Stress and Anxiety among people with spiritist engagement: a cross-sectional analysis before and during COVID-19

Estresse e Ansiedade em pessoas com engajamento espírita: uma análise transversal antes e durante a COVID-19

Estrés y Ansiedad en personas con compromiso espírita: un análisis transversal antes y durante el COVID-19

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Abstract
Prevalence of stress and anxiety in people with some Level of Spiritist Engagement (LSE) before and during the pandemic. A cross-sectional study with 848 people with LSE in Ceará/Brazil. Findings were significant on the severe stress and anxiety of young adults (15,0% and 15,9%, respectively), in marital crisis (17,1% and 15,9%), who were affected very/completely by social confinement (14,8% and 16,7%), who suffered violence (15,5% and 16,9%), who self-inflicted violence (29,4% and 35,3%), whose self-perception of the emotional health was bad/awful (35,7% and 33,9%), and that used 3 or more psychiatric drugs a day before (22,9% and 28,6%) and during the pandemic (31,6% for stress and anxiety). Severe stress and anxiety were more associated to low and very low LES before and during COVID-19. Spiritism reinforces itself as a religion of psychological quest and a higher LES seems to be connected to less severe anxiety and stress levels.
Keywords: Spiritism; Stress; Anxiety; COVID-19.

Resumo
Prevalência de estresse e ansiedade em pessoas com algum nível de engajamento espírita (NEE) antes e durante a pandemia. Um estudo transversal com 848 pessoas com NEE no Ceará/Brasil. Os resultados foram significativos para estresse e ansiedade grave em jovens adultos (15,0% e 15,9%, respectivamente), em crise conjugal (17,1% e 15,9%), que foram afetados de forma muito/completamente confinados socialmente (14,8% e 16,7%), que sofreram violência (15,5% e 16,9%), que se autoinfligiram violência (29,4% e 35,3%), cuja autopercepção da saúde emocional era ruim/péssima (35,7% e 33,9%), e que utilizavam três ou mais medicamentos psiquiátricos por dia antes (22,9% e 28,6%) e durante a pandemia (31,6% para estresse e ansiedade). O estresse e a ansiedade grave estavam mais associados a baixo e muito baixo NEE antes e durante a COVID-19. O espiritismo se reafirma como uma religião de busca psicológica e um maior NEE parece estar relacionado a níveis menos graves de ansiedade e estresse.
Palavras-chave: Espiritismo; Estresse; Ansiedade; COVID-19.

Resumen
Prevalencia de estrés y ansiedad en personas con algún nivel de compromiso espírita (NCE) antes y durante la pandemia. Un estudio transversal con 848 personas con NCE en Ceará/Brasil. Los resultados fueron significativos para estrés y ansiedad graves en adultos jóvenes (15,0% y 15,9%, respectivamente), en crisis conyugal (17,1% y 15,9%), que se vieron afectados de manera muy/completamente confinada socialmente (14,8% y 16,7%), que sufrieron violencia (15,5% y 16,9%), que se autoinfligieron violencia (29,4% y 35,3%), cuya autopercepción de la salud emocional era mala/pésima (35,7% y 33,9%), y que utilizaban tres o más medicamentos psiquiátricos al día antes (22,9% y 28,6%) y durante la pandemia (31,6% para estrés y ansiedad). El estrés y la ansiedad grave estaban más asociados con un bajo y muy bajo NCE antes y durante la COVID-19. El espiritismo se reafirma como una religión de búsqueda psicológica y un mayor NCE parece estar relacionado con niveles menos graves de ansiedad y estrés.
Palabras clave: Espiritismo; Estrés; Ansiedad; COVID-19.

