

Psychological effects of social distance caused by COVID-19 (coronavirus) pandemic over the life cycle

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Abstract

This study aimed to systematize information about the consequences of social distance along the different stages of the life cycle for people who were not infected by the virus, but who experience the indirect consequences of the pandemic. Through a narrative review, the results of recent research in different countries were systematized, as organized: effects of social distance for children and adolescents, effects of social distance for adults, effects of social distance for the elderly and effects of social distance for the occurrence of domestic violence, which proved to be a transversal theme to all stages of the life cycle. Recommendations are also presented for the management of the effects of social distance in different stages of human development.

Keywords: quarantine; pandemics; psychology; coronavirus; life cycle.

Resumo

Efeitos psicológicos do distanciamento social causado pela pandemia da COVID-19 (coronavírus) ao longo do ciclo vital. A pandemia causada pela COVID-19 fez com que fossem adotadas medidas de distanciamento social para impedir a propagação do vírus ao redor do mundo. Este estudo teve como objetivo sistematizar informações sobre as consequências do distanciamento social ao longo das diferentes fases do ciclo vital para pessoas que não foram contaminadas pelo vírus, mas que vivenciam as consequências indiretas da pandemia. Por meio de uma revisão narrativa, foram sistematizados resultados de pesquisas recentes realizadas em diferentes países, assim organizados: efeitos do distanciamento social para crianças e adolescentes, efeitos do distanciamento social para adultos, efeitos do distanciamento social para idosos, e efeitos do distanciamento social para a ocorrência da violência doméstica, a qual se revelou um tema transversal a todas as fases do ciclo vital. Apresentam-se ainda recomendações para o manejo dos efeitos do distanciamento social em diferentes etapas do desenvolvimento humano.

Palavras-chave: quarentena; pandemias; psicologia; coronavírus; ciclo vital.

Resumen

Efectos psicológicos de la distancia social causados por COVID-19 (coronavirus) durante el ciclo de vida. Este estudio tuvo como objetivo sistematizar información sobre las consecuencias de la distancia social a lo largo de las diferentes etapas del ciclo de vida para las personas que no fueron infectadas por el virus, pero que experimentan las consecuencias indirectas de la pandemia. A través de una revisión narrativa, los resultados de investigaciones recientes en diferentes países se sistematizaron, según lo organizado: efectos de la distancia social para niños y adolescentes, efectos de la distancia social para adultos, efectos de la distancia social para los ancianos e efectos de la distancia social para los ocurrencia de violencia doméstica, que resultó ser un tema transversal para todas las fases del ciclo de vida. También se presentan recomendaciones para el manejo de los efectos de la distancia social en diferentes etapas del desarrollo humano.

Palabras clave: cuarentena; pandemias; psicología; coronavirus; ciclo vital.

COVID-19 is a respiratory disease caused by the new coronavirus that was identified in December 2019 in Wuhan, China, and rapidly spread to over 200 countries (Pan, Cui, & Qian, 2020). On March 11, 2020, COVID-19 was characterized by the World Health Organization (WHO) as a pandemic, becoming the focus of public health policies. To prevent the spread of the virus, several countries adopted restrictive measures (Wilder-Smith & Freedman, 2020), including isolation, quarantine, and social distancing, which were considered the most appropriate ways to deal with the pandemic (Banerjee & Rai, 2020; Barros-Delben et al., 2020), since there is no vaccine or drug against the new coronavirus to this date.

However, these measures produce adverse psychological effects that can vary depending on people's age group and socioeconomic conditions. This article seeks to systematize the main psychological effects and recommendations produced so far to favor the work of psychologists and health professionals who face new challenges related to the psychological suffering resulting from the current pandemic situation. Besides the recommendations differentiated by stages of the life cycle presented in this article, the relevance of this proposal consists in warning that the manifestation of psychopathological symptoms varies according to the stage of the life cycle in which people are, and that psychologists and health professionals must be sensitive to these differences so that treatment can be more effective.

