delta
infections have been in those who have not received a
vaccine, evidence has shown that the variation has
increased transmissibility even among those who have
been vaccinated but is not efficient in attacking the
immunity. Delta affects the body. There have been reports
of symptoms that are not the same as those linked to the
original coronavirus strain, such as cough and loss of
smell. According to polls in the United Kingdom,
headaches, sore throat, runny nose, and fever are all
prevalent. Due to this abrupt invasion of virus strains
termed Delta and Delta Plus, which actually generated
confusion, panic, and trauma in many Indians, the country
was shaken with rapid increases in mortality, infection,
and a lack of medical amenities, such as hospital beds and
oxygen cylinders. In particular, medical oxygen has been
in short supply in India as the nation continues to grapple
with a catastrophic, second wave of the virus outbreak in
2021. The collapse of India’s medical system during the
second wave of this delta variant, which is shaping up to
be the world’s deadliest Covid-19 epidemic, has thrown the
country into chaos, forcing citizens to protect themselves
and one another as government services are delayed.
Desperate Indians have turned to social media for the aid
of medicines and other important essentials when the
healthcare system collapsed amid the recent Covid-19
crisis. While adults struggle to come to terms with medical
constraints, India’s connected adolescents are stepping
forward to aid and learn in perseverance, innovation, and

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the Internet's constructive rise. In Addition, bureaucratic delays prevent essential resources from reaching those in need. Many people who had been infected with this new coronavirus type tragically died as they waited. Hospitals in India have battled to admitting breathless patients, and even keep those who were fortunate enough to obtain a bed alive, with despairing calls for oxygen cylinders flooding social media feeds on Twitter, Facebook, Instagram, and WhatsApp groups in April and May 2021. In the next year, a new variation was announced in 2022 as the Omicron variant of Covid-19, which was first identified in South Africa, is now in the community transmission stage in India, where it become dominant in multiple Urban areas where reported cases have already been rising exponentially, and where, until March 2022, several areas in India went on full pledged lockdown for a short period of time, and some other places or states like Andhra Pradesh have implemented night time lockdowns. Consequently, although Omicron is not as dangerous as earlier variations, it still has a high capacity for rapid transmission or infection from one person to another. To date, most Omicron cases have already been asymptomatic or moderate. Because Omicron infection was first detected in vaccinated travellers, this does not guarantee that the infection will be minimal in high-risk unvaccinated individuals. As the situation evolves swiftly with community spread, the threat level remains high, necessitating ongoing vigilance. States such as Tamil Nadu, Karnataka, and Kerala in India have attempted to project state-level lockdowns to siezors of districts and restriction of inter-state borders in January 2022 as a precautionary step; later, when the number of cases decreased, they gradually retracted it. According to the US Centers for Disease Control and Prevention, cough, weariness, congestion, runny nose, and generalised body soreness are the five most prevalent symptoms of the Omicron variety.

However, beyond health, people in India are concerned about financial problems such as EMI's, monthly deposits, and many other commitments which literally damaged them mentally (The Week, 2020). Some people are afraid of this disease because of asymptomatic attacks by new variants. The most important factor is an increase in aggression and bullying among people in communities in these families, and suppression, in which men believe they lack respect and recognition in their families when they unexpectedly lose their jobs due to this outbreak. Women are thinking that the pressure of work at home is increasing on them, and that it cuts off their minimal freedom. Overall, however, it is a valid fact to state that regardless of gender, people are ultimately suffering, but women are ahead in struggling and suppressed by the communities in both urban and rural parts of India, which drastically increased from this outbreak period.

