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## COVID-19 Pandemic Impact on Public Distress, Economy and Education of Bago Division in Myanmar

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**Abstract.** In Myanmar, two expatriates have started infected by COVID-19 pandemic on 23 March in 2020 and COVID-19 period was divided into the two periods by the data of patients, from starting July 29, no more infected people found till August 19. Myanmar citizen think that there will be no more new COVID-19 cases, they started running their daily work, not following precaution methods. Unfortunately, the number of patients increased more and more, starting from 20<sup>th</sup> August. The period between 23<sup>rd</sup> March and 19<sup>th</sup> August was regarded as COVID-19 first wave and the period starting from 10<sup>th</sup> August was COVID-19 second wave by Government. In Myanmar, numbers of developed city are fewer than rural townships. Infrastructures of townships are same and most people, living in rural townships are not rich and they didn't have saving money in Banks and they are depending on their monthly salaries. During pandemic period, general workers faced with unemployment problem and difficulty in daily expenses. Some volunteers helped daily expenses to poor people in COVID-19 first wave. In second COVID-19 wave, volunteers cannot help many families. This paper focused on COVID-19 pandemic impact on Public psychological consequences, Economy, Educational dimension and the prospects after pandemic.

**Keywords.** COVID-19, Bago, Myanmar, First wave, Second wave, Psychological

### Introduction

The world pandemic COVID-19 disease, caused by newly Corona Virus is dreadful and the spreading rates of this disease is so fast. From 10<sup>th</sup> August, numbers of COVID-19 patients are evidently increasing in Myanmar, especially, in Yangon Division, Rakhine State and Bago Division. Bago Division is in Southern central part of Myanmar and 50 miles far from Yangon Division. It is located in coordinates, 17° 20' 12" N 96° 28 ' 47 " E. The population of Myanmar is approximately 55,000,000 and that of Bago is approximately 250,000 and just only 0.45% of

whole Myanmar. At first wave of COVID-19, no one was infected in Bago Division and Bago residences started suffering COVID-19 and increasing day by day and during one month, 3.25% of Whole Myanmar starting from 12<sup>th</sup> September, 2020. Therefore during this COVID-19 pandemic period, people feel anxious, overthinking, resorting to negative, distress and fear. The duration of COVID-19 pandemic is approximately 7 months. Some poor people are facing with the monetary problems and they cannot follow the rules of COVID-19 protection because of their daily expenses. If they don't have money, they will face with starvation. In my study area, 65 percentage of the families has more than five family members and 35 percentage of the families has fewer than 5 family members by the censuses of family of Immigration of Labour, Immigration and Population of Bago Division. And so, they are used to stay with more than five people in touch at their home and even the family with fewer than five people cannot keep a distance of 6 feet according to their living style. And so, if one person was infected by COVID-19, it would be easy to spread to the other family members. In this research, it is recorded that 64 percentage of people are worried about their daily expenses than COVID-19 infection, 2 percentage of people are worried about chronic diseases, 25 percentage are worried about impact on COVID-19 disease and their daily expenses and just only 9 percentage focus on COVID-19. In the first wave of COVID-19 pandemic, it was found that just only 70 percentage of residence lost their business and in the second wave of COVID-19 pandemic, 91 percentage of loss was observed and some small shops cannot run again with empty investment. Most people in my study area have no prospect of running their jobs during pandemic period and after pandemic. The study place of this paper is high level of number of COVID-19 patients with second Ranking in Myanmar. However, the bazaars of Bago Division have been still crowded with people. Some Quarantine Centers of Bago are not systematically arranged and some parents of contact persons who met with COVID-19 patients are used to meet with their children without wearing face masks and sometimes, there are no security officers at entrance gates and some people can easily enter the Quarantine Center. Myanmar people are so obligate and they cannot still follow rules of COVID-19 prevention. The government of Bago controls the public by the environmental and health law but it cannot impact to follow the rules of COVID-19 prevention and most people are still breaking down the rules. On the world, approximately 41,994,00 are suffering COVID-19 and nearly 1,142,000 patients died. In Myanmar and American and in my study area, number of COVID-19 patients are evidently increasing more and more, caused by many reasons.