Isolation, quarantine, and social distancing have significantly affected the daily lives of people worldwide. It is estimated that approximately four billion people were isolated due to COVID-19, which is believed to be the largest number in this condition in human history (Pan et al. 2020). Although not infected, billions of people were significantly affected by these measures and suddenly had to change their daily routines to adapt to a new reality imposed by the restriction measures (Pan et al., 2020).

Evidence indicates that social isolation leads to increased loneliness, boredom, frustration, and intense fear of contagion, death, or loss of family members (Banerjee & Rai, 2020; Barros-Delben et al., 2020; Jiao et al., 2020). In this scenario, the increased probability of mental disorders such as depression and anxiety also stands out (Banerjee & Rai, 2020). Results of quarantines imposed at other times in history revealed an increase in cases of suicide, aggressiveness, and acute stress symptoms (Barros-Delben et al., 2020). Together,

these results indicate the need to raise awareness among psychologists, social workers, and health professionals about this new reality so as not to minimize the difficulties and suffering reported.

The isolation measures imposed to contain the spread of the disease can affect the well-being of entire communities with the closure of schools, job placements, economic losses, and shortage of supplies needed for the health and nutrition of those affected (Pfefferbaum & North, 2020). The period of isolation still produces uncertainty about the duration of these measures and, along with the excess of news about the pandemic; it can generate extreme anxiety and hopelessness in many people (World Health Organization [WHO], 2020). However, the consequences of isolation can vary depending on personal characteristics, economic situation, family, and stage of life. Families with lower income and mental health and those with special needs or experiences of racism or marginalization may have more marked negative psychological effects (Prime, Wade, & Browne, 2020) than families of high socioeconomic status and more emotionally stable. Furthermore, feelings of frustration seem to be present in different age groups (Pan et al., 2020), but the way they are expressed can vary considerably (Prime et al., 2020). Therefore, it may be necessary to develop creative and differentiated strategies to deal with frustration to embrace different interests and situations.

Considering that: (a) some kind of social distancing was imposed on more than half of the world's population as a way to contain the spread of contamination of the new coronavirus, (b) the confinement caused by social distancing measures has consequences that affect the routine of all people who experience it, and (c) the psychological consequences of social distancing can generate suffering for people of different ages who are isolated, this study aims to systematize the knowledge about the consequences of social distancing across the different stages of the life cycle, with emphasis on people who were not infected by the virus, but who experienced the indirect psychological consequences of the pandemic.

As a methodological strategy, a narrative review was conducted, whose objective is to enable the acquisition and updating of knowledge on a specific theme over a short time period (Rother, 2007) and to generate knowledge on themes that have not yet been investigated (Ferrari, 2015). The search was conducted using the CAPES Periodicals Portal and Google Scholar and

some of the descriptors used were “COVID-19”, “psychological impact”, “social isolation”, “social distancing” and “quarantine”. The search was conducted between the end of April and the end of May 2020. All selected articles were read in full. Based on the search results, the impacts of social distance were initially listed, considering the stages of the life cycle covered in the selected articles, which were organized in the following sections: (a) effects of social distancing for children and adolescents, (b) effects of social distancing for adults, and (c) effects of social distancing for the older population. Two other sections were organized in a second moment: (a) effects of social distancing on the occurrence of domestic violence and (b) strategies for coping with the effects of isolation at different stages of the life cycle.

Effects of Social Distancing For Children and Adolescents

Data from the National Health Interview Survey indicate that contingency measures, combined with the health crisis and economic recession may worsen the situation of children with preexisting mental health problems and increase the development of these problems in children considered healthy (Golberstein, Gonzales, & Meara, 2019; Golberstein, Wen, & Miller, 2020). A comparative study on the effects of quarantine on children and caregivers conducted with 398 parents in the United States and Canada found that children isolated or quarantined during the H1N1 epidemic were four times more likely to develop post-traumatic stress disorder than those who were not socially isolated, and approximately 30% of the quarantined parents met the criteria for the disorder (Brooks et al., 2020).

The impacts of COVID-19 on the lives of children and adolescents seem to be based mainly on school closures and the interruption of classes, factors that can have serious consequences for their mental health. According to data from UNESCO, by April 1, 2020, 194 countries had closed their schools. In China, it is estimated that during the lockdown, approximately 220 million children had to continue their studies at home (Pan et al., 2020) and in the United States, approximately 55 million children and adolescents were affected by the interruption of school activities (Golberstein et al., 2020).