III. DOMESTIC VIOLENCE, DEPRESSION, AND SURGE OF ANGER DURING THE COVID-19 PANDEMIC PERIOD IN INDIA: LOCKDOWN AND POST LOCKDOWN

Owing to limited data on psychological effects and underlying mental health problems in the general population, mental health practitioners face new obstacles in this pandemic outbreak situation. However, other researchers seek to determine the emotional effects of this pandemic shutdown, yet where these steps and outcomes also end with the same cumulative outcomes, not focusing on individual emotions and components and reasons behind it. There is also something else because of the frequent lockdowns and unlocks as well as practical situations at post-lockdowns, this new norm of uncertainty affecting each person across the globe. Moreover, the researcher will explain the details and mention the incidents that linked with domestic violence, Depression, and Surge of Anger and relatives to prove their existence in the times of lockdown in India and post-lockdown in the stream of Covid pandemic conditions in the coming paragraphs.

Domestic violence is a series of different types of violence, including physical, emotional, mental, abusive relationships, and economic abuse. Currently, both physical and emotional abuses are committed against other family members. Recent data released by the National Legal Services Authority of India suggest that the nationwide lockdown has led to a rapid increase in cases of domestic violence in India (Times of India, 2020). Women in all these lockdown times are more affected by domestic violence, and studies have found that Indian men feel that they lose their jobs and income and are also slowly losing their family's emotional and moral support, causing them to feel vulnerable in this critical time. However, compared to prior years, domestic abuse instances increased dramatically during the pandemic period. Furthermore, in the early phases of the pandemic, the number of cases was higher; however, as time passed, the number of cases decreased. This viral outbreak had a far greater and more devastating impact on women than any other outbreak in history. Home quarantine has resulted in heightened misery for women and has been implemented as a method to protect the general public's health and well-being. In this case, the “Newspapers reporting the incidents of domestic violence during the last 5 years were analysed to explore the issues related to the surge in domestic violence incidents during the COVID-19 lockdown period” (Maji et
The significant increase in domestic violence cases published in India’s leading news outlets is a significant proof that the living setting remains hazardous for the majority of homely women, especially those will come under the financially below middle or low class families. While the threat of an outbreak has subsided and the lockdown has been relieved, women’s scars from the assault will not heal, and children have also been mistreated despite their innocence. Although the current study found evidence of an upsurge in violence in India, there has been a worldwide increase in instances of domestic abuse. However, in point of why majority are women was victimised by the domestic violence actions “The symbolic value that perpetrators associated with women, lower inertia, visibility, and accessibility to the perpetrators made women suitable targets of domestic violence. Finally, a shortage of police force and travel restrictions on formal and informal sources resulted in the absence of capable guardians. We conclude that changes in the routine activities of people during the COVID-19 lockdown provided more opportunities to the perpetrators of domestic violence” (Krishnakumar & Verma, 2021, p.1).

According to the Psychiatry.Org “Depression is a common and serious medical illness that negatively affects how you feel, the way you think, and how you act” (The American Psychiatry Association, 2020). However, the fear of unexpected changes in the world leaves people depressed and nervous. Popular signs of depression include anxiety, sleep loss, loss of interest, repetitive behavioural patterns, tiredness, suicidal thoughts, and feelings of worthlessness. According to Kazmi et al. (2020) research output “Depression was found to be high among respondents between 15 and 35 years of age, anxiety was found to be prevalent among those between 21 to 25 years of age, and stress was found to be high in individuals between 21 and 25 years of age in the lockdown time” (Kazmi et al., 2020, p. 1). In addition, in a survey conducted by The New Indian Express news agency, 61% of Indians suffered from various mental disorders when the country locked down, and there are numerous factors such as family conflicts, additional working pressure in the name of work from home, high exposure to techno-gadgets, and the workload that makes them in homes breathless (IANS, 2020). Plans are thwarted by uncertainty, where this panic spreads quickly, even if the degree of the threat is unknown, as with omicron variation. Vaccination appears to be a form of deliverance until they are not, and national reactions diverge illogically. Anxiety and sadness also increase. Loneliness and screen fatigue also play a role. The impression is growing that, like the epidemics of ancient times, this virus outbreak period will last for years. Since the year of outbreak started 2020 to the present year 2022, Indians resilience has decreased after two years of zigzagging policies and roller-coaster emotions, horrible loss and tantalising false dawns, shutting borders and occasionally shuttered schools, colleges, universities and workplaces. Two years after the deadly virus interrupted people’s lives, with cases of the delta-modified version rising sharply together with omicron anxiety, it managed to capture a mood of exhaustion and simmering anger around the world, which, along with the virus, slowly spread across the country’s people. According to Garcia et al. (2022), India has the highest suicide rate worldwide. In the 15–39 age bracket, Indian men account for a quarter of all global suicides, while Indian women account for 36% of all global suicides, and every 25 minutes, one person commits suicide. These were not one-off occurrences. According to mental health professionals, domestic violence is one of the main causes of this predicament. Official statistics from India are grossly understated and do not reflect the full scope of the situation (Garcia et al., 2022). Even though the Indian government has implemented several unlock and free up regulations that copy the previous Unlock versions with few exceptions, such as leaving schools to state governments for re-opening and allowing people to open saloons and movie halls, respectively, after 15 October 2020 and it continues to this day.