1. Introduction

Stress is a wider and complex concept related to mental suffering, linked to a neuropsychological tension or worn-out, started by a real or unreal stressor causing some level of psychic disturbance (Filgueiras & Hippert, 1999). Stress is not a specific mental disorder, instead, is an unspecific weakness of mental health. However, it can be strictly connected with emotional illnesses (McEwen & Akil, 2020), with depression (Andretta et al., 2018), and contributes for the increasing of general disability (Antunes et al., 2018), work impediment and unemployment (Helgesson et al., 2018), and might raise the use of alcohol (Olfson, Blanco, Wall, Liu, & Grant, 2019), and relates mainly to anxiety (Daviu et al., 2019; Ellis & Del Giudice, 2019).

Intense and frequent anxiety symptoms trigger anxiety disorders, which correspond to the highest and most prevalent group of mental disorders (Craske et al., 2017), that are one of the main causes of functional limitation (Craske et al., 2017) and that display the highest prevalence of comorbidities of psychiatric disorders and are associated, e.g., to stress (Daviu et al., 2019). Among the anxiety disorders, the Generalized Anxiety Disorder (GAD) is the most common and hits up to 20% of the American adult population each year (Munir & Takov, 2020). A cross-sectional study in Brazil, with almost 2000 people, aged between 18 and 35 yrs., showed that the prevalence of anxiety disorders was 27,4%, and was higher in women (32,5%) (Costa et al., 2019).

The high prevalence and losses related to stress and anxiety often oppose an ineffective mental health assistance, which promotes a collective search for non-medical care (Gomide & Moreira-Almeida, 2022). Spirituality and the healthy religious practice were mentioned as promoting mental wellbeing in numerous investigations, since the oldest (Gordon W. Allport, 1950; G. W. Allport & Ross, 1967; Larson et al., 1998; Pargament, Koenig, & Perez, 2000), to the most recent (Bazley et al., 2019; Lace, Evans, Merz, & Handal, 2020; Paul Victor & Treschuk, 2020). Likewise, religious and spiritual practices are sought and used by societies worldwide as a health resource (Flores et al., 2020), because of faith, community support, the given self-care or due to private matters (Peres et al., 2018; Vitorino et al., 2018). Recently, spiritual care was evidenced as an important health resource during COVID-19 (Tavares, 2020).

Spiritism exists in Brazil among the spiritual and /or religious beliefs that tend to psychological assistance. Kardec, who developed the spiritist doctrine in the XIX century, mentioned that Spiritism has a therapeutic tendency in all its activities, because it gathers efforts towards mental changes through a rationale education work according to the Christian principles (Kardec, 2004). People in psychic suffering created the culture of searching for spiritist assistance even if not belonging to Spiritism, and this shaped it as a 'religion of psychological quest' (Dalgalarrondo, 2007). However, Spiritism has been receiving little attention from the researchers of the psychic field.

As spiritism attracts people with psychic suffering, it is possible that the prevalence of common mental disorders is higher in people involved with spiritism. But this prevalence and the profile of these people are unknown. Consequently, this paper analysed stress and anxiety among people with some Level of Spiritism Engagement (LSE), before and during COVID-19. In this way, the understanding of the relationship between mental health and spiritism can be improved.

2. Methodology

This cross-s/ectional research collected online data about sociodemographic profile, psychic status, psychic assistance and LSE and used (SurveyMonkey®) software and snowball technique. The sample encompassed 848 people aged 18 or over and inhabitants of the state of Ceará / Brazil with some LSE, throughout the year 2021, during and after the second wave of COVID-19. People with no involvement with spiritism were also included, but did not participate in the LSE questions. LSE corresponds to the theoretical identification and to the practice of Spiritism at different levels (very low, low, regular and

high/very high). Spiritism is not considered a religion by its followers, which allows people to get involved with spiritism and other religions at the same time (Kardec, 2004).

According to the last national census, the number of people that stated to follow the spiritist religion was nearly 2% (IBGE, 2010). The sample has not shown the people with some LSE (belonging or not to this religion) as well as the prevalence of stress and anxiety. Due to the unknown prevalence of the outcome, we supposed a 50% prevalence, the sample size was estimated with 95% power, with a 5% α.