School closures affect not only learning but also interrupt activities related to mental health care, such as psychological counseling, often developed only in the school environment for many children and adolescents in

some countries (Lee, 2020). The impacts of school closures on adolescents are often associated with the impossibility of referral and psychological care in the school environment, factors that can have implications for mental health. According to data from the study by Golberstein et al. (2020), which collected data from the National Survey of Drug Use and Health (NDSUH), including information on children and adolescents from 12 to 17 years old in the U.S. in 2014, approximately 3 million U.S. adolescents received some form of mental health service at school. Less privileged groups, from racial and ethnic minorities, low-income families, and those without private health insurance are more likely to access these services only at school, evidencing how isolation measures, directly and indirectly, affect lower socioeconomic classes.

Another impact on mental health is the fact that children and adolescents need to continue their school activities at home with online classes. According to a preliminary study conducted using an online questionnaire with 320 children and adolescents between the ages of 3 and 18 in the Shaanxi province (China), there was an increase in inattention and irritability responses by children of all ages. (Jiao et al., 2020). This result indicates that staying in front of a computer screen, tablet, or cell phone for a few hours to attend distance learning can generate frustration and increase the aversion that many students have towards classes. Schools also play an essential role in feeding underprivileged children and those who are experiencing difficulties. Their closure represents a significant impact on the caloric intake of many students and exposes the social inequalities to which these children are subjected, whether educational or economic (Lancker & Parolin, 2020).

The reduction of activities at school and outside the home environment, such as going to parks and walking can generate insecurity, uncertainty, and increase physical and mental isolation in children (Xie et al., 2020). In addition to reduced appetite and impaired social relationships (Jiao et al., 2020), social restrictions seem to have a considerable impact on children, increasing symptoms of anxiety and depression (Xie et al., 2020). Also, increased cell phone use and reduced food quality may have direct implications for the mental health of this group (Pan et al., 2020; The Lancet Child Adolescent Health, 2020).

Regarding the impacts of social isolation specifically on adolescents, a study conducted in Hong Kong with 757 students showed that the postponement of the final exams for high school students contributed to

the increase in student stress levels (Lee, 2020). This postponement of exams, such as the National High School Examination (ENEM) in Brazil, and the cancellation of rites of passage such as graduation ceremonies may give adolescents feelings of apprehension in the face of uncertainties about the future (The Lancet Child Adolescent Health, 2020). Also, the confinement caused by isolation measures becomes an additional challenge for adolescents since they are at a stage in life where conflicts between parents and children tend to become more common. The inability to relate in-person to their peers also indicates challenges to adolescent well-being (The Lancet Child Adolescent Health, 2020).

For students with mental problems, school routine plays a key role in the development of coping mechanisms. Evidence indicates that for children and adolescents who have depression, a worsening of conditions and considerable difficulty in returning to school and normal life are expected after the isolation period (Lee, 2020). Despite the availability of online care services and the possibility of continuity of care by this means, many children and adolescents may not have an appropriate place at home where they can have their privacy assured in relation to other family members and thus cannot develop adequate monitoring remotely (Golberstein et al., 2020).

The worsening of preexisting mental disorders among children and adolescents is also expected due to the multifactorial dimension in which the pandemic affects their lives. Besides the implications of the current public health crisis, social distancing, and the impossibility of going to school, the economic recession may also considerably affect mental health. In the family context, economic recessions are associated with an increase in mental disorders among adolescents because they are indirectly affected by the reduction in parents' wages or unemployment, in addition to the mental conditions of their caregivers in the face of the economic crisis that may lead to mistreatment of these children and adolescents (Golberstein et al., 2020). It should be noted that the long-term effects of isolation on mental health are not yet known, mainly because research on the impacts of COVID-19 is commonly directed at health professionals and people who contracted the disease (Lee, 2020).