However, in recent times, the word ‘anger has become a repetitive usage term in basic conversations, and in almost all popular broadcasting and telephone calls, incidents involving’ anger have been widely heard. The increase in rage is an intense psychological rush or rapid growth of frustration that leads to aggression. There were also rising anger problems at the lockdown, and frustration caused them to suffer because of financial uncertainty, sudden growth blockade, unfinished projects, and job loss. Even after the lockdown, the extreme losses and fear of the virus are in people not good, where these negative elements also influence post-lockdown times. In other words, different negative feelings and situations influence and deter people from the normality of the emotional basis. Researchers called Vaishali & Rukmini (2021) was stated that hashtag trends have increased in different social media platforms since this outbreak, as well as the introduction of new terminology into daily life in India and throughout the world, for example “#Corvidiot - COVID+Idiot which used for describing people that do not understand the seriousness of the pandemic or do not follow the public health guidelines” (p. 17), “#Infodemic — Manipulation of information and inauthenticity during the pandemic” (p. 17) “#Coronation - The break from regular #oldnormal school and workstyle that is treated as a vacation from
regular lifestyle” (Vaishali & Rakmini, 2021, p. 17). These waves of the new terms of rising trends in social media were used to express an individual or a group of individuals known as a social community to express their anger, depression, frustration, or concern in social media, particularly for young people to share their opinions through trendsetting hashtags, and the above examples for perfect fawning trends to show people angry and frustrated on the Indian side. In another case, according to Sinha (2022) of India Today News, 61 percent of Indians are angry and depressed as Covid-19 wreaks havoc, healthcare crumbles, and Indians are Angry, Upset, Depressed and Worried as Covid-19 wreaks havoc as healthcare crumbles, the majority of Indians feel anxious, depressed, and outraged about the country’s current condition of affairs, as Covid-19 spreads like a forest fire across the country. India is experiencing a historic medical crisis, with its healthcare system smelling of weariness and a lack of oxygen and emergency medicine (Sinha, 2022) which is expressed at the time of the second wave and after this disastrous virus catastrophe in India. Sudhi Ranjan Sen et al. (2021) analysed and stated in their report that after destroying India’s largest cities, the newest Covid-19 wave is now devouring rural areas across the world’s second-most populated country. Moreover, most localities have no method for dealing with illness. According to a study conducted in the Indian state of Uttar Pradesh, the second wave of this disease had a devastating impact on the state of living people, and the sudden annihilation of families in rural areas as a result of the deaths caused by the second wave of this viral disease caused rage and frustration with the central and local governments (Sudhi Ranjan Sen et al., 2021).