### **Statement of Problem**

People in Bago don't have much knowledge in health and they are frightening of their living expenses than COVID-19 pandemic, and so, they cannot strictly follow the precaution methods of COVID-19. They are used to post their photos, their emotional feeling, problems of their society on Facebook page, however, they are frightening to answer the interview and questionnaire papers to get the exact data and research. So, many volunteers were used to watch their daily activities to check the answers of questionnaire of this study. The authors used 7 hours study time per day.

### **Purpose of Study**

The purpose of this study is to collect accurate and true research data and prospects for people's health, economy and education. The purpose of this study is to investigate the actual situation of COVID-19 infection in the Bago region and to provide recommendations for preventing and mitigating the risk of a COVID-19 pandemic.

### **Background Objective**

Residence of Bago in Myanmar were used in this study because the second wave of COVID-19, starting from 10<sup>th</sup> August, the numbers of COVID-19 patients ranked second in Myanmar. However, people in Bago don't strictly follow the precaution methods, especially, the crowd people can be seen in bazaars till October 24. Most of the residence in Bago Region are not rich and they face with difficulty during this COVID-19 period. Most residence in Bago rely on the voluntary organizations or NGO such as Thet Kya Nwe Charity, Sa Ya Taw U Kate Ti Charity, We love Bago Charity, Bago Buddhist and Hindu people Charity and individual Volunteers. The founders of Charities are afraid of decreasing the numbers of donors and so many people are also very worried about their daily expenses for long term period of COVID-19. The exact information could be collected by volunteers, some patients and some contact persons, who met with COVID-19 patients in this study.

### **Literature Review**

This paper studied the overviews of the mental health, impacts on education and economy, the conditions of quarantine centers of Bago, increasing numbers of COVID-19 patients and the prospecting problems of people in Bago. In detail, this study starts with the overviews in depression, stress, anxiety, nervousness of people and study situations of students how many percentage of people, following the precaution methods of COVID-19, how to spend the time in "Stay Home" period and the Ranks of the numbers of COVID-19 patients of Bago.

### **Psychological Distress of People living in Bago City**

During the COVID-19 pandemic period, people must change their daily life styles. This COVID-19 pandemic can cause psychological problems especially for poor people who are suffering from fear in their daily living expenses. People have been effected physically and mentally by COVID-19 pandemic and they are worried about infecting COVID-19 before second wave of Pandemic Period in Myanmar, however, when they cannot run their work for more than 5 months, they are more worried about their daily living expenses than COVID-19 infection. But after 10<sup>th</sup> August, the number of patients cannot control and there are a lot of contact person who met with COVID-19 patients in Quarantine Centers. Therefore, the authorities in Bago Division tried to enhance the number of Quarantine Center by using high schools in Bago. Some people cannot have enough money to stay at Quarantine Center. So, the patients and their family members suffer mental health problems, stress, depression, anxiety by effects of quarantine. Some Quarantine centers can be supported living expenses by charities, donors and their medical treatment by government and the surgical masks, N95 masks and gloves, antibiotic sprays, hand sanitizers by Myanmar Army. However, some people, suffering COVID-19 symptoms, are trying to hide their health problems and they are trying to earn money for their families and so it is very difficult to control and reduce the number of patients and contact persons who met with COVID-19 patients. The general workers and casual workers are facing highest level of depression in terms of unemployment problems. They are trying to reduce their stress and anxiety by following their respective religious rules but they cannot control their mental problems due to their monetary problems and they are hoping to run their works. During this pandemic time, the telecommunication companies are offering their promotions by giving the free night data packages from 11pm to 6am and people are waiting for this time to use the internet and so they have not got enough sleep for their physical health and their mental health.

### **Economic Status of Bago**

Small business owners that belong to middle class and general workers such as motorbike taxi drivers, bus drivers, industry workers are facing with tremendous monetary problems (by the interview in our study place). In the first wave of COVID-19, from 23<sup>rd</sup> March to 30<sup>th</sup> April, the people of Bago can be stable for lock down situation and they could pass their time without much difficulty, the loss of their business rates are just only 45%. On 1<sup>st</sup> May, Government gave the permit to start running for their jobs again and the government thought that they can control the spreading of COVID-19 pandemic. Unfortunately, from 10<sup>th</sup> August, there are evidently increasing number of COVID-19 patients in Rakine State and some people from Rakine State migrate to Yangon. Government banned business and transportation again due to the increasing numbers of COVID-19 patients in Myanmar, especially, Yangon, Rakhine and Bago. In the second wave of COVID-19, the rates of economic loss are vast increasing, the transporting workers lose 96% of their income, small shops and restaurants lose 100% of their income and just only government officers are stable with their salaries according to data of this research. Some private factory and industry workers lose their jobs because the factories and industries were banned to run their business. The residence of this study think that conditions of economy would be prospect for the worst situation owing to the periods of COVID-19 and the longer COVID-19 pandemic, the more difficult in Economic situation of Bago.