Effects of Social Distancing for Adults

The results of a study with 2,036 young people in the United Kingdom (YoungMinds, 2020), of whom 57% were between 17 and 25 years old, indicated as the main stressors during the isolation period for university students (young adults): (a) leaving student

dormitories; and (b) the postponement of events such as student exchanges and graduation ceremonies. Also, in this context, many students lost their jobs, and graduates who are starting are more anxious in the face of uncertainties in the labor market they will face in the post-pandemic scenario (Lee, 2020; YoungMinds, 2020).

Concerning the general adult population, changes in the way social interactions occur are a potential stressor for this period of social isolation (Schmidt, Crepaldi, Bolze, Neiva-Silva, & Demenech, 2020). Also, as most people were prevented from developing their professional activities and had to interrupt them without planning due to social distancing measures, financial losses are one of the most severe and lasting effects of the pandemic (Brooks et al., 2020). Therefore, the duration and/or lack of supplies and the economic and financial losses are frequent concerns of adults in this time of social isolation and may damage the psychological well-being of this population (Barros-Delben et al., 2020; Schmidt et al., 2020). These situations are often related to uncertainties about the possibility of providing for the family's basic living expenses (Schmidt et al., 2020). The economic problems generated by the COVID-19 pandemic may also present themselves as stressors that may produce more disagreement and distress in couples, which may culminate in increased divorce rates - with direct implications for the well-being of families (Prime et al., 2020).

Results from a study with 37 Chinese individuals showed that one of the main challenges for the adult population may have been to work from home and online because communication via the Internet requires greater time availability and cognitive efforts from the worker (Pan et al., 2020). At this time of isolation, such workers experience more intense feelings such as distress and anxiety, thus demanding resources for emotional self-regulation given the frustration of not being able to be as productive (Gondim & Borges, 2020). In this sense, a challenge for this population was to balance professional activities with the distractions and demands of the family environment, such as the responsibility of caring for younger children and household chores - which caused the workers' efficiency to decrease (Gondim & Borges, 2020; Pan et al., 2020). In other words, there is a radical change in the family routine, which requires new ways of coping with stressful situations that interfere with daily life (Gondim & Borges, 2020; Prime et al., 2020). However, these new

work configurations do not occur equally for men and women.

There have been recent differences between household and professional demands for men and women during social isolation. Research results in Brazil have shown that these differences are marked by women overloaded with domestic chores in addition to increased childcare responsibilities (Aiello-Vaisberg, Gallo-Belluzzo, & Visintin, 2020; Pierro, 2020). Thus, a study of over 5,000 master's and doctoral students, of whom 31% were men and 69% women, found that men have had their work routines less affected in the context of social isolation, especially those who do not have children; in contrast, women had their professional activities more modified in this context, especially those with small children (Pierro, 2020). For this author, a clear example of these inequalities occurs in the academic world, where there were significant differences between the number of scientific productions by women and men worldwide. The significant decrease in women's academic output in the context of the pandemic reveals that gender inequalities still disadvantage their professional contexts (Pierro, 2020). The author also points out that it was not possible to resort to the support network composed of grandparents, family members, domestic workers, and nannies who, until then, helped parents and caregivers to take care of children so that they could take care of their professional activities.

Finally, another relevant implication of social isolation for adults is the increased consumption of licit or illicit psychoactive substances, which have been used to cope with stressful situations (Rojas-Jara, 2020). These substances are used when other sources of pleasure are removed from individuals and constitute a fragile alternative for coping with situations over which the individual has no control (Rojas-Jara, 2020). Evidence from a study conducted with 662 employees at a hospital in Beijing affected by the SARS outbreak in 2003 indicates that alcohol dependence and abuse are among the symptoms related to the long-term effects of quarantine in adults (Wu et al., 2008). The consumption of psychoactive substances and the establishment of new addictions, such as spending excessive time playing video games or accessing social networks during and after the isolation period, prevent the creation of an environment that favors the use of healthier social and emotional adaptation strategies (Rojas-Jara, 2020).