As the rest of the world has watched in disbelief, India has become the darkest news story on the planet in the last two years. Pictures of blazing incinerators, gasping patients, and tearful doctors, which appeared on the front pages of all major international magazines and primetime worldwide television news, belied India’s status as a rapidly evolving and prepared country. It is not just how prepared they were, but also how insufficient the resources were to deal with the Covid-19 disaster in the world’s second most populated country. Among all the pleas for help on social networking sites and in the press, the human face of individuals who stand out and become saviours surfaced. Whether it is a private citizen who spends all of his funds to buy and distribute oxygen to the poor or a philanthropist, businessman, or the celebrities who spend millions on a daily basis to support all attempts to provide medicines to hospitals. There is no greater opportunity to witness the strength of the human spirit in the face of adversity than during crisis. It is a terrific moment to build a reputation that money cannot buy in this critical time, where it is also a period when people’s hard-won reputations are shattered and they have to suffer the brunt of people’s rage, anguish, and, in some extreme situations, schadenfreude which is like drawing amusing from the suffering of fellow beings.

It is also important to mention that the suffering and sufferers are not only from the common public but also many heads of “Covid Warriors’ means, doctors, medical staff especially faced and mentally destroyed due to this continuous pressure from all the sides, either it is from the India public, governmental, as well as the uncertain acts or attacks by this virus. Here, the researchers called Sakthivel et al. (2020), who mentioned and referred to in their short communication that acts of hatred, discrimination, and abusive violence against doctors have increased since the emergence of the Covid-19 outbreak in India, in which they referred from the house owners who asked to vacate the rooms to violent, bloody attacks against doctors and supporting staff in Indian hospitals. Due to this extreme pressure, violence, abuse against them, “These events put the medical community in a state of fear and regret for choosing a career when the society does not support them. A majority of doctors are now unwilling to motivate their children to pursue this profession, once revered by the society not too long ago” (p. e74). In addition, this research letter was advised to the common public that “people should realise that hospitals are centres of healing and recuperation, and that doctors are integral to the health and well-being of the society” (Sakthivel et al., 2020, p. e74).

Nevertheless, the suffering category of common people may include children, the elderly, pregnant women, individuals with pre-existing mental illnesses, those living alone, and families of those who perished during the Covid-19 pandemic. Another critical consideration is the emotional impact of the outbreak on first-responder teams. They are particularly vulnerable because of the lengthy hours they spend in potentially risky conditions. The massive social and economic devastation of the pandemic has had an unprecedented mental impact in modern times. Boredom and moodiness may be followed by rage, impatience and frustration. Another form of depressive symptomatology involves the use of mind-altering materials. Uncertainty and a sense of loss of control are unquestionably pathogenic agents for anxiety, panic, and sadness, where signs of intense anger, where people may have begun to blame others for their current predicament, and seeking revenge on them, which is the extent of aggressiveness exhibiting strong mood swings, experiencing unexpected sadness, anger, frustration, and emotional imbalances beyond their control, and crying.
frequently these days. Noticeable changes in eating and sleeping habits, such as excessive or minimal eating or sleeping, have become more common in the populace since the lockdown period, which continues to the contemporary 2022 Omicron era in India.

IV. SIGNIFICANCE OF THE STUDY

The aim of this study is to explain the knowledge and understanding of the origin of Covid-19 and its growing impact on the world, mainly in India, as well as how it affected the different sectors of India and how this virus outbreak caused silent chaos and various physical and emotional damages to the common Indian public, those who love social life the most rather than to be isolated, as well as their mood and emotional breakdowns even after lockdown liftings or post-lockdown periods. In this process, this study collected and evaluated data on the impact of the covid-19 pandemic outbreak, its lockdown, post-lockdown situations, as well as the conditions after the emergence of new variants of Covid such as Delta, Delta Plus, Alpha, Omicron, and their impacts at different angles, as well as theoretical explanations and observational surveys, which focus primarily on recording common Indian perceptions, views, opinions, and choices on elements such as domestic violence, depression, anger, and frustration during the Corona pandemic outbreak respectively.