### **Impact on Education of Bago**

In Bago, there are a few numbers of private schools and those schools are poor in information technologies to teach their students by online teaching system. For the condition of Basic Education of High Schools, 2% of parents can help their children not to waste their time in COVID-19 pandemic period by using online distance education of some private schools of Yangon. 98% of parents are not concerned with their children education and they are waiting for reopening the government schools. Government have taken initiative to provide online classes to students but most of the families cannot afford the money to use the internet and there are network glitches and no networks at some places. And so, the government postponed their plans. Government tried to teach the lessons from government broadcasting Channels, however, some family doesn't have the Televisions at their homes. So, there is no hope to take school time for students. There is no plans for University students in Myanmar. So, long pandemic periods are threatening the education of students in Myanmar, especially villages, townships and poor Divisions and poor States.

### **Methodology**

This research study about people in Bago, Myanmar. The data was collected from residence in study area, medical doctors, nurses, people from quarantine centers Military officers, headmen of villages, volunteers and interviews from official Media and watching daily activities of residence. This study used the validated questionnaire to get the information of emotion of people and how much percentage of precaution methods can strictly followed by people in Bago? The researchers started this research by interviewing to get informations and organizing the group to watch the daily activities of people in study area concerning with the precaution methods of COVID-19 pandemic and also their mental problems. The researchers collected the data and information from Quarantine Center, Doctors, nurses and Military officers from Military hospital and the mental problem questionnaires were analyzed by medical doctors.

**Result**

Total 3000 people were observed in this study and 1045 (34.83%) were males and 1955 (65.17%) were females.

Table 1: Total number of people,

Characteristic	Category	Number	Percentage
Sex	Male	1045	34.83%
	Female	1955	65.17%

Table 2: Age Group

Age Group	Number of Males	Number of Female	Total
Below 30	427 (14.2%)	854 (28.5%)	1281(42.7%)
30-39	170 (5.7%)	509 (16.9%)	679 (22.6%)
40-49	232 (7.7%)	392 (13.1%)	624 (20.8%)
50-59	117 (3.9%)	150 (5%)	267 (8.9%)
Above 60	99 (3.3%)	50 (1.7%)	149 (5%)

Table 3: Occupation Group

Occupation	Number of Males	Number of Female	Total
Civil Servants	180 (6%)	625(20.83%)	805(26.83%)
Students	146 (4.87%)	649(21.62%)	795(26.49%)
General Worker	174 (5.82%)	453(15.10%)	627 (20.92%)
Private Business	54 (1.8%)	60 (2.00%)	114 (3.8%)
Transporting Workers	541(18.03%)	118 (3.93%)	659(21.96%)

Out of 3000 people, 450 (15%) people are always taking care of their health, 700 (23%), 1050 (35%), 800 (27%) are often, sometimes and rarely care of their health respectively.

Table 4: The issue of physical health care

Always	Often	Sometimes	Rarely
450 (15%)	700 (23%)	1050 (35%)	800 (27%)

Out of 3000 people, 450 (15%) people never follow the precaution rules of COVID-19 pandemic,

1500 (50%) people sometimes follow the rule, 840 (28%) often follow and 210 (7%) strictly follow the rule.

Table 5: The issue of following the precaution methods

never	Sometimes	often	always
450 (15%)	1500 (50%)	840 (28%)	210 (7%)

Out of 3000 people, 60 (2%) people are in depression, 210 (7%) are in stress, 1440 (48%) people are in anxiety, 1200 (40%) are in nervous and strangely 90 (3%) feel nothing for COVID-19.