In summary, studies that address the impacts of social isolation for adults deal mainly with economic concerns, which are related to financial losses, economic instability, and the context of uncertainties for maintaining basic conditions of family subsistence. (Barros-Delben et al., 2020; Brooks et al., 2020; Prime et al., 2020; Schmidt et al., 2020). Other studies, in turn, highlight the challenges that adults have faced in the context of home-office work, to balance both professional and family demands (Aiello-Vaisberg et al., 2020; Gondim & Borges, 2020; Pan et al., 2020; Pierro, 2020; Prime et al., 2020). Other concerns are related to the increased consumption of psychoactive substances in this time of isolation (Brooks et al., 2020; Rojas-Jara, 2020).

Effects of Social Distancing for Older Adults

Regarding the impact of social isolation measures for the older population, the results reveal two themes most present in the studies: loneliness and ageism. Social isolation puts the population of older adults at a higher risk of psychological suffering due to depression, anxiety about contracting the disease, death of family members, fear of abandonment, fear related to the uncertainty of the disease, anxiety related to routine change, and deregulation of sleep and appetite due to physical inactivity (Banerjee & Rai, 2020; Brooke & Jackson, 2020). The state of quarantine also causes a lack of previously existing social support networks, lack of opportunity to share their anxieties, constant exposure to pandemic news, reminiscences of previous traumatic events, and problems in family interaction, causing boredom, frustration, and feelings of loneliness (Girdhar, Srivastava, & Sethi, 2020).

Loneliness is a reality experienced by the older population, which increases the rates of depression and suicide in this age group and has escalated at this time of social distancing (Banerjee, & Rai, 2020). Therefore, social distancing added to loneliness in older adults may lead to: (a) increased propensity for depression and anxiety symptoms (Armitage & Nellums, 2020; Banerjee & Rai, 2020; Chatterjee & Yaynatti, 2020; Girdhar et al., 2020); (b) increased risk for cognitive dysfunction, heart disease and mortality (Banerjee & Rai, 2020), cardiovascular and neurocognitive problems, autoimmune and mental health diseases (Girdhar et al., 2020); (c) more irritability, stress, agitation, and isolation in this period (WHO, 2020); and (d) decreased sleep and functional impairment (Chatterjee & Yaynatti, 2020). Given this setting, it was observed that the aging adults most affected during the period of social distancing caused

by the pandemic are those in nursing homes because family members and friends are prevented from visiting (Banerjee & Rai, 2020).

In addition to the effects of social distancing, the older population has suffered with another issue due to the pandemic: prejudice. The spread of prejudice against the older population has increased with the outbreak of the pandemic, spreading discourses suggesting that the death of aging adults is less important than that of other populations (Brooke & Jackson, 2020). Isolated aging adults, especially those who were abandoned by their families in care homes, can experience feelings of worthlessness and of being a burden to society when they come into contact with this kind of opinion (Brooke & Jackson, 2020). It is believed that such widespread ageism can increase the rates of depression and suicide in these groups - especially among those who are institutionalized. Therefore, health professionals and caregivers must be alerted to these dangers and oriented to develop activities that promote the appreciation for life.

Effects of Social Distance for the Occurrence of Domestic Violence

Social restriction measures were taken by several countries to promote the protection and health of their populations to reduce the transmission of the new coronavirus (COVID-19). On the other hand, social distancing is also an aggravating factor for families suffering from domestic violence (Campbell, 2020). Families in this situation are deprived of support and coexistence networks, such as schools and churches, which used to be essential for victims to distance themselves from the perpetrator who, in most cases, is within the family environment (Barros & Freitas, 2015). Moreover, in the current situation, it is more difficult to detect violence and abuse (Humphreys, Myint, & Zeanah, 2020; Usher, Bhullar, Durkin, Gyamfi, & Jackson, 2020).

The occurrence of family violence has increased dramatically worldwide since the implementation of social containment measures (Campbell, 2020; Han & Mosqueda, 2020; Usher et al., 2020). In China, cases of domestic abuse tripled in February compared to the previous year (Humphreys et al., 2020). In Brazil, it is estimated that cases of domestic violence have risen by 40 to 50% since the introduction of social distancing measures (Campbell, 2020).

