**Meditation and Wellbeing during COVID-19: A Review of Literature**

Siddharth Garg

Department of Psychology

Jamia Millia Islamia, New Delhi, 110025

**Abstract**

Early 2020 brought an uninvited visitor - *COVID – 19* - which has significantly impacted everyday life and changed the socio-politico-economic reality forever. In these times of extreme duress, meditation may prove to be an invaluable tool in maintaining individual wellbeing. But, there is a dearth of work reviewing the potential of meditation as a stress-management tool in the current crisis. Thus, the aim of this paper is to review literature pertaining to the efficacy of meditation for promoting wellbeing in these trying times. Examination of published literature suggests some evidence for the effectiveness of mindfulness meditation among Indians, and multiple recommendations for a telemedicine or digital medicine model which could be applied to a group of individuals covering psychiatric in-patients and those quarantined at home. These findings are synthesized, and recommendations are given for designing mindfulness based interventions to both policy makers and health care professionals.

**Keywords**

Meditation - Wellbeing - COVID-19

**Introduction**

Early 2020 spelled doom for mankind, with the novel coronavirus or “COVID-19” bringing the entire world to its knees. Governments across the globe leaped into action, instituting social distancing and complete lockdowns. Though these steps may be effective to staunch the spread of this disease, they are having an undoubted effect on the public’s emotional and mental wellbeing (Galea, Merchant, & Lurie, 2020). According to an article in the Times of India, there has been a noticeable increase in the anxiety and distress experienced by the common people (Krishnaswami, 2020). This has been verified by a recent empirical study, which found about 32% of respondents sampled from across 64 different cities in India experienced some level of psychological distress (Varshney, Parel, Raizada, & Sarin, 2020). Moreover, social distancing and lockdown may isolate people from much needed social support (Jiloha, 2020). In response to the global effect on mental health due to the current crisis, organizations such as the World Health Organization and Mental Health UK have issued psychological first aid guidance and resources for the public (World Health Organization; Mental Health UK). The Indian public is also in need of similar guidance and resources, and while many organizations are working to towards that aim – they may not be taking advantage of the best techniques for managing psychosocial wellbeing in the current context, due to lack of literature for such a contingency prior to the disease’s outbreak (Galea, Merchant, & Lurie, 2020).

**Meditation and Wellbeing during COVID-19**

The aim of this paper is to review current research on one such technique for managing psychosocial wellbeing – meditation and how it can be best applied to help the masses. Meditation is the ancient practice of focusing on an object or concept, instilling calm and composure. It is considered to be one of the most well researched and widely used psychotherapeutic techniques (Walsh & Shapiro, 2006), making it an apt choice for psychosocial interventions in these trying times. A wealth of research has shown meditation to significantly improve symptoms of depression, anxiety & pain (Vollestad, Nielsen, & Nielsen, 2012; Goyal, et al., 2014), attention (Jha, Krompinger, & Baime, 2007), working memory (Jha, Stanley, Kiyonaga, Wong, & Gelfand, 2010), cognition (Fox, et al., 2014), and compassion (Condon, et al., 2013). But *is meditation effective in the current socio-politico-economic context?*

Let us answer that question through a review of recent evidence. My first line of argument comes from a series of recommendations given by experts in favor of meditation as a low-cost high-impact tool for alleviating distress during this pandemic among both the public and health care professionals (Behan, 2020; Hiremath, Kowshik, Manjunath, & Shettar, 2020; Chong, Kagetsu, Yen, & Cooke, 2020; Sharma, Verma, & Chandra, 2020; Maniuk, et al., 2020; Ho, Chee, & Ho, 2020; Pimple & Agrawal, 2020; Alschuler, et al.). This is supported by a two-week online mindfulness meditation based intervention aimed at reducing anxiety, depression and stress from COVID-19 and the subsequent lockdown (Khandelwal, 2020). 25 participants from the Indian population were recruited via random sampling and administered psychometric tests before & after the intervention. Statistical analysis revealed significant improvement across all three criteria: anxiety, depression and stress (p < .05). Follow-up interviews to identify the phenomenological processes behind the success of the intervention revealed that stress & loneliness caused by the pandemic, coupled with man’s natural inclination towards spirituality motivated participants to complete the intervention. The development of insight, leading to greater self-awareness and social cohesion through the intervention emerged as the contributors for it’s success. Though Khandelwal’s (2005) study is difficult to generalize in terms of sample size, if examined in tandem with the previously mentioned expert opinions and past literature; it becomes clear that mindfulness meditation has the potential to be an effective treatment modality for the Indian population.