Online data collection was chosen due to COVID-19 confinement (Chu et al., 2020), which closed temporarily public environments, including Spiritist temples (Both et al., 2021). This data collection model was advantageous because allowed the access to small samples in a wider community (Granovetter, 1976), but bias increased potentiated by the digital use (Grandcolas et al., 2003). Therefore, the snowball model and the different social platforms enabled to reduce bias. WhatsApp, Facebook and Instagram were chosen due to the intense social use.

Instagram and Facebook made available navigation pages to elucidate participation rules and the link to access data. WhatsApp worked as a gateway and as an information spreading portal. Researchers sent invitation to individuals and spiritist groups with a video with information about the study and links to access Facebook, Instagram and SurveyMonkey® software. The software created invitations to research, according to snowball model (Berg, 2004).

Three initial questions were asked, after accessing through the SurveyMonkey® link: a) Do you have some Spiritist Engagement? b) Did you recently contact people with this kind of engagement? c) Are you available to send these people an invitation? After receiving an affirmative answer to these questions, the Written Informed Consent was obtained and a questionnaire about sociodemographic data, psychic status, psychic assistance before and during the pandemic and about LSE before and during the pandemic was used. Also DASS-21 (the Depression Anxiety Stress Scale) (Antony et al., 1998; Lovibond & Lovibond, 1995) and MAST (Multi-Attitude Suicide Tendency Scale) (Aquino, 2009) were applied.

After data collection, data were downloaded to Excel® for Windows 2013 and exported to SPSS® version 23.0 (SPSS, Inc, USA). Descriptive analysis was conducted and the association analysis of DASS-21 and MAST (stress pattern, anxiety, depression and suicidal ideation) variables with questionnaire variables. The current investigation only used stress and anxiety data.

This investigation met the law n. 466/2012 of the National Health Council (NHC) for research with human beings and has been previously approved by the Committee of Ethics of the Federal University of Ceará, n. 2.237.838.

3. Results

Severe stress was significantly higher among people with spiritist engagement aged 18 to 34 yrs. (15,0%, p = 0,003) and singles (11,4%, p = 0,012). People aged between 35 to 54 yrs. presented a higher moderate stress (10,3%, p = 0,003) (Table 1).

Table 1 – Characterization of sociodemographic factors and the correlation with stress levels of people with Spiritist Engagement in the state of Ceará. Fortaleza/CE, 2023.

Stress Levels Sociodemographic factors	N	Mild		Moderate		Severe		p*Value
		n	%	n	%	n	%	
Gender	701	588	83,9	66	9,4	47	6,7	0,104
Female	506	415	82,0	53	10,5	38	7,5	
Male	195	173	88,7	13	6,7	9	4,6	
Age	701	588	83,9	66	9,4	47	6,7	0,003
Between 18 and 34 yrs.	107	81	75,7	10	9,3	16	15,0	
Between 35 and 54 yrs.	348	289	83,0	36	10,3	23	6,6	
55 or over	246	218	88,6	20	8,1	8	3,3	
Marital status	701	588	83,9	66	9,4	47	6,7	0,012
Married or in a stable relationship	409	354	86,6	39	9,5	16	3,9	
Single	175	139	79,4	16	9,1	20	11,4	
Widow/Widower/Divorced/ Separated	117	95	81,2	11	9,4	11	9,4	
Main familial income provider	666	560	84,1	62	9,3	44	6,6	1,000
No	303	255	84,2	28	9,2	20	6,6	
Yes	363	305	84,0	34	9,4	24	6,6	
Monthly familial income	701	588	83,9	66	9,4	47	6,7	-
R$ 0 to R$ 1.300	48	36	75,0	7	14,6	5	10,4	
R$ 1.301 to R$ 2.600	73	58	79,5	8	11,0	7	9,6	
R$ 2.601 to R$ 5.200	153	122	79,7	17	11,1	14	9,2	
R$ 5.201 to R$ 7.800	118	101	85,6	10	8,5	7	5,9	
R$ 7.801 to R$ 15.000	180	159	88,3	12	6,7	9	5,0	
Above R$ 15.000	129	112	86,8	12	9,3	5	3,9	

Legend: * Pearson's Qui-Square or Fisher's Exact Test. Source: Authors (2023).

