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RESEARCH ARTICLE

Nothing Short of Devastation: Disabled Writers' Responses to the COVID-19 Lockdown During the First Year of the Pandemic

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ABSTRACT

The purpose of this paper is to investigate the impact that the coronavirus pandemic has had on people with disabilities and underlying health conditions by analysing their personal stories. The research questions explored in this paper are (1) what impact did lockdown have on disabled people's mental health? and (2) were there any positive impacts of lockdown? To answer these research questions, 46 personal stories from the first year of the pandemic from March 2020 to March 2021, when restrictions were imposed on people's lives, were selected from the internet to examine how lockdown and self-isolation impacted people's lives. The data was analysed using two corpus software: first, LIWC (Pennebaker, Conglomerates, 2022), to see what the language reveals about people's emotional struggles during the pandemic through analysing stylistic features such as the use of words for cognitive processes, emotional affect and personal pronouns; secondly, SketchEngine was used to search for keywords and to analyse concordance lines. The results from the data analysis reveals that paradoxically, while the first year of the pandemic has had a massive impact on mental health breakdown, it has also at the same time, given people the opportunity to find themselves and to explore avenues they would not have done, if not for the lockdown. The results also show that the duration of the lockdown had a severe impact on mental health, particularly anxiety and depression. In terms of language use, there was a high frequency of use of cognitive processes, first person singular pronouns and negative emotions. The high use of cognitive processes revealed that through their stories, the writers were reappraising and reflecting on the events they have experienced; the use of first person singular pronouns illustrated the self-focus of the writers and the negative emotions showcased their immersion in the events and the state of their mental health condition. The low number of positive emotions reveal the upheaval caused by the pandemic.

1. Introduction

The ongoing COVID-19 pandemic has been deemed a severe global public health emergency with restrictions on travel and mixing in public places being imposed in order to reduce the transmission of the virus, on and off in different parts of the world. Even with the efficacy of vaccines, the coronavirus pandemic continues to affect people's lives, with most educational institutions and places of employment requiring different measures to mitigate the risk of infection such as wearing masks. Although lockdown and social distancing is now a thing of the past in the UK, with all restrictions being lifted on 26th January 2022, except for self-isolation after a positive Covid test (which has now also been lifted), the pandemic has had a massive effect on people's lives. Unemployment and insecure economic situations, marriage and familial strife and domestic violence are a few of the psychosocial effects of lockdown. Loneliness, anger, and worry about the future are some of the risk factors that have led to mental health fallout.

Studies from other countries such as Italy (Rossi et al, 2020) and Germany (Armbruster and Klotzbüchle, 2020; Sachser et al., 2020) have also found high rates of negative mental health outcomes. In Italy, researchers found that the Italian general population had mental health problems 3 weeks into the COVID-19 lockdown measures and different COVID19 related risk factors. They note that their findings warrant further monitoring on the Italian population's mental health. In Germany, researchers found that even among participants who had good mental health, there were vulnerable groups whose mental health declined significantly during the course of the pandemic. They found that while the majority of people coped well with the effects of the pandemic (at least when the economic impact is taken into account), there were other vulnerable groups who were prone to adversity and who developed mental health problems. They concluded that people who are isolated and elderly populations with poor social networks, for instance, are likely to develop more mental health problems and may be more vulnerable to such lockdown effects.

Early studies conducted in 2020 have reiterated the importance of mental health considerations in making decisions regarding how soon the lockdown and social distancing restrictions that have been imposed should be lifted (Layard et al.

