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Health Belief Model and Its Impact on Mental Health Awareness during the Covid-19 Pandemic in Indian

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Abstract

Covid-19 has caused immense psychological suffering globally, including in India. The unprecedented spread of the virus and resulting lockdowns had immediate and widespread consequences such as fear, anxiety, violence, loss of livelihood, travel restrictions, and stigma. Though economic, social, and physical hardships are widely discussed, the pandemic also severely affected mental health. This study investigates the impact of Covid-19 on mental health and the role of the Health Belief Model (HBM) in reducing stigma and improving awareness. Data sourced from research articles and government reports indicates that HBM is crucial in promoting awareness of mental health issues during lockdown, thus facilitating informed prevention and control behaviour. Theoretical insights from the study may also assist in preparation for future pandemics. The Covid-19 virus has quickly spread worldwide since it emerged, causing fear as people struggle to control its impact. India is seriously affected and locked down. Levels of loneliness, hopelessness, sadness, and anxiety rose. Limited research exists on the burden of mental problems. It is important to understand the psychological impact of Covid-19 and identify factors causing psychological distress. Coping with this crisis is extremely challenging because of a lack of knowledge about the disease, the failure of governments to deliver adequate care, and the absence of social interaction, all of which add to distress. Previous studies indicate that psychological problems such as panic disorder, depression, anxiety, stress, and insomnia increase during large-scale epidemics and pandemics. Factors contributing to these problems include unpredictability, uncertainty, seriousness of risk, misinformation on social media, social isolation, and financial losses. Epidemics in India, including the plague in 1994, swine flu in 2009, bird flu in 2012, zika in 2016, and dengue for several years, have also caused widespread fear, anxiety, panic, misconceptions, and stigma, without adequately managing the mental health crisis. The Health Belief Model (HBM) provides a conceptual framework to understand and predict how individuals react to a variety of health promotion strategies and the factors motivating people to adopt protective behavioural changes.

Keywords- coronavirus, Mental health, immunity, Health Belief Model, Covid-19, pandemic

Introduction



As one country, India faces a severe mental health burden during the Covid-19 pandemic (Mathew et al., 2021). Yet, there has been comparatively little research on awareness in the Indian context, which is an important starting point to mitigate psychological distress and prevent people from slipping into clinical depression, anxiety, and trauma. This study aims to help address the gap by investigating the impact of the Health Belief Model (HBM) on mental health awareness in India during the pandemic. The Covid-19 viral outbreak is significantly affecting the psychological wellbeing of all the world's major populations, including India (Kumar Singh et al., 2021). Prolonged lockdown contributes to increased levels of distress and anxiety, severity of which depends on a population's access to credible information and resistance to the dissemination of fake news. Covid-19 casualties lead to shocked and anxious general populations, and some sections of society experience stigma associated with testing positive, causing mental health issues such as anxiety, stress, depression, and trauma not only in patients but also in the general population. India's overburdened healthcare system—characterized by a low doctor-patient ratio and an inadequate number of clinics or test centres—further exacerbates stress and trauma for individuals. In India, the Government and non-governmental organisations (NGO) are actively working to raise mental-health awareness during the pandemic (Tresita Paul V. & Uma Devi, 2021), utilising digital and information technology platforms to reach all sections of society.

Given the observed psychological toll, several research questions become pertinent. (a) Does an individual's exposure to HBM ant-pandemic information on digital and information technology platforms influence the perceived severity of Covid-19 when he or she maintains psychological wellbeing through self-care? (b) Can a Covid-19 virtual space developed from a healthcare self-diagnosis concept function effectively as a psychological and behavioural platform for a pandemic to raise and improve mental-health awareness through a social-media interactive forum?

Theoretical Framework of Health Belief Model (HBM)

The Health Belief Model (HBM) is a prominent framework used to explain and predict preventive health behaviors. It originated in the 1950s to address individuals' reluctance to engage in preventive activities such as screening tests or vaccinations (Kim et al., 2022). The model posits that people are more likely to take preventive action when they perceive themselves to be at high risk of contracting a disease, a concept known as perceived susceptibility. In addition to this foundational belief, HBM includes five key components that together influence health-related behaviors: perceived susceptibility, perceived severity, perceived benefits, perceived barriers, cues to action, and self-efficacy.

Perceived susceptibility refers to an individual's assessment of their likelihood of experiencing a health problem. For example, during a contagious disease outbreak, this might involve gauging the likelihood of becoming infected or the risk of mental health issues arising from prolonged isolation. Perceived severity relates to beliefs about the seriousness of the health condition and its potential consequences, such as understanding the long-term psychological effects of untreated depression. Perceived benefits denote the positive outcomes expected from undertaking a preventive measure, like the advantages of seeking counseling or adopting healthy coping strategies in times of crisis. Conversely, perceived barriers encompass the obstacles that hinder engagement in health behaviors, including stigma, inadequate resources, or cultural attitudes that may discourage seeking help. Cues to action are external or internal prompts that motivate individuals to act, such as media campaigns, community messages, or encouragement from family and friends. Finally, self-efficacy captures the confidence in one's ability to perform the necessary actions to prevent illness or promote health effectively. Together, these components provide a comprehensive structure for understanding the decision-making processes that underlie preventive health behaviors.