Table 6: The issue of mental health

Depression	Stress	Anxiety	Nervous	No feeling
60 (2%)	210 (7%)	1440(48%)	1200 (40%)	90(3%)

Out of 3000 people, 1080 (36%) people are spending their time by taking religious patterns such as meditation, reading the doctrine of their respective religions and wishing to their Buddha or their respective Gods. 60 (2%) are studying, 300 (10%) are watching entertainments from TV channels and 1560 (52%) are using internet for Facebook, TikTok, Instagram, Bigo Live.

Table 7: The issue of “how to spend their time in “Stay Home Period”

Religion	Study	Entertainment	Social Media
1080 (36%)	60 (2%)	300 (10%)	1560 (52%)

The following graph shows the comparison of percentage of COVID-19 patients in Bago and the whole Myanmar from 12<sup>th</sup> September to 12<sup>th</sup> October. The calculation of percentage was based on COVID-19 patients of Whole Myanmar and Bago on the announcement of Ministry of Health and Sport, Myanmar. There are 32 townships in Bago Division and 31 townships of Bago has COVID-19 patients. Between 32 townships of Bago Division, Bago township has 163 (21.22%) COVID-19 patients, based on whole Bago Division and 0.70% of infecting patients by comparing Whole Myanmar. This result showed that if out of 150 were infected by COVID-19 pandemic, 1 person was from Bago.

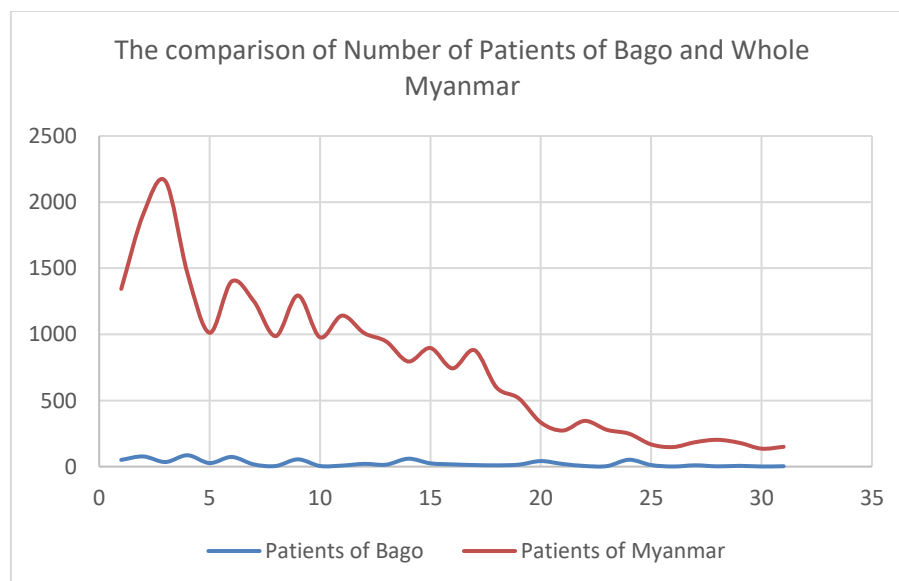


Figure (1): Comparison of Number of COVID-19 Patients in Bago and Whole Myanmar from 12.09.2020 to 12.10.2020

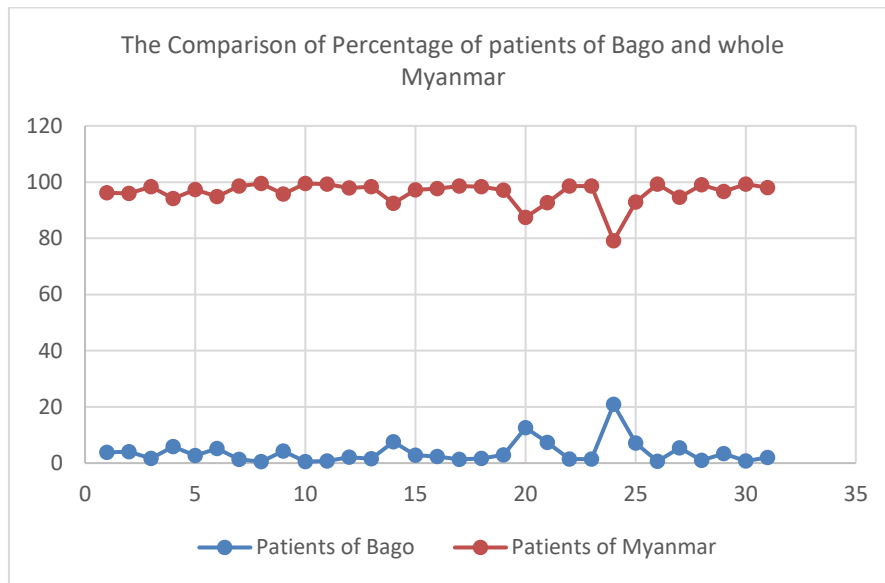


Figure (2): Comparison of Patient Rate of Bago and Whole Myanmar in Percentage from 12.09.2020 to 12.10.2020