2020). A growing body of research has also suggested the importance of research on the impact of Covid 19 on mental health with the ONS Survey (2020) revealing more mental health problems such as anxiety and lower levels of subjective wellbeing. The survey illustrates that disabled people in particular have been disproportionately negatively impacted during the pandemic creating a mental health crisis. The results confirm social isolation during the pandemic has had a huge negative impact on mental health well-being. During the pandemic many people have written to the newspapers to express their experience of lockdown. In the Daily Telegraph, a young man, Simon wrote, "the pandemic has changed things a lot. It's made me feel very lonely, as I can't go to my art classes, which was my favourite day activity. I used to love going to the café and the church too, because I see people there. There are two very friendly priests. But everything is closed now. His mother, Phillipa Russell, writes that for Simon, it was not just a day service but 'a life' and she goes on to say that not having those relationships during the pandemic was a 'disaster' for someone like Simon.

The impact on mental health breakdown during the pandemic has been substantial, with people becoming more and more lonely, worried and anxious about their situation as revealed by Mind (2020). Also, government communications, about underlying health conditions, which were intended to reassure the majority of people as to why deaths occur from Covid, appear to have also impacted people negatively making them even more frightened and lonely. For instance, 83% of respondents who took part in the Greater Manchester Disability Survey, expressed that they were frightened about how they would be treated in hospital because of negative attitudes towards those with disability, given the examples of blanket application of Do Not Attempt Resuscitation notices, etc on medical notes in hospital.

As evident from the literature discussed, although the breakdown in mental health has been a focus, not much work has been done on the linguistic analysis of people's responses to the pandemic (see Herat, 2020) as revealed in their personal accounts. This paper therefore, proposes to investigate how disabled people have been impacted by the coronavirus pandemic by examining personal stories on the internet that detail their experiences during lockdown in the first

year of the pandemic from 2020 March to 2021 March by analysing 46 personal stories by people with underlying health conditions. In order to carry out this investigation, the paper is structured as follows: the next Chapter will provide a literature review detailing what the coronavirus pandemic is and the restrictions imposed during the initial stages in 2020 and will examine research that looks at how lockdown in the form of quarantine (self-isolation) during previous pandemics such as the SARS virus have impacted people's mental health. Chapter 3 will discuss the data and methodology used in this paper and will detail the usefulness of using corpus software and the framework of analysis. The results and discussion of the findings will be discussed in Chapter 4 and the final Chapter will conclude the paper.

2. The psychological impact on lockdown

China was the first country to implement lockdown to restrict the spread of infection. In the UK, the first lockdown was implemented on the 23rd of March 2020 to reduce the transmission of the virus. It included measures such as social distancing, working from home, and self-isolation. Lockdown is defined as "an emergency measure in which the movement of people is temporarily restricted during a threat of danger" (Sharma et al, 2020:1). Brookes et al (2020:912)) define quarantine as "the separation and restriction of movement of people who have potentially been exposed to a contagious disease to ascertain if they become unwell, so reducing the risk of them infecting others" whereas isolation is defined as "the separation of people who have been diagnosed with a contagious disease from people who are not sick". However, they note that both terms have been used interchangeably in the context of the current pandemic in communication broadcasts to the public. Although these three terms have different meanings, the common factor is restriction.

From 2020 onwards, COVID-19 has put about one-third of the world's population, under some type of restriction or lockdown. The surge in cases and mortality rates gave rise to increasing fear and confusion among the world's population, inadvertently leading to a mental health crisis. Brookes et al. (2020: 914) examined the psychological effects of quarantined and non-quarantined participants in five investigations. In one study, they discovered that being quarantined resulted in behavioural changes, particularly

among health care employees, who engaged in avoidance behaviours such as minimising patient contact and neglecting to report to work. Their findings imply that there is a link between the length of quarantine and mental health. The longer the quarantine, the more likely it is to cause mental health problems. Brookes et al (2020:916) found that "individuals confined for more than 10 days had considerably greater post-traumatic stress symptoms than those quarantined for less than 10 days."