Application of HBM in the Indian Covid-19 Context

The Covid-19 pandemic has exerted enduring psychological and social effects in India, with the Health Belief Model (HBM) outlining factors that influence mental health awareness and associated behaviors. The role of lockdowns and isolation is significant in shaping perceptions. Early in the pandemic, the Government of India's imposition of nationwide lockdowns to curb transmission enhanced the public's perceived susceptibility to Covid-19 and perceived severity of its impact. For some individuals, awareness of the potentially severe consequences motivated engagement in protective behaviors. However, the perception of observing the situation without significant personal impact, along with low risk perception and associated psychomotor agitation, contributed to the maintenance of repeated COVID-19 infections within households (Ghazi Shahnawaz et al., 2022). Equally important, the desire for social sanctioning and support following infection contributed to reluctance to acknowledge discarding of protective measures once restrictions eased. This dynamic parallels the psychological and social repercussions associated with quarantine measures itself (Rastogi et al., 2022). Exposure to misinformation and myths, which were widely circulated through social media and other channels, increased the perceived barriers associated with adopting appropriate protective measures. Barriers to healthcare access were encountered across India's diverse landscape, with challenges related to availability and affordability of services prevalent not only in remote rural areas but also among urban populations that migrated to villages during the lockdown period.

Impact on Mental Health Awareness

The rapid spread and stringent safety advisories during the Covid-19 pandemic exposed the Indian population to myriad stressors, fueling an epidemic of psychological problems. Adopting a theoretical stance, the Health Belief Model (HBM) was deployed to capture the cultural, social and individual factors influencing mental health propensity, serving as a tool for disaster preparedness. The HBM components—perceived susceptibility, severity, benefits, barriers, and cues to action— influenced perceptions of Covid-19 mental health outcomes, with governmental, social and digital platforms providing incentives, reinforcements and medical assistance. Based on these results, it is imperative to assess the impact of the HBM on mental health awareness.

In a country where mental health is stigmatised, and where misinformation hinders access to nearly 200 million struggling Indians, awareness focused on such guidance proves pivotal in motivating help-seeking, relief, and prevention (Nahar Koly et al., 2022). Numerous government measures—such as helpline services, tele-counseling schemes, and widespread mass communication—have disseminated knowledge and provided telephone assistance. Community-based programs initiated by NGOs have also instilled awareness that the pandemic always constitutes a psychological hazard requiring real attention. Furthermore, external cues to action to enhance mental health through the Covid-19 Sustainable Development Goals campaign have been delivered digitally and via mobile. Several success stories demonstrate that activist and social media platforms are suitable channels for augmenting and sustaining awareness, which is central to alleviating the public health consequences of Covid-19 (Latha et al., 2020). The HBM has thus provided an important theoretical perspective for developing adequate awareness.

Comparative Insights

In India, the Covid-19 crisis has greatly intensified pre-existing psychological problems and triggered widespread emotional responses such as anxiety, anger, confusion, despair, and stress, making the situation extremely critical. Understanding the social and personal psychological implications of the pandemic remains an open question. India is one of the most COVID-affected countries in the world, registering a high number of cases and deaths; however, few studies have



assessed how the nation has coped with the pandemic period amidst ongoing battles against various psychiatric disorders. Officials and health authorities have attempted to disseminate information through available channels, but it is questionable whether the public obtained and retained the necessary information or how well specific risk perceptions were communicated. The Health Belief Model (HBM), a widely recognized framework for understanding health-related behaviors, offers a systematic framework to elucidate why individuals engage or fail to engage in health-promoting actions. Developed in the 1950s by social psychologists at the U.S. Public Health Service, the HBM consists of six constructs: perceived susceptibility, perceived severity, perceived benefits, perceived barriers, cues to action, and self-efficacy. The globally recognized model explains that people will take better health-related decisions if they believe they are susceptible to a condition, that the condition has potentially serious consequences, that taking a particular action would reduce their susceptibility or the severity of the condition, that the anticipated benefits of taking the action outweigh the barriers, and that they are capable of performing the action. Mental health is a globally significant concern due to an escalating prevalence of mental disorders, yet stigma hampers treatment access. During pandemic-induced isolation and social distancing, psychological and emotional repercussions are likely to adversely affect mental health, underscoring the importance of considering mental well-being alongside a physically healthy life. Previous research indicates that HBM-related factors influence mental health decisively. This article explores the current global mental health crisis within the HBM framework and analyzes its interplay with HBM components, particularly in the most affected populations in India. It examines whether awareness of mental health problems has increased, if the perceived threat is acknowledged publicly, whether the Indian community perceives benefits from awareness actions, what barriers hinder the acceptance of these initiatives, and what cues motivate the acceptance of mental health awareness.

