

Opinion

Copyright © All rights are reserved by Sharon Fernandez

Adversity: A Trend in Human Relationships Requiring Intervention

Sharon Fernandez*

School of Divinity, Regent University, USA

*Corresponding author: Sharon Fernandez, Adjunct Faculty, School of Divinity, Regent University, Virginia Beach, VA, USA.

Received Date: February 10, 2022

Published Date: March 18, 2022

Abstract

COVID-19 delivered a global mental health impact of disastrous magnitude leaving everyone vulnerable to psychiatric breakdowns. The term adversity is defined in this conversation as volatile, sometimes, diabolical attitudes and behavior patterns meant to impede the positive progress of others and/ or cause their suffering. This article explores the trend of emotional adversity surging in our society and pervading social, domestic, and professional relationships. Recent media reports portray a disastrous pattern of impaired emotions and behaviors resulting in grievous outcomes for schools, homes, businesses, and churches. Normal daily routines of attending school, work, social and spiritual activities exposed many individuals to high-risk crisis environments due to the prevalence of emotional adversity and the counterintuitive responses to it. This article attempts to foster awareness and active public dialog about adequate public psychiatric-mental health interventions and preventative mechanisms to defuse the fierce trend of hostile emotions toxifying our family, work, and social environments. Lastly, the article seeks to contribute to academic conversations promoting closer collaboration between mental health, medical, academic, and spiritual communities to facilitate greater mental health recovery.

Keywords: Emotional adversity; Volatile; Trend; Psychiatric break; Counterintuitive; Toxifies; Interventions

Introduction

Emotional adversity is defined as the pervasive pattern of volatile and diabolical behavior surging in our nation and globally since the arrival of COVID crisis. Distress, anger, anxiety, and conflict are common reactions to crisis and may resolve independent of intervention. However, when internal stress responses to crisis experiences are prolonged normal human functioning becomes impaired and dangerous or life-threatening behavior can develop. North America has experienced periods of public wide psychological darkness in which suicide, civil unrest, violence, racial tensions, and government corruption surged as in the Great Depression, World War I and II, the Chicago Race Riots, and the 9/11 terrorist attacks to identify a few. The pandemic era encapsulates more severe patterns of emotional disturbances that eclipse the previous period. The death of George Floyd in June 2020 exemplifies this nation catapulting into a raging storm of emotional adversity toxifying our society as evidenced in the weeks of violent

protests, bloodshed, and destruction of property that followed this event.

Media stories continue to reflect the depths of emotional lethality plaguing family, work, social, political, and spiritual environments. In recent weeks, a 13-year-old Texas teen, plagued by a history of mental health problems, killed his mother with a dumbbell and butcher knife. A Tennessee man, with no known history of misconduct fatally shot his girlfriend and killed their two-month-old infant by throwing the baby into a river. In Minnesota, a person yet to be identified and captured, killed a 15-year-old student outside of an education center. A high-profile celebrity jumped to her death from a building in New York. A Texas Jewish synagogue and over ten statewide Historically Black Colleges and Universities (HBCUs) suffered from hate crimes, reinforcing the racial, cultural, social, tensions plaguing this nation and countries across the globe. Religious communities reflected their own

struggle managing emotional adversity as social and news media exposed church leaders in divisive roles organizing protests against political officials. The significance is that most, religious faith models reinforce the sanctity of governing authority as such structure is the basis for a well-functioning society. Additionally, spiritual intervention is one of the most desired mental health resolutions during times of public crises.

Discussion

This article draws attention to pandemic-induced emotional lethality that toxifies normal civil human interactions. Mental and psychiatric health communities shouldered responsibility for defusing emotional disturbances and protecting the public from harmful behavior triggered by mental health problems. Public Health Services report high psychological costs among such professions. Brief exposure with any form of news or social media reflects that public wide response to the pandemic trauma is counter intuitive [1]. The public maladaptive response to emotional adversity culminates in systematic uncivility, racism, xenophobia, social inequity, and political divisiveness. Psychiatric, mental, and medical care providers and first responder professions record higher rates of suicide, violence, substance and alcohol abuse, and unscrupulous enforcement practices post pandemic era. Spiritual leaders also reflect higher rates of misconduct amid this crisis reinforcing the argument of counter-intuitive coping systems to reduce emotional adversity. What then remains to increase recognition of this problem and galvanized to reduce the emotional disturbance steadily escalating the psychological costs for our families, neighbors, colleagues, and future generations? A reorientation of our nation's moral compass toward traditional values of hope, faith, and love [2,3].

Conclusion

The Pandemic awakened an era of emotional adversity that continues to surge and dismantle healthy social, emotional,

behavioral, and spiritual functioning. This article intended to illustrate the need for intervention for worsening human relations due to counter-intuitive responses not limited to compassion burnout, police brutality, racism, xenophobia, and social inequity. Failure to conquer such crisis-induced reactions threatens permanent toxicity in family, education, occupation, and religious environments. The psychological community must take the lead towards reorienting our nations' moral compass toward hope, love, and patience [4,5].

Acknowledgement

Author acknowledges the listed faculty members for providing feedback that contributed to the quality of this article.

James T. Flynn, D.Min. Associate Professor, Director, Doctor of Ministry Program, Associate and Dean of Instruction & Operations, Regent University School of Divinity, Regent University, Virginia Beach, VA, USA.

Beverly M. Green, M.Ed., Professional School Counselor, Grand Prairie Independent School District, Grand Prairie, TX, USA.

Conflict of Interest

Author declares no conflict of interest.

References

1. Bray Bethany (2021) There is nothing small about trauma. *Counseling Today* Volume 64(Issue 1): 25-31.
2. Goddard AF, Patel M (2021) The changing face of medical professionalism and the impact of COVID-19. *Lancet* 397(10278): 950-952.
3. The Lancet (2021) Medical professionalism and physician wellbeing. *Lancet* 398(10303): 817.
4. Roberts Albert R (2005) *Crisis Intervention Handbook*. Oxford University Press, Oxford, New York, USA, pp. 3-14.
5. Anderson N, Dunagan Judy B, Felix Juni, Payne Carl (2022) *Spiritual Warfare Worldview*. Spiritual Warfare Conference, USA.