Moderate and severe anxiety was meaningfully higher in female (16,2% and 9,3%, respectively, p < 0,001) and on those aged between 18 and 34 yrs. (17,8% and 15,9%, respectively, p = 0,014). Mild anxiety was found on the majority of people that reported to be the main source of the familial income (83,4%, p < 0,001). Severe anxiety was the most prevalent on those who reported not to be the main familial income providers (10,5%, p < 0,001) in opposition to those who were the main family providers (8,4%, p < 0,001). People with a monthly familial income between R$ 0 to 1.300 presented the highest prevalence of all (25,0%, p = 0,001) (Table 2).

Table 2 – Characterization of sociodemographic factors and the correlation with anxiety levels of people with Spiritist Engagement in the state of Ceará. Fortaleza/CE, 2023.

Anxiety Levels Sociodemographic factors	N	Mild		Moderate		Severe		p*Value
		n	%	n	%	n	%	
Gender	701	546	77,9	95	13,6	60	8,6	<0,001
Female	506	377	2,5	82	16,2	47	9,3	
Male	195	169	86,7	13	6,7	13	6,7	
Age	701	546	77,9	95	13,6	60	8,6	0,014
Between 18 and 34 yrs.	107	71	66,4	19	17,8	17	15,9	
Between 35 and 54 yrs.	348	272	78,2	49	14,1	27	7,8	
55 or over	246	203	82,5	27	11,0	16	6,5	
Marital status	701	546	77,9	95	13,6	60	8,6	0,112
Married or in a stable relationship	409	322	78,7	59	14,4	28	6,8	
Single	175	128	73,1	26	14,9	21	12,0	
Widow/Widower/Divorced/ Separated	117	96,0	82,1	10	8,5	11	9,4	
Main familial income provider	666	518	77,8	92	13,8	56	8,4	0,001
No	304	216	71,1	56	18,4	32	10,5	
Yes	362	302	83,4	36	9,9	56	8,4	

Monthly familial income	701	546	77,9	95	13,6	60	8,6	0,001
R$ 0 to R$ 1.300	48	28	58,3	8	16,7	12	25,0	
R$ 1.301 to R$ 2.600	73	51	69,9	14	19,2	8	11,0	
R$ 2.601 to R$ 5.200	153	115	75,2	23	15,0	15	9,8	
R$ 5.201 to R$ 7.800	118	93	78,8	15	12,7	10	8,5	
R$ 7.801 to R$ 15.000	180	151	83,9	21	11,7	8	4,4	
Above R$ 15.000	129	108	83,7	14	10,9	7	5,4	

Legend: * Pearson's Qui-Square or Fisher's Exact Test. Source: Authors (2022).

Unemployed showed severe stress ,11,3% (p <0,001), while moderate stress hit 16,6% (p <0,001). People with physical illness exhibited also severe stress (12,3%, p <0,001) and people in a marital crisis (17,1%, p <0,001). Regarding the persons who were very or completely affected by COVID-19 confinement, 14,8% (p <0,001) presented severe stress. People who suffered violence presented severe stress, 15,5% (p = 0,024), as well as 29,4% (p <0,001) of those who self-inflicted any kind of violence. The self-perception of the emotional health status was rated as bad or worse by 35,7% (p <0,001) of the persons with severe stress (Table 3).

Table 3 – Characterization of factors related to psychic status and the correlation with stress levels of people with Spiritist Engagement in the state of Ceará. Fortaleza/CE, 2023.