Family violence during pandemic periods is associated with several risk factors, including economic instability, isolation, substance abuse, unemployment, accumulation of stressful events in sequence, limited

resources, insecurity in the face of expectations about the future, and reduction of social support networks (Campbell, 2020; Usher et al., 2020). For these authors, as a result of the closure of bars and restaurants, alcohol abuse - a factor highly correlated with domestic violence - now occurs at home, increasing the risk for families, especially those who already had a history of domestic violence before the pandemic.

The number of reports of violence against women, according to data from Dial 180 provided by the Brazilian Ministry of Women, Family and Human Rights, increased by 17% in March 2020, when social distancing measures began in Brazil (Marques, Moraes, Hasselmann, Deslandes, & Reichenheim, 2020). In the current situation, women are in a highly vulnerable position because they have fewer opportunities to avoid conflicts with the perpetrator. They are often overloaded with domestic and remote work, caring for children, older adults, and the sick, in addition to being deprived of social contact with friends and family, which are other support networks they could turn to in situations of need, thus remaining vulnerable to psychological violence and sexual coercion (Marques et al., 2020).

Recent evidence indicates that perpetrators use COVID-19 as a coercive control mechanism based on fear and the threat of contagion, in addition to misinformation about social distancing measures to exert further control in the perpetuated abusive relationship (Usher et al., 2020). Such abusive control in situations of violence against women often also occurs against children and adolescents (Humphreys et al., 2020; Marques et al., 2020). In contrast to the increase in reports of domestic violence, the number of reports of child abuse and neglect has decreased significantly (Campbell, 2020). However, this data can most likely be explained by the fact that due to the quarantine, there are fewer opportunities to detect maltreatment, rather than a decrease in its incidence. It should be noted that the largest source of child abuse reports comes from schools, which are now closed (Humphreys et al., 2020).

A child in the position of the victim of an abusive adult has a high chance of developing a psychopathological condition as a consequence of having lived this traumatic experience (Reichenheim et al., 2011). Furthermore, in a quarantine context, the child has nowhere to turn, and his or her chances of improvement decrease considerably due to the lack of contact with other support networks (Sarkadi & Warner, 2020). In the case of preexisting mental illness, there is a

possibility of worsening of the symptomatic condition, which may decrease the child's or adolescent's ability to deal with conflicts (Marques et al., 2020).

Due to the closure of schools, children and adolescents spend more time at home than before and this change in routine can make them more irritable and disobedient, especially in the case of younger children who do not yet understand the context of the pandemic and the need for isolation (Marques et al., 2020). This becomes a risk factor when parents, guardians, or caregivers are challenged with the task of reconciling child-care, domestic work, and remote work, in addition to concerns generated by the pandemic, such as economic instability (Humphreys et al., 2020; Marques et al., 2020).

For the older population, the isolation caused by the COVID-19 pandemic has been extremely harmful. The occurrence of abuse cases increased considerably during this period, from intrafamily abuse to financial scams (Han & Mosqueda, 2020). With social distancing measures, the senior centers, known as nursing homes, were closed, increasing the time that families spend with their older members. The situation is even more worrying since perpetrators of elder abuse are commonly family members (Han & Mosqueda, 2020). Another aspect to consider is the greater spread of prejudice in relation to the older population since it is the population at risk in the pandemic of COVID-19 (Brooke & Jackson, 2020). In addition, the fact that the older people are aware that they are the population at higher risk of lethality from the new coronavirus exacerbates the symptoms of anxiety and depression that are already considered high at this stage of the life cycle (Han & Mosqueda, 2020).

Strategies to Deal with the Effects of Isolation in the Different Stages of the Life Cycle

After systematizing the effects of distance at different stages of the life cycle and also for the occurrence of violence, it is necessary to list some recommendations for each of these contexts that can help people of different age groups to deal with the consequences of the pandemic. Among the measures to reduce the impacts of social distancing for children, it is recommended: (a) to be honest with children about the current situation, considering their age and ability to understand; (b) to engage in constant dialogue with them to seek to understand their concerns, anxieties, and fears; and (c) seek to meet their demands for care and emotional dependency, which may increase during this period (Jiao et al., 2020; WHO, 2020).