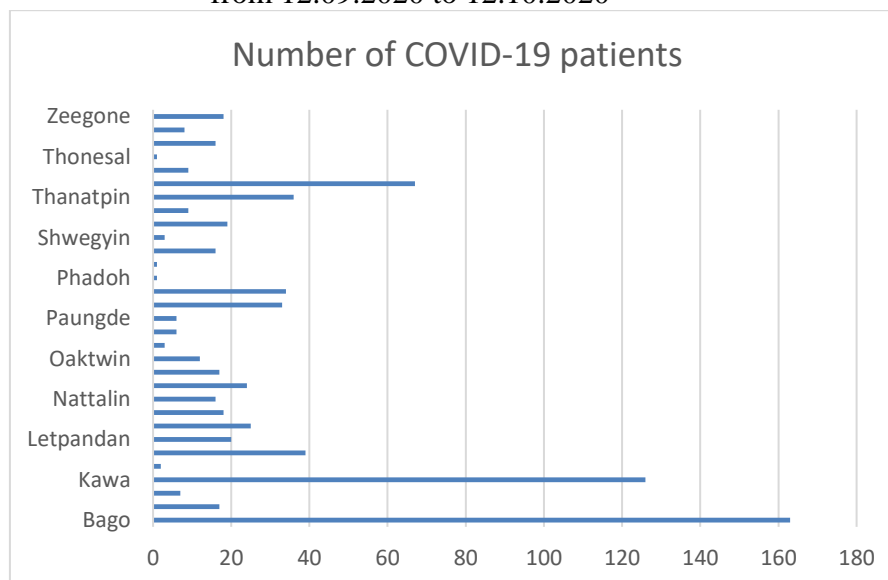


Figure (3): Number of COVID-19 patients in Bago Division from 12.09.2020 to 12.10.2020

### Discussion

During COVID-19 pandemic period, most of the residence in Bago cannot strictly follow the methods of COVID-19 precaution and moreover, I-Con Shopping Mall of Bago just only banned only two weeks because one COVID-19 patient was the staff of I-Con Shopping Mall. Other Business did not get permission to run their work in Bago township but I-Con shopping Mall reopened after two weeks. (by the interview with staff of I-Con shopping Mall). There were so crowded in I-Con shopping Mall and some bazaars and some people, wearing masks under their chins. So, this conditions can support to spread Corona Virus fast human to hu man. The situation of Education cannot have the gratification by the result of this study. The health problems and mental problems of people in Bago have been in uneasy situation. If there may be long time of COVID-19, the daily expenses of Bago people will be more difficult than

my study period and the number of donors will be lesser and lesser. Moreover, people are continuing to try for Government Election and if they cannot arrange the systematic method to prevent spreading of Corona Virus by wearing masks systematically and by taking social distance, the numbers of COVID-19 patients in Bago and Myanmar will not be controlled and people will meet in dreadful conditions. During this COVID-19 period, wealthy family cannot have problems for daily expenses and some poor families have the supports from donors and volunteers but some poor families and small and medium business men are meeting in difficulty in daily expenses and they are more worried about their daily expenses than wealthy and some poor families, getting the supply from donors and volunteers (by the interview with headmen of villages). In Bago, the more number of patients, the more worried about daily expenses, economy, mental health of people and education condition of students.

### **Conclusion**

In this study, the researchers observed the loss of business, psychological effects including depression, stress, anxiety, nervy in this COVID-19 pandemic period. The comparison of the number of patients in Bago and Whole Myanmar was clearly observed to support sharing the knowledge to public of Bago. The bad prospect in student education and unsystematic COVID-19 controlling methods to prevent spreading Corona Virus, was evidently founded in some quarantine centers, bazaars and I-Con shopping Mall in Bago. Government should aware for daily expenses of people, mental health, education of students, the conditions of quarantine centers. For no more spreading Corona Virus day by day, the strong laws should be enacted by Government and the effective action should be taken.