V. RESEARCH DESIGN

Qualitative methods were used to process and evaluate knowledge and answers gathered from participants. A total of 114 people were registered in this study; however, the respondents were random in the response stream. This implies that the number of samples was based on the answers provided by the number of respondents. Due to the outbreak, the research survey questionnaire forms were circulated to participants with the help of numerous social communication networks, such as Whats App, Facebook, Telegram, Hike, and Gmail. Respondents were also the population of India and those residing in different parts of India. As a result, a variety of questions were circulated through the questionnaire to understand the essential specifics of the respondents and the points of view of the focal subjects of the study. The following objectives were discussed in this study:

- To investigate the different opinions and responses with the help of a survey on domestic violence, depression, and surge of anger during the Covid-19 outbreak in India.
- This analysis covers the data that belong to circumstances during the lockdown, unlock, and post-lockdown periods in India.

- Defining the origins of the Covid-19 disease and its timetable development worldwide and in India with the aid of several specific sources rendered by international specialised experts.
- Evaluating the primary research data would be most useful for understanding the actual situation of the common people in India.

VI. DATA COLLECTION PROCESS

The collection of data is an important way to collect the necessary data or information and to assess the data and answers collected in accordance with the questionnaire. When the data study steps are maintained, the findings are compelled to all dimensions, such as reliability, accuracy, and interpretation. The researcher selected the common Indian public to be included in the questionnaire for the data collection process, notably, students, businesspeople, homemakers, employees, and job-searching people. The researcher provided 20 days to complete the survey form to the requested entities. The question form was split into multiple-choice questions, check boxes, and fill in the blanks. However, the main purpose of the research process for gathering data is to collect opinions, responses, assessments of domestic violence, depression, and anger among people due to the Covid-19 outbreak times in India and its related components. The age range of the respondents is between 16-47 years respectively.

Chart 2 displays the gender ratio of the participants for this study; 114 people reported their gender, 65 (57%) participants were male, and 49 (43%) participants opted female as their gender. Therefore, the number of respondents reported according to the data shows that males are slightly higher than females as this survey participants.
Above Chart estimates the percentage of people surveyed in urban and rural areas in India. According to the chart, 114 members were reported in their respective areas. In this manner, 77 (67.5%) respondents said that they were living in urban areas, and 37 (32.5%) respondents reported that they belonged to rural areas in different parts of India.

VII. ANALYSIS AND INTERPRETATION

This research questionnaire was developed in ascending order of complexity (simple to complex order). In other words, at the beginning of the questionnaire, the questions focused on the simple and basic details of the respondents, such as their name, age, gender, place of residence, area, education, and occupation status. After that, the questionnaire focuses on the basic specifics of the core context, which collects the views, responses and concerns of the respondents, after that only questionnaire focuses to gather information, opinions on the key research topic called “Domestic abuse, Depression and Surge of Anger during the Covid-19 Pandemic time period in India” and its absolute elements for the purpose of interpretations in different dimensions.

It is also important to remember that the participants were 114 members, but those who answered according to their choices and familiar questions, so the researchers compelled and reorganised the data for the results and for the proper completion of the analysis in accordance with the flow of responses. The researcher concentrates on the many minor and important factors which ultimately link the line with the idea of demonstrating the existence and influence of the theory of the ideology of study. In addition, there were questions based on people’s trust in the Indian government's efforts to neutralize the Covid-19 problem, which was helpful in understanding how this research study primarily dealt with the Covid-19 issue. In fact, the researcher also raised some of the questions and points with proper logic and reasons, along with references about recent lockdowns and unlocking in India.

Above chart is reflecting the various designations of the participants of this research, among 114 respondents 39 (34.2%) people are students, 26(22.8%) members say that they are employees, 18 (15.8%) members are homemakers, 15 (13.2%) people are unemployed/ job searching, 10 (8.8%) persons reported that they are doing business and finally 6 (5.3%) (Yellow) respondents are research scholars.