Entertainment media, reading, physical activities, and games are recommended to reduce negative impacts, relieve stress, keep them away from the worries inherent to the current period, keep them calmer and less anxious. Chinese pediatricians, who worked in the Shaanxi province (China) where a preliminary study was conducted with 320 children and adolescents, also recommend music therapy as a way to reduce loneliness and promote quality time between parents and children, as well as conducting collaborative games and encouraging new activities in which children and adolescents can feel reassured (Jiao et al., 2020).

Parents and caregivers should invest in reorganizing the family routine and in the quality of time they spend with their children, in order to strengthen it or create a space for them to talk about their feelings and anxieties brought about by the changes in the COVID-19 pandemic (Marques et al., 2020). Therefore, attention should be given to bedtime problems, such as nightmares and insomnia. In this case, relaxation activities can be performed during the day to ensure a better quality of sleep. It is necessary to provide not only emotional but also practical support through an information network between health professionals and family members of children and adolescents so that they are not left helpless and the negative impacts at this stage of development can be mitigated (WHO, 2020).

Particularly in relation to adolescents, it is recognized the increased need for peer relationships at this stage of life for a healthy development. The establishment of such relationships promotes feelings of belonging, identification, and sharing of common experiences, which contributes to well-being (Oosterhoff, Palmer, Wilson, & Shook, 2020). It is therefore recommended that the pursuit of new hobbies be encouraged, such as singing and painting, and the establishment of regular study and physical exercise routines (WHO, 2020). Also, in this scenario where face-to-face contact is not possible, the use of social media should be encouraged to share experiences and interact with information groups and awareness movements to combat the advance of the pandemic (Andrews, Foulkes, & Blakemore, 2020). In this sense, electronic media can also act as a way to strengthen and validate the experiences of young people in this period of global crisis, promoting the sharing of their creative solutions to deal with this moment and connect with their peers through the development of new skills (The Lancet Child Adolescent Health, 2020).

Concerning university students, it is suggested that they: (a) seek to organize a place for study and

remote classes; (b) establish a study routine and a defined schedule for university activities; (c) collaborate with other classmates and, if possible, promote virtual meetings to study and discuss contents, in order to build a help and support network with some people in the class; and (d) talk to classmates and share their strategies for study and emotional regulation at this time of social distancing, as personal experience can help other classmates to be inspired to formulate strategies to face the university challenges of this period (Ambiel et al., 2020).

With regard to the adult population, especially in relation to addressing the challenges of remote work at this time of social distancing, it is suggested: (a) to consider that the current work situation is temporary, which can help reducing anxiety; (b) to distinguish which activities are possible to be conducted remotely and which are the resources needed to develop them, so that workers can assess what depends on them for the development of such activities and what depends on the institutions and the Government, becoming more aware of the limits and possibilities of their actions; (c) to seek to organize a time for the development of professional activities and an environment that favors the development of these tasks; (d) that workers can ask for help from people who are close to them, either to help them with household chores or even to promote moments with friends and family, by digital means, so that they can report how they are feeling and developing their activities; and (e) to be open to create new strategies for the development of their professional tasks and balance them with other demands (Gondim & Borges, 2020).

It is suggested that household chores are divided between men and women and that everyone can collaborate to create a space of coexistence conducive to common well-being, considering their possibilities (Gondim & Borges, 2020; Pierro, 2020). Also, it is necessary to change the understanding that motherhood and the traditional family are considered the most effective ways of caring for children, as it generates suffering both for women, who suffer the burden of caring for the home and children, and for men, who are deprived of their caring potential (Aiello-Vaisberg et al., 2020).

It is also recommended to take advantage of the isolation time for personal and family care, giving freedom to imagination and creativity, and also to try to be emotionally close to important people who are physically distant, through the digital resources available.

Therefore, everyone is invited to give a sense and meaning to this moment of social distance by concrete daily actions for personal and collective well-being (Oslé, 2020).

As for the specific measures to improve the quality of life of aging adults in this period, creating a sense of companionship and keeping busy are considered strong tools to fight loneliness in this age group. Also, some possible interventions are: (a) pet therapy; (b) leisure and skills development; and (c) psychological therapies and communication applications (Girdhar et al., 2020). When considering the psychological impact that prejudice has on aging adults, especially during social isolation, it is important to increase the representativeness of this population in society in order to reduce their feelings of worthlessness (Brooke & Jackson, 2020).

