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**Depression in the COVID Era**

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**Depression in the COVID Era**

Chaos breeds chaos, meaning the COVID-19 pandemic has had a ripple effect creating a mental health pandemic.  The COVID-19 pandemic has created a need for people to change routines, adjust social schedules and reduce their budgets. Some have experienced the death of loved ones and estrangement of loved ones. Others have experienced devastating financial loss. Some are experiencing a great deal of anxiety due to confinement of quarantine. The social distancing requirements have created a need to learn how to communicate in new ways that do not involve face to face interaction.  This has created a new world to explore, and some have not adjusted or learned how to adapt.  These changes have lent themselves to the creation of a parallel pandemic of depression.

New tools need to be created and provided to navigate these new paths. There are roads that have never been traveled and depression prevalence is greater than before. Explorers are making their own claims of the best routes to the apex every day, and much has yet to be learned. What we do know is COVID-19 has created a new breed of depression that has claimed many lives of its own and mentally crippled multitudes.  More people are affected mentally due to the chaos of COVID-19 than those infected by the actual virus (Le at al., 2020). Help is needed.

**Importance and Scope of Topic**

The world has experienced a shutdown that is unprecedented.  Closures of restaurants, gyms, bars, schools, and other small businesses have created income loss that is immense.  One problem that has led to financial destruction is that much the world lives from paycheck to paycheck.  The ability to cope with the short-term effects of income loss was difficult, but now this pandemic is going into its second year.  Mechanisms for handling this, long-term will need to be creative, swift, and effective. Depression must be addressed in a virtual and accessible way.

The impact of mental health on the world should be at the forefront of healthcare provider concerns.  Suicide is the second leading cause of death for young people in the United States (Asarnow & Wang, 2016). With the COVID-19 pandemic, suicide and suicide attempts have increased. “Suicide rates had already reached a significantly high level before the COVID-19 pandemic, and during the pandemic, there has been a drastic increase in all the risk factors for suicide. A recent survey conducted by the Centers for disease control in June 2020 found that suicidal ideations were reported as two times higher in the previous 30 days than in the USA in 2018” (Le at al., 2020).  This illustrates the need for wide reaching assistance.

 One way to reach people suffering from depression is Telehealth. This will be a primary means of treating depression as face to face is not acceptable due to concern of contracting the virus by being out in public (Monteith et al., 2020).  Telephones grant access to those with a lack of computer skills but may not paint the whole picture for a provider (Fehily et al., 2020).  Our website has provided hotlines that can be distributed in rural areas and shared in public places.

**Literature Review**

King Library was the resource for many of the articles utilized in forming this website and this paper.  Peer reviewed articles within the last five years were the boundaries we set to find material.  As COVID-19 was the link to depression for this website, most of the articles were within the last two years. Older articles were used to compare rates from before the COVID-19 pandemic to current increases.  In order to gain information about phone applications and videos on YouTube, different search engines provided top ten choices by the masses.

**How the Website was Built**

The younger generation had a hand in creating this website.  As older students, the three of us were not experienced with developing a website.  The youngest of our creative helpers was 11 years old and very helpful in teaching how to add photographs to the pages.  During this venture it helped us to connect to a younger generation which showed that they are necessary to help this world to progress and connect to the new virtual scene. We humbled ourselves to learn and be taught by youth and this does lend itself to show them how they are valued.  Youth do not always get that acknowledgement from their elders. We changed this challenge to a win by connecting with the youth who we could learn from.  Connecting to a community who needs virtual mental health care and resources during the COVID-19 epidemic is the purpose of this website. Therefore, we used Google searches to find online hotlines from reputable providers.

The information put into this website was insightful and intriguing and helpful.  Depression in the COVID-19 era was the chosen topic as we believe it will impact generations for years to come.  As mental health care providers, we felt it was important to address ways to access reputable sources for help.  We know this will be dealt with in our practices. Building this website will help us with our own practices soon.  We want to make sure that the information put on this website calms fears instead of creating more fear (Valizadeh-Haghi et al., 2021).

It is necessary to provide the general population with ways to access help when there is little person to person interaction allowed.  There are free videos and phone applications that can be used to build coping mechanisms for those that are alone and stuck at home.  Learning how to get to those resources will help many people.  People do have to rely on their own personal motivation to want to look for the material.  The website we created will have sources that are available, and some are even used by the creators to ensure the accuracy of the information provided.

**Description of Website**

The website that has been created contains eight pages. There are five internal links and three external links. Each of these links is included in order to provide videos and additional resources.

The target audience is anyone negatively affected by COVID-19.  In particular, many rural people do not have the same resources as people in a larger city. Rural communities tend to be more isolated than those in larger cities and financial deficits may have isolated people who had resources prior to the pandemic (Riblet et al., 2020). Small towns must come together and be proactive with solutions and provide access to health care for those at risk. In addition to rural people, the elderly can also be dismissed as some do feel like depression is inevitable as we age (CDC, n.d.). This population will need education about how to access virtual help and communities can devise a plan to do so.

There needs to be safe places for people that do not have access to internet or are not comfortable with internet to receive help.  State and local agencies need to implement use of libraries and other available spaces for people to be granted the same access to care as those in an urban setting for treatment of mental or medical issues (Simon et al., 2021).

**Conclusion**

Per the National Institute of Mental Health, “Depression is treatable in 80 percent of the cases” (CDC, n.d.).  Finding ways to grant access to a vast number of people, in a big arena such as the internet, can be accomplished through different approaches.  Providing access to personal well-being websites in the privacy of the home will help some people who would not seek treatment otherwise.  Educating those who are suffering from depression by helping them to realize they are not alone in their struggles is a step toward healing. Providing information about inexpensive and free ways to maintain a more stable mindset can be invaluable.  COVID-19 has attempted to cripple this world and taken a toll in many ways.  Combatting the bad effects with good information and resources is imperative.  The goal is to provide information to those who are struggling or know someone who needs help.  The website was a collaboration of generations and great minds that will be the future faces of mental health promotion. Resources were used based on their dates, relevance, and credibility. Through the many challenges of learning to build a website, we feel that the overall project is a win for our group. The number of web pages reflects the vast amount of content available. The goal was to narrow this information and apply it to an easily accessible site for the target audience. Links were added to help readers find quick access to online resources and telephone numbers for direct help. The intent is to be an easily accessible beacon for those in need.

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