The above chart 5 picture is showing the results on, are the people afraid of the Coronavirus outbreak in India, where in 113 respondents 71.7% (81) respondents said “they are afraid of Corona Outbreak” where 28.3% (32) respondents are “not at all afraid of corona” spread in India. Additionally, for the question about people’s perception of various versions of lockdowns and unlocks in India, in response among 114 respondents, the majority of the members 43 (37.7%) said they had a neutral feeling towards these procedures; second, 37 (32.5%) respondents said they were optimistic towards lockdown and unlocks, and 34 (29.8%) participants said that they were pessimistic towards these sudden procedures, which was negatively impacted. For another question on people’s opinion on the Covid-19 lockdown which was implemented by the Indian Government in 2020, among 114 respondents, 94 (82.5%) opined that this lockdown was about” to protect the people from contagious diseases, and the remaining 20 (17.5%)
respondents stated that this lockdown was good for nothing”.

In this continuation, on the topic of social distancing and self-quarantine, among 114 participants, 78.9% (90) respondents would prefer to maintain social distancing or self-quarantine from the huge crowd due to the seriousness of the outbreak, and 21.1% (24) participants said they did not like these isolation procedures regardless of locks and unlocks in the nation. At the same time, for another response on the statement of sharing their worries about the Covid-19 viral outbreak and its new variants with their fellow people, 78.1% (89) respondents opined that “it would be nice to talk to someone about our worries about the COVID-19 viral pandemic” but the remaining 21.9% (25) people says they don’t have any interest to share their worries to others.

The chart above presents the results of people’s financial difficulties during the pandemic in India. Among the 112 participants, 98 (87.5) agreed that they were struggling with financial difficulties and burdens during the pandemic. However, the remaining 24 (23.5%) respondents said that they had not encountered any financial difficulties during the pandemic period. In any case, the majority of participants were affected by financial problems based on the above occupied portion in the chart picture. It is a well-known that due to this virus outbreak, lockdown, low growth rates even after unlocks until now restricted India’s economy as it was recorded a negative growth and at the ground level common people struggled with more financial burdens, however, Kumar et al. (2020) in their paper entitled “Social economic impact of Covid-19 outbreak in India”(p. 1) is recommended to use IoT and technological things to alternate and recover the down falling economy of India and there is a strong requirement to reorganise and stabilise the medical, business, economy during this recession (Kumar et al., 2020).

Chart 6 conveys the different experiences of the various people on the occurrence of domestic violence in India, especially during the period of the Covid-19 pandemic with reference to various news channel reports in the survey. Of the 113 respondents, 59 (49.6%) people who were the majority in this context said that “they heard about the incidents of domestic violence between the other family members these days”. Second, 34 (30.1%) respondents stated that “these statements are bogus and overwhelming” which means these respondents believe that there is not much of the appearance of domestic violence triggered incidents. The remaining 23 (20.4%) respondents reported that they were victims of domestic violence, which means that they were physically and mentally affected by violence by fellow people in homes during this pandemic outbreak.

Chart 8 represents the results on the topic of encountering the symptoms of depression especially in the Corona outbreak time, which covers lockdown and unlock times of these two recent years (2020–2022). Thus, 114 respondents responded to this topic, and 54 (47.4%) reported that they were slightly affected by symptoms of depression. Next, 31 (27.2%) respondents stated that they were directly affected by depression. However, 29 respondents (25.4 %) said they did not have any symptoms of depression. The results clearly show that the majority of people were directly and indirectly affected by depression during this viral pandemic in India. Familiarly, for another question, among 113 responses, 76.1% (86) opted that they encountered sudden emotional imbalances and mood swings during this lockdown time, while 23.9% (27) claimed that they had not encountered any kind of emotional imbalance or extreme mood swings during this pandemic lockdown period.
The above chart explores responses to the question of whether people have detected any surge of anger or frustration in recent days. Of these, 114 members responded to this question, where 71.9% (82) members who the majority were agreed that they have detected a sudden rise in anger and frustration in recent days. However, 28.1% (32) members said they had not found any anger or frustration in themselves, particularly these days.