Regarding the increase in domestic violence caused by social distancing, it is important to recognize that certain sections of the population are especially at risk, such as families in which domestic violence has previously occurred. Among the measures that can be taken in the direction of prevention and relief, the use of remote means of social assistance is suggested. It should be considered that a large part of the population may not be aware of this possibility, so it is necessary to share information on available local services, including access to these services via social networks (Usher et al., 2020).

In this sense, it is necessary to reinforce advertising campaigns that express the need to intervene in "husband and wife" quarrels to combat this sexist and individualistic notion (Humphreys et al., 2020). With the increase in the number of cases of violence in Brazil, several campaigns were created and disseminated to make services for victims of violence more visible in the media. As for the older population, it is suggested that campaigns be conducted to disseminate a perspective of the aging adult free from prejudice (Usher et al., 2020).

Some recommendations to face the effects of social distancing caused by the pandemic, especially for adolescents, adults, and the aging population, are the promotion of resilience and well-being through practices of self-compassion, optimism, and meditation (Zanon, Dellazzana-Zanon, Wechsler, Fabretti, & Rocha, 2020). These authors propose that, despite the many limitations imposed by social isolation, through the use of creativity, the context of the pandemic can be a unique opportunity for changes in habits and lifestyle to

occur in order to improve one's view of themselves, life as a whole, and how to deal with people and situations.

Considering that people may feel bored and aimless in life due to social distancing, another important aspect to be encouraged is the cultivation of one's life purpose. Having a life purpose plays a key role in healthy development (Dellazzana-Zanon & Freitas, 2015) and can be promoted at any stage of the life cycle (Bronk, 2014). Holding a clear vision of the central goals behind all the activities we conduct daily helps to give meaning and direction to life in times of uncertainty and insecurity. In this sense, finding time to think about one's life purpose during the pandemic and keeping it in mind can help bring another perspective to the situation.

Final considerations

This study aimed at systematizing information on the consequences of social distancing along the different stages of the life cycle, with emphasis on the general population, who were not necessarily contaminated by the virus, but who experienced the indirect consequences of the pandemic. The results of this study show that the studies conducted so far on this theme cover the following stages of the life cycle: childhood and adolescence, adulthood, and old age.

For children, it was observed that the impacts of the isolation caused by the pandemic are mainly related to the school closures, which generated feelings such as insecurity, irritability, anxiety, and damage to peer relationships, essential at this stage of development. For adolescents, the consequences of the pandemic also refer to the closure of schools, but in different ways. For them, uncertainty regarding the final exams and the cancellation of rites of passage are a constant source of stress. For adults, the main effects of isolation are the need to play different roles simultaneously in the family environment, without the resources of the usual support network. These effects are more severe in families with young children where, in addition to household and home office demands, parents also need to handle their children's distance learning tasks. It is not surprising that women are more overburdened than men in this pandemic setting. For the older population, the very fact that they are considered to have the highest lethality in case of contamination by the virus already causes feelings of anxiety and depression. The new scenario also increased the loneliness of older adults, who can no longer receive visits or visit family members,

and those in nursing homes are even further removed from any contact with their support network. Added to all these issues, being in a situation of social distancing increases the chances that situations of domestic violence will occur in all stages of the life cycle, which indicates the need to create coercive measures that can reduce the suffering of people in this situation.

It should be noted that the results presented here are preliminary, in the sense that the COVID-19 pandemic is very recent and little is known about it. However, the accelerated production of knowledge on the subject made this systematization of information possible. All the effects highlighted in this study call attention to the profound changes in the routine of billions of people worldwide that directly affect the way people relate to their families. The knowledge of these effects can help psychologists, social workers, and health professionals to guide their practices in the most different areas, considering: (a) that the effects reported in this study resonate in areas other than psychology, such as education, social care, and psychiatry; and (b) that a large part of the population directly or indirectly affected by the COVID-19 pandemic will need support to address issues related to their mental health.

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