Meditation based interventions are also instrumental in providing the treatment and recovery of patients with COVID-19: significant psychological distress makes treatment of COVID-19 more difficult by impairing immune system (Black & Slavich, 2016), and research has shown patients with previous Severe Accute Respiratory Syndrome infections to exhibit symptoms of Post Traumatic Stress Disorder even after 10 years post recovery (Xiang, Yu, Ungvari, Correll, & Chiu, 2014)! Aside from improving mental health, meditation can directly improve the body’s resilience to invading COVID-19 pathogens, suggesting that adjunct therapies utilizing a combination of allopathic and Eastern healing approaches might lead to better clinical outcomes (Bushell, et al., 2020). Bushell and their colleagues (2020) advanced a scientific model of health that links meditation and yoga with reduced stress, inflammation and chances of infection (Bushell & Theise, 2009). Research shows COVID-19 causes an exaggerated inflammatory response which damages the body much more than the virus itself could hope to on it’s own (Mehta, et al., 2020). This in turn can be managed through meditation and yoga (Bower & Irwin, 2016), for e.g. a study showed practicing 20 minutes of mindfulness meditation everyday for 6 weeks lead to significant improvement in the body’s management of inflammatory responses and better prognosis for SARS-CoV 2 (Bower, et al., 2015). Meditation and yoga also increase the production of melatonin; which has a wide array of anti-inflammatory, antioxidant and anti-infective properties (Bushell, 2008). Currently, melatonin is being explored as a potential treatment for COVID-19 (Zhou, et al., 2020; Zhang, et al., 2020), and if successful meditation will become a vital treatment modality.

Another concern with COVID-19 is the threat it poses to the elderly. The elderly have been highlighted as a population at high risk from COVID-19 due to (i) pre-existing comorbidities with non-communicable diseases (Gong, Yu, Yi, Wang, & Tuo, 2018), and (ii) age related immune system suppression (Mohanty, Sharma, & Sharma, 2020). The COVID-19 induced social distancing and lockdown may lead this already vulnerable population to feel distressed and isolated. In light of this, Mohanty, Sharma, & Sharma (2020) argue for yoga, yoga with meditational components and meditative movement exercises (e.g. tai chi) as an effective set of approaches for improving physical and mental wellbeing among the geriatry.

A major advantage meditation has over the more conventional somatoform therapy, is the “exemption of physical contact”. Since meditation can be provided through a telemedicine or digital approach, it is a viable, universally accessible, and cost efficient treatment during lockdown. In the context of meditation based interventions, a telemedicine based model, say a counselor providing guided meditation to a client via Skype is not necessary, as there are an abundance of digital resources (audio and video clips) and mobile based applications that can provide the same, minus the cost of the counselor. Unlike psychiatric medication, meditation does not pose any harmful effects, and tentative evidence suggests that a mobile based application can alleviate anxiety, stress and improve wellbeing (Bostock, Crosswell, Prather, & Steptoe, 2019). Specifically, the popular mobile based application “Headspace” has been recommended for practicing meditation by two independent reviews (Mani, Kavanagh, Hides, & Stoyanov, 2015; Roquet & Sas, 2018). If such mobile based applications are indeed employed, they should preferably use both extrinsic and intrinsic processes, provide facile “meditation education”, and utilize both mind (e.g. visualization) and body (e.g. breathing techniques) to be effective (Roquet & Sas, 2018; Yanyu, et al., 2020).

Furthermore, a current analysis of the COVID-19 situation in Indian states reveals Maharashtra and Gujarat are desperately in need for psychosocial intervention based on the number of confirmed cases (Sharma, Verma, & Chandra, 2020). The same analysis also argues that even ten minutes of meditation can buffer stress among health care professionals, based on empirical research (Seppala, Hutcherson, Nguyen, Doty, & Gross, 2014).

**Conclusion**

Thus, policy makers and health care professionals should focus on either developing mobile application-based platforms or integrate already existing mobile based apps (like Headspace) with an emphasis on mindfulness meditation, and roll them out first in Indian states with a high number of confirmed cases to alleviate public distress. Having a digital intervention would enable universal accessibility to both psychiatric in-patients and those under lockdown. Health care professionals should themselves make use of such platforms, and students (both school and college) would also benefit from the cognition enhancing effects of meditation (Jha, Krompinger, & Baime, 2007; Jha, Stanley, Kiyonaga, Wong, & Gelfand, 2010; Fox, et al., 2014). Coupled with yoga or walking, meditation can improve both physical and mental wellbeing among the geriatric (Mohanty, Sharma, & Sharma, 2020). Meditation also strengthens the immune system by managing inflammatory responses to pathogens, thus having the added benefit of improving resistance to COVID-19 infection.

Hence, meditation can prove to be an effective instrument in combating the “coronapanic” during the current pandemic.

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