Chart 10 describes a cluster of information and views related to the reasons behind the sudden growth in anger and frustration during the Covid-19 pandemic time in individuals. 96 respondents vote their reasons behind their anger and frustration in this survey, according to the majority of votes the reasons are enlisted in order: Financial Burdens (56.3%), Sudden break in career growth (42.7%), Unable to handle the emotional abuse (41.7%), The respondents even don’t know why he/she frustrating like this in recent times (38.5%), The family members are not supporting (36.5%) and Due to the continuous social isolation (35.4%) since the beginning of this prolonging outbreak scenario.

Furthermore, for the above chart about detecting the signs of anxiety, out of 114 respondents, 78 (68.4%) said they found and encountered symptoms of anxiety in themselves in recent times. Where 36 (31.6%) participants opined that they did not encounter any signs of anxiety. However, a majority of survey members have encountered symptoms of anxiety. In addition to the above predictions, the unexpected pandemic has generated severe panic among people worldwide” (Balachandar et al., 2020, p. 3422) which includes India.
For the above chart, selecting the tools or options for diverting an individual from negativity, especially during this coronavirus outbreak time, 111 people have enrolled their votes for the options which are located in the above graph. In this connection, according to the majority of votes, diverting options will be arranged in the weight of votes order: TV/Social Media/ Streaming Apps/ Videos Games (49.5%), Chatting with friends (46.8%), Listening to music (42.3%), Yoga/Meditation & Physical exercises (38.7%), Prayers (36%), Playing with kids and pet animals (35.1%), trying to learn new food items (27%), and I do not have many options (21.6%). Similarly, in the topic of social media, the labels “Old Normal” and “New Normal” have become widespread in defining pre- and post-COVID lifestyles. Several studies began to utilise the term “New Normal” to explore the Covid lockdown and post lockdown and changes in people’s lifestyles. This virus’s continuous outbreak and subsequent lockdowns and unlocks have resulted in ever-increasingly busy social media lifestyles. This might be due to a lack of physical connection, and the Internet serving as the sole medium of communication, information, and amusement in India and worldwide (Vaishali & Rukmini, 2021). In addition to this, the point of diverting self from negativity through the literature (fiction), many researchers such as Priyanka (2021) predicted that while depicting epidemic stories through the stream of with a certain ease and sensitivity, pandemic fiction takes readers beyond figures of fatalities, damage, and degrees of spread to depict the effect on the livelihood of the various infected and dying families, friends, and neighbours. These books for all ages have investigated devastating infectious illnesses, allowing readers to share the anguish of millions of people who have been affected by pandemics that have destroyed communities and left generations scarred and afraid (Priyanka, 2021). In addition, she also mentioned about the role of fiction or literature in the time of outbreak that “Literature is a powerful medium that offers ways to cope with the emotional trauma caused by pandemics and allows individuals, communities and nations to express, engage and empathise with the massive loss of lives and livelihoods” (Priyanka, 2021, p. 310).

Chart 13 is a collection of opinions about people’s perception of the recent unlocking process done by the Government of India and its new normal regulations, even in this uprising stage in the coronavirus count. In this context, among 114 respondents, the majority of responses were in favour of government action, 71 (62.3%) supported the government’s unlocking process, and 27(23.7%) took a neutral stance on these decisions and actions. However, the last 16 (14%) people did not support the unlock process, which may be due to the high-risk levels of rising Covid-19 cases. To support the above pie chart 13, “There has been a rapid response by the Government of India and other Authorities or government administration officials to the pandemic of COVID-19” (Khan et al., 2020, p. S90) to control this. Also, for another question with the similar content, among 111 respondents 60.4% (67) respondents are believing that government can resolve and control this Corona outbreak, 31.5% (34) participants said “may be” Indian government can control this issue, but remaining 8.1% (9) respondents are not trusting on Indian government efforts to resolve the Covid-19 issue till now.