A study conducted by Pierce et al (2020a, 2020b) using the UK Household Longitudinal Study Waves, suggests that general psychological distress increased slightly during the pandemic. They note that before the pandemic risk factors associated with deteriorating mental health were younger age, female gender, living with children, low income and employment. Another study (Shevlin et al 2020), also found higher levels of anxiety, depression, and posttraumatic stress disorder symptoms in the UK population than previous studies. These studies are further confirmed by Frank (2020) who notes that among people from lower socio-economic backgrounds with pre-existing medical conditions/and or a history of domestic abuse and limited social support, there were considerably higher levels of depression symptoms. Another study conducted in Spain with 2530 participants during the COVID-19 pandemic discovered that the effect on mental health was significant during the first few weeks of lockdown (Odriozola-Gonzalez ' et al., 2020). Rubin and Wessely (2020:1) describe how following the discovery of SARS cases among employees and patients at the Taipei Municipal Heping Hospital, all personnel, patients, and visitors were forcefully quarantined for a two-week period. He notes that the mayhem that ensued shows that the restrictions placed on employees drove them to extreme lengths and created a sense of communal panic, driving them to desperation.

2.1. The psychological impact of trauma through language use

Holocaust survivors are another group who have also been reported to have greater degrees of PTSD symptoms (Brom, Durst, & Aghassy, 2002 cited from Boals & Perez, 2009:1319), and depressive symptoms (Steinitz, 1982 cited in Boals & Perez, 2009:1319), negative affect (Ben-Zur & Zimmerman, 2005 cited in Boals & Perez, 2009:1319) and emotional distress (Carmil &

Carel, 1986 cited in Boals & Perez, 2009:1319). Boals and Perez (2009:1319) note that “the effects of the Holocaust on its survivors have continued to persist even decades after liberation [.....] and affords a further and valuable opportunity to explore how individuals are able to cope with traumatic experiences”. Boals and Perez (2009) examined 20 Holocaust survivors' interviews. They contrasted how people spoke about the holocaust (a traumatic event) to how they spoke about non-Holocaust experiences (a non-traumatic event). They examined the way in which the participants used first-person singular and plural pronouns (I and we), affect words (anger, happy) and cognitive processes such as because, hence. They discovered that (2009:1326) those who had experienced trauma were more likely to use words to do with cognitive processes as a way of coping. They also found that participants used more first person plural pronouns than first person singular pronouns when they were narrating events of the holocaust. The difference in pronoun use was attributed to the participants' collective experience rather than one which was experienced alone (Boals & Perez, 2009:1326). This differs from past research which has found personal singular pronouns to increase in situations of distress. Pennebaker et al. (1997) also hypothesised that the use of positive emotion words is a good predictor of a person's mental well-being. Pennebaker asserts that word choice changes during stressful events as well, in addition to finding that when sharing a personal or traumatic experience, parts of speech can subtly change (Pennebaker and Lay, 2002; Stone and Pennebaker, 2002).

Ashokkumar and Pennebaker (2021) tracked the psychological changes that occurred in the three months following the start of the COVID-19 pandemic in the United States by examining three research questions: (1) How attention, emotions, thinking habits, and social ties evolve throughout time? (ii) How did these psychological impacts affect the virus's spread? (iii) How did the pandemic's psychological effects compare to events in the previous decade? Their data consists of Reddit interactions of over 200,000 individuals in 18 U.S. cities in the months leading up to and following the epidemic. They found that people's attentional focus shifted to the approaching threat when COVID-19 warnings first appeared and that anxiety levels skyrocketed, while positive emotions and anger levels decreased. Parallel to this, they

also found that people's thinking shifted from analytic to intuitive and fell even further when lockdown started. Their findings show that people grew more depressed, and that their thoughts mirrored attempts to make sense of the uncertainty. They also note that family relationships improved as a result of covid.

3. Methodology

3.1. Data

This paper proposes to investigate the following research questions:

1. what impact did lockdown have on people's mental health?' and
2. were there positive impacts of lockdown?'