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## References

- [1] Anderson, E. and G. Shivakumar (2013). "Effects of Exercise and Physical Activity on Anxiety." *Frontiers in Psychiatry* 4(27).
- [2] Andreas, J. B. and G. S. Brunborg (2017). "Depressive Symptomatology among Norwegian Adolescent Boys and Girls: The Patient Health Questionnaire-9 (PHQ-9) Psychometric Properties and Correlates." *Frontiers in Psychology* 8: 11.
- [3] Arvind BA, Gururaj G, Loganathan S, et al. Prevalence and socioeconomic impact of depressive disorders in India: Multisite population-based cross-sectional study. *BMJ Open* 2019; 9(6): e027250. Published June 27, 2019. DOI: 10.1136/bmjopen-2018-027250.
- [4] Blenkiron, P. and L. Goldsmith (2019). "Patient-reported outcome measures in community mental health teams: pragmatic evaluation of PHQ-9, GAD-7 and SWEMWBS." *Bjpsych Bulletin* 43(5): 221-227.
- [5] Bhat M, Qadri M, Beg NU, et al. Sentiment analysis of social media response on the Covid19 outbreak [published online ahead of print, May 8, 2020]. *Brain Behav Immun* 2020; S0889-1591(20)30709-1. DOI:10.1016/j.bbi.2020.05.006
- [6] Brown, R. P. and P. L. Gerbarg (2005). "Sudarshan Kriya Yogic breathing in the treatment of stress, anxiety, and depression. Part II--clinical applications and guidelines." *J Altern Complement Med* 11(4): 711-717.
- [7] Burke M and Hodgins M. Is "Dear colleague" enough? Improving response rates in surveys of healthcare professionals. *Nurse Res* 2015; 23(1): 8–15.
- [8] Carpena, M. X., P. S. Tavares and C. B. Menezes (2019). "The effect of a six-week focused meditation training on depression and anxiety symptoms in Brazilian university students with 6 and 12 months of follow-up." *J Affect Disord* 246: 401-407.
- [9] Centers for Disease Control and Prevention. Quarantine and isolation. 2017. <https://www.cdc.gov/quarantine/index.html> (accessed Jan 30, 2020).
- [10] Chakraborty K and Chatterjee M. Psychological impact of COVID-19 pandemic on general population in West Bengal: A cross-sectional study. *Indian J Psychiatry* 2020; 62: 266–272.
- [11] Cheng C, Jun H, and Liang B. Psychological health diathesis assessment system: A nationwide survey of resilient trait scale for Chinese adults. *Stud Psychol Behav* 2014; 12: 735–742. 23. Singh OP. Mental health of migrant laborers in COVID-19 pandemic and lockdown: Challenges ahead. *Indian J Psychiatry* 2020; 62: 233–234.
- [12] Chen E, Lerman K, and Ferrara E. Tracking social media discourse about the COVID-19 pandemic: Development of a public coronavirus Twitter data set. *JMIR Public Health Surveill* 2020; 6(2): e19273. Published May 29, 2020. DOI:10.2196/19273.
- [13] Chen, Y. and D. Guo, Molecular mechanisms of coronavirus RNA capping and methylation. *Virology* 2016; 31(1):3-11.
- [14] Chen Y., Liu Q., Guo D. et al., Coronaviruses: genome structure, replication, and pathogenesis. doi: 10.1002/jmv.25681.
- [15] Cramer, H., R. Lauche, J. Langhorst and G. Dobos (2013). "Yoga for depression: a systematic review and meta-analysis." *Depress Anxiety* 30(11): 1068-1083.
- [16] Gautham MS, Gururaj G, Varghese M, et al., The National Mental Health Survey of India (2016): Prevalence, socio-demographic correlates and treatment gap of mental morbidity [published online ahead of print, 2020 Mar 4]. *Int J Soc Psychiatry* 2020; 20764020907941. DOI:10.1177/0020764020907941.
- [17] Gavin B, Hayden J, Adamis D, et al. Caring for the psychological well-being of healthcare professionals in the Covid-19 pandemic crisis. *Ir Med J* 2020 Apr 3; 113(4): 51.
- [18] Ge, X.Y., et al., Isolation and characterization of a bat SARS-like coronavirus that uses