During this time, the urgency of the outbreak in India dramatically changed the emotional dynamics of children and youth to a downfall of stigma, depression, anxiety, and stress, leading them to engage in self-harming activities such as suicide. So, it is evident to mention that “The COVID-19 lockdown severely restricted the way an individual lives, and these sudden and unexpected stressors made psychological distress related consequences inevitable” (Bhattaram et al., 2022, p. 266). In this regard, the aspect of analysing and understanding broken people by the upsurge of emotions called depression, anger, and having a tendency to self-harm or be violent towards other
people, in the point treatment or counselling them to bring those broken people into the new normal, the function of social institutions in India that offer social support and establish mental resilience throughout the outbreak is equally critical. Such social institutions may also take these findings (new research outcomes, reports, news) into consideration while offering their services to commoners in India (Pandey et al., 2022) which will be helpful in understanding the situation from closer and favoured towards victimised people by this dangerous outbreak of the coronavirus.

Governments and institutions across India and the world must begin their ethical reactions to the Covid-19 pandemic by addressing people’s physical and psychological needs. Subsequently, the issue of reputation mitigation must be addressed. This clearly shows how the public and press behave on the majority of platforms. Government, authorities, and other state actors in India must be informed that such a public response is expected and cannot be avoided. Rather than trying to eliminate it, they must use all available tools of constructive dialogue and involvement rather than denial. The importance of communication in healing and mitigating reputational damage cannot be overstated, and to salvage fragile situations and deal with people’s anger and sadness, administrators in India must initiate discourses in which some guilt is assigned in order to minimise damage. They might emphasise the heinous nature of the diseases, as well as the extremely infectious mutations, and send signals to the public that they are preparing to deter this outbreak. The answer embodies the perceived acknowledgement of responsibility for a catastrophe, and the negative effects of the Covid-19 issue necessitate an efficient crisis response approach to alleviate sentiments of rage and helplessness. It may not be necessary to change the media’s perspective on the issue, but people are willing to listen and be heard in this unparalleled disaster in recent memory.

VIII. LIMITATIONS AND FURTHER SCOPE

- The study is limited to those who have access to smartphones, social platforms, E-mails and knowledge of English.
- This study-based survey represents the educated and sub-educated population of the country in terms of accessibility to technology, so it should not be completely applied to the entire population. Because the perceptions from educated and uneducated may differs based on the situations.
- There is a scope of research while tracing the people’s expressions and opinions exclusively about the Omicron and Alpha variants and theirs psychological and different other impacts on Indian society.
- There is also a strong requirement of scope to tracing or compiling the opinions exclusively on uneducated people from the different parts of India, and their knowledge on this outbreak as well as the study must be conducted for the suggestions to convey to take precaution for them on to prevent from this virus attack or infections.

IX. CONCLUSION

Finally, the key observations in this paper are that the majority of the people are aware of the infectious disease and of the regulations that should be followed to avoid invisible illness. Moreover, the participants could sense mainly negative emotional effects, such as depression, disappointment, anger, sorrow, and anxiety. In addition, the majority of respondents also saw many events in the community related to domestic violence, some of which were specifically affected by domestic violence, including physical violence, emotional abuse, and cursing, specifically by bad words. Moreover, miserable people still tend to be retained from social gatherings and are unable to socialise with the populous areas of people and cluster areas, even in these post-lockdown and Omicron conditions. Where the influence and impact of this corona outbreak were directly and indirectly affected, where many people died, were affected and traumatised, and fearful due to this sudden surge of this virus against humans in India, where the scenario after the second wave became worse here. In terms of anger and frustration, based on the analysis, there are many factors that affect people into these negative outbursts in Indians, especially the financial struggle and struck at career growth, even risking to lose the paying jobs or work in the need of time; in another way, the continuation of Covid restrictions (such as lockdowns, night curfews, travel restrictions) makes the people definitely sick and mentally depressed, which again does not allow them to join even in the crowds habitually. So, at the juncture of domestic violence in India, people are aware of these unfortunate happenings where they confirmed the above survey, and some of them claimed that they too are victims of domestic violence. The twisty thing here is regardless of Indian administration delaying in according to the response to protect or facilitate the medical and other amenities to the people, which raised more anger and agony towards the governments; however, most of the respondents had confidence in the actions of the Indian Government and
believed that the government could handle the Covid-19 outbreak properly.

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