In order to investigate the effects of lockdown on mental health, a corpus of personal stories was used from people who were disabled or had underlying health conditions. 46 stories from both men and women were selected from 3rd March 2020 to 3rd March 2021 and consists of 29,662 words. The stories are written by people of different ages including both young and old writers. Of the 46 stories, 15 stories were from people who had underlying health conditions. The other stories come from people with mental and physical disabilities. The stories were sourced from internet sites such as charities and Facebook by using the search terms COVID 19 personal stories, lockdown stories, self-isolation stories and coronavirus stories. As Newman, Pennebaker, Berry and Richards (2003:666) illustrate, personal stories that are false have a very different linguistic profile to those that are authentic, as the writers are likely to “dissociate” themselves from the stories because of lack of personal experience (Knapp, Dennis and Hart, 1974 cited in Newman et al, 2003:666). They note that “when people reveal themselves in an “authentic” or honest way, they tend to speak more spontaneously and do not self-regulate or filter what they are saying” (LIWC, 2022). Since the stories selected for analysis in this paper use a high number of personal pronouns and words to do with cognitive processing, these stories can be considered ‘honest’, in that they illustrate the difficult step of cognitive processing in narrating their experiences of lockdown and trying to make sense of what happened during the pandemic. Pseudonyms are used to protect the identity of the writers.

3.2. Procedure

The methodology used to analyse the data include the use of two types of corpus software. Firstly, LIWC-2022 (Pennebaker Conglomerates Inc) was used to analyse the psycholinguistic and stylistic features of the personal stories in order to investigate whether lockdown is having an impact on mental health fallout. Pennebaker et al (2003:548) note that the words people use can be a measure of diagnosing a person's mental, social, and physical state. They find that word use can reveal traumatic experiences shared by people. People with mental health problems were found to have a higher use of first person singular plurals (Pennebaker et al., 2003:560). Secondly, SketchEngine was used to look at keywords and concordance lines in order to see how the words were being used. Baker (2010:26) identifies key words as "words which occur statistically more frequently in one corpus than in a second corpus". He sees keywords as useful 'signposts' in identifying the "lexical focus or preoccupation of a corpus (for specific text)" (2010:26). Phillips notes that corpus linguistics methods can be used to extract information about the 'aboutness' of the texts. In his words, "the crucial point concerning aboutness is that it is a type of meaning arising from the global structuring of text" (Phillips, 1985:30).

4. Results

4.1. Research Question 1: The impact of lockdown on mental health

The bulk of the personal stories have a powerful and personal quality that is difficult to convey only through the use of statistics. Using the concordance lines for the search terms 'lockdown', and 'self-isolation', ten extracts were randomly selected to give an insight into the words used by the writers to show the impact of lockdown and the benefits. The seven extracts given below describe the writers' feelings about the psychological impact of the lockdown:

Extract 1: Betsy

Lockdown has completely thrown me off. It's a very strange and unusual time for everyone, whether you struggle with your mental health or you don't. Due to lack of contact with the outside world, I'm spending a lot of time stuck in my head and that's not always a good place for me to be, especially

when my usual distractions, such as meeting up with friends, have been taken away from me.

Extract 2: Ashley

For a few days my anxiety levels went through the roof. News of the NHS fearing it would not cope cut like a knife through any noise about Brexit or the US election. Supermarkets experienced a rush on toilet rolls and pasta. Im still not entirely sure why. Part of me wonders if some Facebook post about creating a rocket ship out of empty toilet rolls and penne happened to go viral at precisely the wrong moment and any link to panic buying was just coincidental. But anxiety it certainly was. I lost my appetite, experienced extreme lethargy, an unsettled stomach and a regularly elevated heart rate.

Extract 3: Cody

It's hard to stay focused on anything that isn't your own anxiety at a time like this. Every attempt to disengage or take a break from the all-consuming panic and anxiety of not knowing feels like a leap, but one that drops me even further. [...]Every night I've said, "I'll go for a walk tomorrow, clear my head", but then the day comes and I feel an onslaught of emotions – guilt for going out when we should be in, as well as for going out when I should be in work. Fear, over what I will see – what will I do if I see a group of four or five people together on my walk?