Stress Levels Factors related to psychic status	N	Mild		Moderate		Severe		p*Value
		n	%	n	%	n	%	
Factors	701	588	83,9	66	9,4	47	6,7	
Unemployment	204	145	71,1	36	17,6	23	11,3	0,000
Physical Illness	138	99	71,7	22	15,9	17	12,3	0,000
Relative Illness	250	190	76,0	33	13,2	27	10,8	0,000
Mourning	88	68	77,3	14	15,9	6	6,8	0,086
Marital Crisis	82	55	67,1	13	15,9	14	17,1	0,000
Alcohol or Smoking	35	20	57,1	7	20,0	8	22,9	-
Illicit Drugs	8	3	37,5	1	12,5	4	50,0	-
Suffered Violence	58	43	74,1	6	10,3	9	15,5	0,024
Committed Violence	15	8	53,3	2	13,3	5	33,3	-
Self-inflicted Violence	34	18	5209,0	6	17,6	10	29,4	0,000
Social confinement that affected emotional health	701	588	83,9	66	9,4	47	6,7	0,000
None	107	102	95,3	3	2,8	2	1,9	
A little	293	254	86,7	21	7,2	18	6,1	
Moderate	193	162	83,9	20	10,4	11	5,7	
Completely / Very	108	70	64,8	22	20,4	16	14,8	
Self-perception of Emotional Health	701	588	83,9	66	9,4	47	6,7	0,000
Good / Excellent	412	393	95,4	13	3,2	6	1,5	
Regular	233	172	73,8	40	17,2	21	9,0	
Bad /Awful	56	23	41,1	13	23,2	20	35,7	

Legend: * Pearson's Qui-Square or Fisher's Exact Test. Source: Authors (2022).

Unemployed exhibited severe anxiety 14,2% (p <0,001), and also 18,0% (p <0,001) of those with physical illness, 12,7% (p = 0,006) of people with a ill relative,10,3% (p = 0,017) of those in mourning ,15,9% (p <0,001) of those in a marital crisis and 37,5% (p <0,001) of illicit drug users. Regarding the persons who were very or completely affected by COVID-19 confinement, 16,7% (p <0,001) presented severe anxiety. 26,7% (p = 0,034) of the people who committed violence showed severe anxiety and 35,3% (p = 0,018) of those who self-inflicted violence. The self-perception of the emotional health status was rated as bad or worse by 33,9% (p <0,001) with severe anxiety (Table 4).

Table 4 – Characterization of factors related to psychic status and the correlation with anxiety levels of people with Spiritist Engagement in the state of Ceará. Fortaleza/CE, 2023.

Anxiety Levels / Factors related to psychic status	N	Mild		Moderate		Severe		p*Value
		n	%	n	%	n	%	
Factors	701	546	77,9	95	13,6	60	8,6	
Unemployment	204	136	66,7	39	19,1	29	14,2	0,000
Physical Illness	139	84	60,4	30	21,6	25	18,0	0,000
Relative Illness	251	181	72,1	38	15,1	32	12,7	0,006
Mourning	87	58	66,7	20	23,0	9	10,3	0,017
Marital Crisis	82	50	61,0	19	23,2	13	15,9	0,001
Alcohol or Smoking	35	18	51,4	7	20,0	10	28,6	0,000
Illicit Drugs	8	2	25,0	3	37,5	3	37,5	0,000
Suffered Violence	59	45	76,3	4	6,8	10	16,9	-
Committed Violence	15	7	46,7	4	26,7	4	26,7	0,034
Self-inflicted Violence	34	15	44,1	7	20,6	12	35,3	0,008
Social confinement that affected emotional health	701	546	77,9	95	13,6	60	8,6	0,000
None	107	98	91,6	5	4,7	4	3,7	
A little	294	235	79,9	33	11,2	26	8,8	
Moderate	192	145	75,5	35	18,2	12	6,3	
Completely / Very	108	68	63,0	22	20,4	18	16,7	
Self-perception of Emotional Health	701	546	77,9	95	13,6	60	8,6	0,000
Good / Excellent	411	371	90,3	29	7,1	11	2,7	
Regular	234	158	67,5	46	19,7	30	12,8	
Bad /Awful	56	17	30,4	20	35,7	19	33,9	

Legend: * Pearson's Qui-Square or Fisher's Exact Test. Source: Authors (2022).