- the ACE2 receptor. *Nature*, 2013; 503(7477):535-8.
- [19] Goyal K, Chauhan P, Chhikara K, et al. Fear of COVID 2019: First suicidal case in India. *Asian J Psychiatry* 2020; 49. DOI: 10.1016/j.ajp.2020.101989.
- [20] Gupta N, Praharaj I, Bhatnagar T, et al. Severe acute respiratory illness surveillance for coronavirus disease 2019, India, 2020. *Indian J Med Res [Epub ahead of print]* 2020; 151. DOI: 10.4103/ijmr. IJMR\_1035\_20
- [21] Jahanshahi AA, Dinani MM, Madavani AN, et al. The distress of Iranian adults during the Covid-19 pandemic: More stressed than the Chinese and with different predictors. *medRxiv* 2020.04.03.20052571; DOI: <https://doi.org/10.1101/2020.04.03.20052571>
- [22] Kadam AB and Atre SR. Negative impact of social media panic during the COVID-19 outbreak in India. *J Travel Med* 2020; 27(3): taaa057. DOI:10.1093/jtm/ taaa057.
- [23] McKee M and Stuckler D. If the world fails to protect the economy, COVID-19 will damage health not just now but also in the future. *Nat Med* 2020 Apr 9. DOI:10.1038/s41591-020-0863-y.
- [24] Ng C, Chauhan AP, Chavan BS, et al. Integrating mental health into public health: The community mental health development project in India. *Indian J Psychiatry* 2014; 56(3): 215–220.
- [25] Pfefferbaum B, Schonfeld D, Flynn BW, et al. The H1N1 crisis: A case study of the integration of mental and behavioral health in public health crises. *Disaster Med Public Health Prep* 2012 Mar; 6(1): 67–71.
- [26] Provisional Results; Census Report Volume (1): 2014 Myanmar Population and Housing Census: Ministry of Immigration and Population, Union of Myanmar, August 2018
- [27] Pulla P. Covid-19: India imposes lockdown for 21 days and cases rise. *BMJ* 2020; 368. DOI: 10.1136/bmj.m1251.
- [28] Qiu J, Shen B, Zhao M, et al. A nationwide survey of psychological stress among Chinese people in the COVID-19 epidemic: Implications and policy recommendations. *Gen Psychiatr* 2020 Mar 6; 33(2): e100213.
- [29] Rajkumar RP. COVID-19 and mental health: A review of the existing literature. *Asian J Psychiatr* 2020 Apr 10; 52: 102066. DOI: 10.1016/j.ajp.2020.102066.
- [30] Risse GB. “A long pull, a strong pull and all together”: San Francisco and bubonic plague, 1907–1908. *Bull Hist Med*. 1992; 66:260–86.
- [31] Rodriguez-Morales AJ, Cardona-Ospina JA, Gutiérrez-Ocampo E, et al. Clinical, laboratory and imaging features of COVID-19: A systematic review and meta-analysis. *Travel Med Infect Dis* 2020 Mar 13: 101623. DOI: 10.1016/j. tmaid.2020.101623.
- [32] Roy D, Tripathy S, Kar SK, et al., Study of knowledge, attitude, anxiety and perceived mental healthcare need in Indian population during COVID-19 pandemic. *Asian J Psychiatr* 2020 Apr 8; 51: 102083.
- [33] The 1973 Population Census Report (Union) – Myanmar version: Immigration and Manpower Department. The Socialist Republic of the Union of Burma, Ministry of Home and Religious Affairs
- [34] The 1983 Population Census Report, Burma: Immigration and Manpower Department. The Socialist Republic of the Union of Burma, Ministry of Home and Religious Affairs
- [35] Twu SJ, Chen TJ, Chen CJ, Olsen SJ, Lee LT, Fisk T, et al. Control measures for severe acute respiratory syndrome (SARS) in Taiwan. *Emerg Infect Dis*. 2003; 9:718–20.
- [36] Usher K, Bhullar N, and Jackson D. Life in the pandemic: Social isolation and mental health. *J Clin Nurs* 2020 Apr 6. DOI: 10.1111/jocn.15290
- [37] World Health Organization: <https://www.who.int/healthtopics/coronavirus>