Extract 4: Liv

What this virus has brought is nothing short of devastation for all, and for myself personally, it's been a myriad of emotions along the journey

Extract 5: Britney

It has been challenging to be unwell with such a new and little understood illness. In the early weeks of my being unwell, my most helpful interactions were with health professionals who were honest enough to say that they were learning day by day. I was fortunate that those I spoke with, despite no tests being available then, had the confidence to say that I had most likely contracted Covid-19. They shared that they were beginning to hear about many others recovering at home with lingering symptoms, including extreme tiredness. This contrasted with stories I heard from some others with similar long-term illness. They spoke of their symptoms being dismissed by medics as anxiety, particularly in the early weeks and months of the virus. I have

questioned how responsible I am for being unwell for so long. I have felt guilty about being on sick leave. This long illness has been accompanied by emotional challenges.

Extract 6: Pam

A few weeks back my anxiety reached its peak after reading an article about women delivering their babies alone and partners not being allowed to the hospital. What followed was days of waking up with the physical manifestations of anxiety (feeling like I couldn't breathe a tightness in my chest, hot flashes, sweaty palms, being unable to sit still or feeling so overwhelmed I would just lie in bed still for hours) Then I started having panic attacks. I was able to reach out to some friends about how I was feeling, but the problem with anxiety is that it convinces you that everyone else around you would think that your feelings are trivial and It can also make it hard to actually articulate why you feel this way. I felt more isolated than ever, and my anxiety had me just where it wanted me – trapped in a corner, alone.

Extract 7: Wendy

Not having any face-to-face contact with my family, not being able to touch them because I was protecting them from myself and this virus was very exhausting and lonely. I had to be the protector of my colleagues, patients, family and friends. Even when three members of my family had the virus and were very sick, I had to continue protecting them and myself by staying away. As a nurse who cared for people, I could not care for my loved ones. That was heart breaking. I prayed for the nightmare to end. I was broken. Covid-19 has destroyed and remoulded me into someone I am still trying to figure out. It has completely changed my outlook on life and it has broken a part of me which I am still working hard to heal [...] I am personally hoping for a world where I can see no person suffer from covid-19

Discussion of the extracts

In extract 1, Betsy, who suffers from bipolar, writes that the lockdown has led to her spending a lot of time 'stuck in [her] head'. Likewise, in extract 2, Ashley, talks about her anxiety levels 'going through the roof' leading to a loss of appetite, increased lethargy, stomach pains and elevated heart rate, showing that in addition to dealing with a dangerous virus, the economic effects of the pandemic such as the shortage of goods and panic buying also exacerbated people's anxiety and

worries about the pandemic. In her story, Cody (extract 3) foregrounds the difficulties in staying 'focused' and talks about her 'all-consuming panic and anxiety of not knowing', suggesting the plethora of emotions experienced during the pandemic such as guilt and fear. This is also confirmed by Liv's story in extract 4, where she writes that the pandemic has brought about 'a myriad of emotions' saying that it has been 'nothing short of devastation'. In extract 5 Britney's use of personal pronouns suggests her self-focus. She also recounts her guilt at being ill and the emotional impact that it has had. In extract 6, on the other hand, Pam, a woman who is 37 weeks pregnant recounts her fears of delivering her baby safely after reading an article, where a woman had to give birth alone, because partners were not allowed to be there, and the impact this has had on her mental health, for instance, "waking up [...] feeling like I couldn't breathe"; "overwhelmed"; "panic attacks"; "trapped". Likewise, in her story Wendy (extract 7) talks about lockdown as being 'exhausting' and 'lonely'. She writes that she was 'broken' and that Covid 19 has 'destroyed' and 'remoulded' her into someone she 'is still trying to figure out'. These accounts reveal the devastating effect that the lockdown has had on mental health, having to stay away and not being able to care for and be with loved ones. These stories confirm the findings of Brookes (2020), who stated that there is a correlation between the duration of self-isolation and mental health.