Psychiatric assistance before COVID-19 has shown that severe stress was found in 12,8% (p <0,001) of the people who had a psychiatric follow-up, in 17% (p <0,001) of those diagnosed with some psychiatric disorder, 15,5% (p <0,001) used psychiatric drugs two or more times, 22,9% (p <0,001) used three or more psychiatric drugs daily and 7,1% (p = 0,013) used these drugs for non-psychiatric illness. Non-medical treatments before pandemic have shown that psychotherapeutic follow-up was associated to severe stress in 9,5% (p = 0,002) of the sample (Table 5).

Table 5 – Characterization of the factors related to psychic assistance before COVID- 19 and the correlation with stress levels of people with Spiritist Engagement in the state of Ceará. Fortaleza/CE, 2023.

Stress Levels / Factors related to psychic assistance	N	Mild		Moderate		Severe		p*Value
		n	%	n	%	n	%	
Psychiatry before the pandemic	701	588	83,9	66	9,4	47	6,7	
Psychiatric follow-up	172	123	71,5	27	15,7	22	12,8	0,000
Psychiatric Disorder	141	90	63,8	27	19,1	24	17,0	0,000
Psychiatric drugs for psychiatric disorder	680	575	84,6	62	9,1	43	6,3	0,000
Never	436	388	89,0	28	6,4	20	4,6	
Yes, once	141	120	85,1	14	9,9	7	5,0	
Yes, twice or more	103	67	65,0	20	19,4	16	15,5	
Different psychiatric drugs a day (quantity)	265	200	75,5	38	14,3	27	10,2	0,000
1	164	142	86,6	15	9,1	7	4,3	
2	66	38	57,6	16	24,2	12	18,2	
3 or more	35	20	57,1	7	20,0	8	22,9	
Psychiatric drugs for non-psychiatric illness	154	119	77,3	24	15,6	11	7,1	0,013
Non-medical treatments before the pandemic	701	588	83,9	66	9,4	47	6,7	
Psychotherapy	304	238	78,3	37	12,2	29	9,5	0,002
Integrative and Complementary Practices (ICPs)	264	215	81,4	31	11,7	18	6,8	0,256

Legend: * Pearson's Qui-Square or Fisher's Exact Test. Source: Authors (2022).

Data of psychiatric assistance and stress during COVID-19 exhibited severe stress in 15,2% (p <0,001) of the people who had been assisted with psychiatric follow-up in the current study and in 18,8% (p <0,001) of those persons diagnosed with psychiatric disorder. From people who were using psychiatric drugs for psychiatric disorder, 14,2% (p <0,001) presented severe stress and those who used two psychiatric drugs, 31,3% (p <0,001) exhibited moderate stress and 22,9% (p <0,001) severe stress. Those who used three or more psychiatric drugs, 26,3% (p <0,001) presented moderate stress and 31,6% (p <0,001) severe stress. Also, severe stress was less prevalent on people who used psychiatric drugs for non-psychiatric disorder (12,2%, p = 0,001) and on those that used herbal medicines (phytotherapy) (14,3%, p = 0,004). During pandemic, 12,1% (p = 0,002) of the persons undergoing active psychotherapy presented severe stress (Table 6).

Table 6 – Characterization of the factors related to psychic assistance during COVID- 19 and the correlation with stress levels of people with Spiritist Engagement in the state of Ceará. Fortaleza/CE, 2023.