Implications for Clinical Psychology

The HBM proves highly relevant for clinical psychology in managing mental health issues during and after the Covid-19 pandemic (Heath et al., 2015). This renewed emphasis on mental health provides opportunities to widen access to support, to encourage behaviours that prevent harm, and to increase awareness of early signs and symptoms. Informed by the HBM, health professionals can apply theory-driven principles when designing preventive and counseling interventions for common mental health problems. Governments and stakeholders should develop policies that promote long-term strategies on health awareness and communication, expanding the remit beyond Covid-19 to accompany future outbreaks or emergencies (Preema Dsouza et al., 2022). To manage the immediate impact and prepare better for future pandemics, interventions must be guided by theoretical frameworks with empirical support, facilitating the translation of insights into practice. Ongoing integration of theory and clinical work can also provide the foundation for future research on mental health issues that arise in emergency contexts.

Discussion

The examination of the Health Belief Model (HBM) in the context of health-related behaviour during a pandemic reveals distinct strengths and notable limitations. This critical evaluation considers the extent to which the constructs of HBM correspond with the dynamics of pandemic-induced behavioural changes and highlights areas where theoretical development is warranted.

HBM offers a robust framework for understanding individual motivation to engage in health-promoting behaviour, emphasising perceptions of susceptibility and severity as key determinants. In a pandemic setting, despite high uncertainty and rapidly evolving information, these perceptions remain influential in guiding protective actions. Governmental communications and media dissemination of morbidity and mortality statistics serve as powerful modu-



lators of threat appraisal, thereby activating motivation. The universal distribution of free vaccines further addresses the 'perceived barriers' construct, facilitating widespread acceptance and adoption (B. Limbu et al., 2022).

Nevertheless, the model exhibits constraints that limit its explanatory scope and practical applicability. Its focus is predominantly confined to instrumental behaviour-change strategies that target individual attitudes and beliefs, neglecting the complex interplay of social, political, and economic modifiers. The assumption that individuals can always translate motivation into behaviour is frequently violated in pandemic circumstances—constraints such as lockdowns, economic hardship, and depleted social support impede enactment. Furthermore, HBM's emphasis on cognitive evaluation fails to encompass affective phenomena, which often exert a stronger influence on decision-making; intense emotions associated with pandemic-related experiences, for instance, can override rational assessments. Additionally, the model operates within a simplistic input-output paradigm, lacking detailed specification of information processing mechanisms and feedback dynamics (Zhou et al., 2021).

Given these considerations, a more comprehensive approach appears necessary, integrating multiple theoretical perspectives to capture the multifaceted determinants of health behaviour during a pandemic. Such a multidimensional framework would enable a more thorough understanding and support the design of effective interventions that address the interplay of cognitive, affective, social, and structural factors.

The health belief model (HBM) is a widely used model that aids in investigating the factors influencing health behaviours and health service use. It explains individuals' belief concerning COVID-19, including perceived susceptibility, severity, barriers, and benefits, which can predict vaccine hesitancy. Perceived susceptibility indicates the likelihood of contracting the virus, while perceived severity involves the potential physical, mental, or social problems caused by infection. Perceived barriers highlight difficulties in getting vaccinated, and perceived benefits indicate positive outcomes from vaccination. HBM does not account for attitudes or intentions to perform health behaviours. The theory of planned behaviour (TPB) is also utilized to explore its influence on vaccine hesitancy, emphasizing intention and behaviour. TPB's core components include attitudes (perceptions of outcomes), subjective norms (perceived support from others), and perceived behavioural control (self-efficacy in performing the behaviour) (Romate et al., 2022).

Conclusion

The Covid-19 crisis is a matter of international concern because it substantially impacts mental health, particularly a general public in India during quarantine or lockdown periods. The sudden viral outbreak, quarantine, and lockdown lead to financial losses, economic vulnerabilities, and social restrictions. The Health Belief Model (HBM) outlines the population's perceptions of the severity of Covid-19 and the benefits of reported mental health information aimed at reducing psychological distress and social stigma (Ka Hung Chung et al., 2023). The HBM explains how information on Covid-19 could help a large population cope with possible negative mental health outcomes during the ongoing crisis in India.

Although the present research adopts the HBM to explain the prevalence of mental health issues during the ongoing pandemic, alternative models of health behaviour can be investigated to establish additional benefits for the general public. The long-term impact of mental health awareness towards changing attitudes and reducing the stigma specific to infectious diseases should also be examined along with other forms of resilience-building parameters to support clinical health psychology practitioners in India.

Addressing a large population represents a major challenge for the government, that has initiated multiple national-level mental health awareness programmes and NGO actions. Instead, the utilisation of digital platforms has become fruitful in spreading mental health awareness.



The beneficial effects of sustainable awareness programs are crucial to maintain psychological well-being and to communicate information on other existing health issues. Significant efforts should be dedicated to resilience-building activities, because genuine mental health concerns risk being overlooked without external assistance.

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