Research Question 2: Did the lockdown have any benefits?

In order to answer research question 2, 3 extracts which detail what the writers perceive as the benefits of lockdown are given in examples 8-10. The number of extracts showing the adverse effects of lockdown outweigh the benefits, as evident from the fewer extracts seen below. As illustrated in Table 4.2, the most significant use of words evident in the personal stories is the use of words for cognitive processes, which is statistically significant with a confidence interval of 0.95. These are words which denote cognitive mechanisms, for instance, the use of causal words (e.g., because, effect, hence) and insight words (e.g., think, know, consider), especially in describing a past event is perceived as a mechanism for reappraisal. These are the words that are used more often by those talking about the benefits of lockdown.

Extract 8: Anne

For those of us with social anxiety, lockdown has been both a blessing and a curse. In a strange sense, it feels as if we are being rewarded for doing what we do best: keeping ourselves to ourselves and staying away from others. But there are downsides to this, too. The prospect of having to socialise with others again after the best part of a year spent isolating is absolutely terrifying for those with social anxiety.

Extract 9: Amber

The pandemic gave me a lot of time to reflect. It meant that I was back at home and had a constant support system. My eating improved because we had family dinners together. I also had time to explore other hobbies. I was seeing other people start embroidering or playing an instrument and thought: 'I'm going to try that'. I discovered that I wasn't just a scientist. Before I could only thrive on grades, but when I had time to myself I discovered new things that I'm good at apart from being academic, which has been really nice. I think other people have too. That's been one of the positives to come out of the pandemic – there's so much more creativity in the world. So many of my friends have started podcasts, businesses or little hobbies.

Extract 10: Andy

Dealing with uncertainty is a fairly normal in healthcare, though obviously not on the current scale. I think it is something we are all taking in our stride, and in a way it's nice because everyone is in the same boat.

In extract 8, Anne, refers to the lockdown “as a blessing and a curse” and reflects how “absolutely terrifying” she finds the prospect of ‘those of us with social anxiety’ having to socialise with others after almost a year. In the extract, she talks about her social anxiety and having to mix with others again once the lockdown was over. The fact that she refers to the lockdown as ‘a blessing and a curse’, suggests that the lockdown has had some benefits despite the feelings of anxiety. In extract 9, Amber talks about her experience of lockdown as a positive experience saying that it gave her time to ‘think’. This account by her shows the benefits of reflecting on the experience of the pandemic, as it illustrates “the positives to come out of the pandemic”, as she states that her ‘eating

improved because we had family dinners’ and also the time ‘to explore other hobbies’. This is supported by Ashokkumar and Pennebaker (2021) who found that family relationships improved during the pandemic.

Kross and Ayduk (2008 cited in Tausczik and Pennebaker, 2010:35) suggest that switching from not processing to actively processing traumatic experiences through emotional writing, leads to improved health outcomes. Likewise, Boals and Klein (2005) also found that use of cognitive words after a stressful event is a reflection of the individual actively searching for meaning and understanding the event. In the personal stories analysed, the most frequently used cognitive process words were insight words such as *think* and *know*. According to Tausczik and Pennebaker (2010) those that utilise more insight and causal words in their emotional writing report lower levels of intrusive negative thinking.

In her story in extract 10, Andy, reflects that the experience she is going through is similar to others’ and something everyone as a collective is ‘taking in [their] stride’ and finds that reassuring. Gortner and Pennebaker (2003:581) note that when a community is stricken by trauma, as in the case of a pandemic or natural disaster, the communal experience of shock and sadness can be “socially shared” as in Extract 10. Andy shows that the emotional upheaval and uncertainty that she is experiencing is not something unique to her and the use of the cognitive word ‘because’ shows the way in which she is processing the event and the words ‘everyone is in the same boat’ gives her a sense of connectedness with others going through the same situation. She also says she is “grateful to have job security in a time where friends are worried about their work, rent, bills and so on”. This supports the findings of Mind (2020), which noted that the lockdown had led to people becoming more anxious and worried about their economic situation.