Stress Levels Factors related to psychic assistance	N	Mild		Moderate		Severe		p*Value
		n	%	n	%	n	%	
Psychiatry during the pandemic	701	588	83,9	66	9,4	47	6,7	
Psychiatric follow-up	125	85	68,0	21	16,8	19	15,2	0,000
Psychiatric Disorder	96	56	58,3	22	22,9	18	18,8	0,000
Psychiatric drugs for psychiatric disorder	155	103	66,5	30	19,4	22	14,2	0,000
Different psychiatric drugs a day (quantity)	156	104	66,7	30	19,2	22	14,1	0,000
1	89	74	83,1	10	11,2	5	5,6	
2	48	22	45,8	15	31,3	11	22,9	
3 or more	19	8	42,1	5	26,3	6	31,6	
Psychiatric drugs for non-psychiatric illness	98	69	70,4	17	17,3	12	12,2	0,001
Phytotherapy	91	66	72,5	12	13,2	13	14,3	0,004
Non-medical treatments during pandemic	701	568	81,0	80	11,4	53	7,6	
Psychotherapy	174	132	75,9	21	12,1	21	12,1	0,002
Integrative and Complementary Practices (ICPs)	162	132	81,5	13	8,0	17	10,5	0,088

Legend: * Pearson's Qui-Square or Fisher's Exact Test. Source: Authors (2022).

Psychiatric assistance before COVID-19 has shown that severe anxiety was found in 16,3% of the people who had psychiatric follow up before the pandemic, 23,4% (p <0,001) who were diagnosed with some psychiatric disorder, 25,2% (p <0,001) used psychiatric drugs for psychiatric disorder two or more times, 28,6% (p <0,001) used three or more psychiatric drugs daily, and 11% (p = 0,013) used psychiatric drugs for non-psychiatric illness. Non-medical treatments before pandemic have shown that psychotherapeutic follow-up was associated to severe anxiety in 12,5% (p = 0,001) of the sample. 9,5% (p = 0,038) of the people who were treated with Integrative and Complementary Practices (ICPs) presented severe anxiety (Table 7).

Table 7 – Characterization of the factors related to psychic assistance before COVID- 19 and the correlation with anxiety levels of people with Spiritist Engagement in the state of Ceará. Fortaleza/CE, 2023.

Anxiety Levels Factors related to psychic assistance	N	Mild		Moderate		Severe		p*Value
		n	%	n	%	n	%	
Psychiatry before the pandemic	701	546	77,9	95	13,6	60	8,6	
Psychiatric follow-up	172	107	62,2	37	21,5	28	16,3	0,000
Psychiatric Disorder	141	76	53,9	32	22,7	33	23,4	0,000
Psychiatric drugs for psychiatric disorder	680	533	78,4	89	13,1	58	8,5	0,000
Never	436	368	84,4	47	10,8	21	4,8	
Yes, once	141	111	78,7	19	13,5	11	7,8	
Yes, twice or more	103	54	52,4	23	22,3	26	25,2	
Different psychiatric drugs a day (quantity)	265	178	67,2	48	18,1	39	14,7	0,000
1	164	127	77,4	23	14,0	14	8,5	
2	66	33	50,0	18	27,3	15	22,7	
3 or more	35	18	51,4	7	20,0	10	28,6	
Psychiatric drugs for non-psychiatric illness	154	104	67,5	33	21,4	17	11,0	0,002
Non-medical treatments before the pandemic	701	546	77,9	95	13,6	60	8,6	
Psychotherapy	303	218	71,9	47	15,5	38	12,5	0,001
Integrative and Complementary Practices (ICPs)	263	192	73,0	46	17,5	25	9,5	0,038

Legend: * Pearson's Qui-Square or Fisher's Exact Test. Source: Authors (2022).

During COVID-19, psychiatric assistance and anxiety have shown that severe anxiety was found in 19,2% (p <0,001) of the people with psychiatric follow-up and in 28,1% (p <0,001) of those diagnosed with some psychiatric disorder. Medication has shown that 20,6% (p <0,001) of the people that were using psychiatric drugs for psychiatric disorder presented severe anxiety with most of the users taking two psychiatric drugs presenting moderate or severe anxiety (31,3%, p = 0,009). Also, the users of three or more psychiatric drugs showed moderate and severe anxiety (31,6%, p = 0,009). The association of severe anxiety with the psychiatric drugs for non-psychiatric illness was observed in 18,4% (p <0,001) of the sample and with the use of phytotherapy 14,3% (p = 0,006) (Table 8).