4.1.2. Word use in the stories

In order to investigate the psychological impact of lockdown on mental health, a keyword search was conducted using SketchEngine to see the preoccupation in the corpus (Phillips, 1985). SketchEngine identified 2681 words as keywords in comparison to the EnTen corpus. Of these the top five keywords are given in Table 4.1.

Table 4.1 Keywords in the corpus of personal stories

Keywords	Relative frequency per million words	Percentage
Self-isolating	573.12	0.057%
Self-isolate	438.27	0.044%
Lockdown	1,483.38	0.15%
Coronavirus	1,989.08	0.2%
Pandemic	1,618.23	0.16%

The top 5 keywords in Table 4.1. show that since the coronavirus was a new, unknown threat, the preoccupation in the personal stories is with aspects relating to the threat with the words *coronavirus*, *pandemic*, *lockdown*, *self-isolating*, and *self-isolate* having the highest scores for relative frequency per million words. One of the most notable aspects of the pandemic was the government's mandate that people remain in self-isolation for an extended period of time in order to prevent the virus from spreading, and this attentional focus is evident through the key words in the corpus. The uncertainty

and lack of knowledge about the novel coronavirus meant that that the government could not predict when the pandemic would end, which required people to spend prolonged periods of time socially isolated from society, with no knowledge of the disease's current or future course.

Using the statistics gathered from LIWC results, an analysis of descriptive statistics was carried out using Excel data analysis. Table 4.2 illustrates the descriptive statistics for word use in the personal stories.

Table 4.2 Descriptive statistics

Statistic	First person singular pronoun I	Cognitive processes	Negative emotions	Positive emotions
Mean	8.27	11.47	4.21	0.76
Standard Deviation	2.86	3.05	2.36	0.79
Confidence Interval	0.85	0.95	0.711	0.24



Figure 1: Mean scores for linguistic measures in the personal stories.

The descriptive statistics suggests that word use for cognitive processes is statistically significant, as the confidence interval is 0.95, which is equivalent to $p < 0.05$. Although, the confidence intervals for first person pronoun use and negative emotions are not statistically significant showing higher variation, the mean score suggests that the first-person singular pronoun I and negative emotion words used in the

personal stories is higher on average in comparison to positive emotion words (See Figure 1). As mentioned above, the use of cognitive process words, for example, words that show insight such as understanding and thinking, could be perceived as a coping mechanism used by the writers to deal with the high stress of lockdown during the pandemic.

4.3. Words for Affect – negative and positive emotions

Table 4.3 Negative emotion words used in the corpus of personal stories

Negative Emotion	Number of occurrences	Positive Emotion	
Anxiety	60	love	12
Worry	17	Like	11
Worried	14	Loved	10
Fear	13	Enjoy	9
Worries	11	Laugh	6
Stress	10	Smile	5
Panic	8	Relax	4
Depression	8	Patient	4
Anxious	7	Happy	4
Care	7	Trust	3
Concerned	6	Smiling	3
Fears	6	Joy	3
Scared	5	Rest	3
Scary	5	Calm	3
Cried	5	Happier	3
Suffering	4	Precious	3
Anxieties	4	Confidence	3
Sadness	4	Calming	3

The words of emotion in Table 4.3. used in the personal stories highlight the distress undergone by the writers. Table 4.3. illustrates that negative emotion words are used more than positive emotion words, with negative emotion words having higher frequency of occurrence in comparison to positive emotions. As evident from the literature, the uncertainty created by the pandemic shows the resulting stress, worry, sadness and anxiety, which would have been exacerbated by not being able to connect with loved ones and economic burdens. This backs up research by Ashokkumar and Pennebaker (2021), who found that positive emotions decreased during lockdown with a rise in the incidence of anxiety and depression. As they show in their paper, people react to traumatic situations in dramatically diverse ways; how they react can indicate a lot about how they cope with the incident and the extent to which it will affect their lives in the future. Extract 7 discussed above confirms Sascher et al's (2020) findings that even among participants who had good mental health, there were vulnerable groups whose mental health declined significantly during the course of the pandemic.

People's emotional reactions are central to how they respond to and cope with events. Likewise, research done during the covid 19 pandemic, have also found that anxiety and depression increased among the more vulnerable population (Shevlin et al, 2020).

This sense of panic and anxiety experienced during a traumatic event is supported by Gortner and Pennebaker (2003), who found that symptoms akin to PTSD are evident during times of distress.

As Tausczik and Pennebaker (2010:32) have shown, emotion words can also show the level of involvement in the trauma. Over the course of four writing sessions, Holmes et al. (2007 cited in Tausczik and Pennebaker, (2010:32) discovered that using more positive and negative emotion words to describe partner violence that they had experienced resulted in higher sensations of physical pain among women trying to cope with intimate partner abuse. According to the authors, more usage of emotion terms indicated greater involvement in the traumatic event, which resulted in increased physical and mental distress.

4.4. The use of personal pronouns

Table 4.4 The use of personal pronouns in the corpus of personal stories

Personal pronouns	Absolute frequency	Relative Frequency per million tokens	Percentage
I	1,156	45,580.2	4.6
My	462	15,575.48	1.6
Me	187	6,304.36	0.63
We	132	4,450.14	0.45
She	100	3,371.32	0.34
They	90	3,034.19	0.3
You	89	3,000.47	0.3
He	70	2,393.63	0.24

Table 4.4. illustrates that the first person singular pronoun 'I' (subjective) was the most frequently used with 45,580.2 occurrences per million words (4.6%), followed by the first person singular pronoun (possessive) 'my' with an occurrence of 15, 575.48 per million words (1.6%) and (objective) 'me' with 6,304.36 per million words (0.63%). The first person plural pronoun 'we' was used much less in comparison with only 4,450.14 per million words (0.45%) illustrating that first person singular pronouns were the most prevalent. Studies on depression show that language features can be markers of mental health. As evident from Tausczik and Pennebaker's work (2103:37) depressed patients are more likely to use more first person singular and more negative emotion words. In this current study, there was a +1 correlation between the use of the first person singular pronoun use and the use of negative emotion words. According to Rude, Gortner, & Pennebaker (2003), when people are in pain, their focus is directed to themselves, and as a result, they use more first person singular pronouns.

5. Conclusion

The analysis of the personal stories set out to investigate two research questions: 1) What impact did lockdown have on people's mental health? (2) Were there any positive effects of lockdown? The data analysis revealed that the uncertainty fuelled by the pandemic has been immense, with vulnerable people such as those with disabilities, being more prone to mental health fallout. The language measures analysed, for example, words for cognitive processes, emotion words and personal

pronoun words illustrated that a high number of words for cognitive processing was used showing that the writers were trying to understand and come to terms with this new situation they were in by using more words such as think, know, understand, because, etc. Whereas with emotion words, what was evident was that there was a tendency in the personal stories for people to use more negative emotion words showcasing the anxiety, worry, stress, sadness, fear and suffering they were undergoing. The personal stories were also infused with a large number of first person singular pronouns such as I, my, me in comparison to other personal pronouns showing the attentional focus on the self. There was a sense in some stories of being closer to their families but at the same time, also being cut off from other social connections. Overall, the analysis of the language in relation to research question 1, reflects that the lockdown has impacted on psychological effects with more use of cognitive process words, negative emotion words and first person singular pronouns and a lower use of positive emotion words. With regard to the second research question, the analysis suggests that there were some positive benefits, for example, being able to spend more time with family, healthy eating, learning about oneself, being more creative.

Despite the limitations of the current study on relying on a small sample of personal stories, the data analysis has revealed the massive effects of lockdown on mental health during the first year of the covid crisis as well as shown some of the benefits gained because of the novelty of being in lockdown.

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