Table 8 – Characterization of the factors related to psychic assistance during COVID- 19 and the correlation with anxiety levels of people with Spiritist Engagement in the state of Ceará. Fortaleza/CE, 2023.

Anxiety Levels Factors related to psychic assistance	N	Mild		Moderate		Severe		p*Value
		n	%	n	%	n	%	
Psychiatry during the pandemic	701	546	77,9	95	13,6	60	8,6	
Psychiatric follow-up	125	72	57,6	29	23,2	24	19,2	0,000
Psychiatric Disorder	96	46	47,9	23	24,0	27	28,1	0,000
Psychiatric drugs for psychiatric disorder	155	81	52,3	42	27,1	32	20,6	0,000
Different psychiatric drugs a day (quantity)	156	82	52,6	42	26,9	32	20,5	0,009
1	89	57	64,0	21	23,6	11	12,4	
2	48	18	37,5	15	31,3	15	31,3	
3 or more	19	7	36,8	6	31,6	6	31,6	
Psychiatric drugs for non-psychiatric illness	98	55	56,1	25	25,5	18	18,4	0,000
Phytotherapy	91	59	64,8	19	20,9	13	14,3	0,006
Non-medical treatments during pandemic	686	114	16,6	435	63,4	137	20,0	
Psychotherapy	174	126	72,4	28	16,1	20	11,5	0,114
Integrative and Complementary Practices (ICPs)	162	119	73,5	28	17,3	15	9,3	0,228

Legend: * Pearson's Qui-Square or Fisher's Exact Test. Source: Authors (2022).

Religious belief has highlighted the agnostics who presented severe stress (40,0%) and also the African-Derived religions (20,5%). Spiritists presented mild stress (83,1%). Those that liked Spiritism presented mild stress (85,5%). Mild stress

prevailed on people that did not like Spiritism (88,2%). Spiritism sympathizers presented more prevalence of severe stress (6,8%) in comparison to those who did not like it at all (3,9%). Concerning spiritist engagement, the lowest LSE was related to the most severe illness. Before the pandemic, the severe stress on very low and low LSE showed a higher prevalence (16,4% in total) if compared to high / very high LSE (4,4%). During the pandemic, the severe stress on very low and low (15,2% in total) in comparison to high / very high (7,5%) These parameters have presented no p < 0,05, which resulted in no significant data (Table 9).

Table 9 – Characterisation of factors related to religious belief and Level of Spiritist Engagement (LSE), before and during COVID-19 and the correlation with stress levels of people with Spiritist Engagement in the state of Ceará. Fortaleza/CE, 2023.

Stress Levels Factors related to religious belief and spiritist engagement	N	Mild		Moderate		Severe		p*Value
		n	%	n	%	n	%	
Religion (more than one answer accepted)	701	588	83,9	66	9,4	47	6,7	
Without religion	28	25	89,3	9	10,7	0	0,0	
Agnostic	10	5	50,0	1	10,0	4	40,0	
Catholic	161	133	82,6	18	11,2	10	6,2	0,681
Evangelist	31	27	87,1	3	9,7	1	3,2	
Spiritist	556	462	83,1	53	9,5	41	7,4	0,403
Africa-derived Religion	39	25	64,1	6	15,4	8	20,5	
Other	10	9	90,0	1	10,0	0	0,0	
Preference for Spiritism	701	588	83,9	66	9,4	47	6,7	
Did not like	51	45	88,2	4	7,8	2	3,9	
A little	55	49	89,1	3	5,5	3	5,5	
Moderate	52	38	73,1	9	17,3	5	9,6	
Liked	178	144	80,9	22	12,4	12	6,7	
Sympathizer	365	312	85,5	28	7,7	25	6,8	
LSE before COVID-19	650	543	83,5	62	9,5	45	6,9	0,704
Very low	121	97	80,2	13	10,7	11	9,1	
Low	233	191	82,0	25	10,7	17	7,3	
Regular	183	155	84,7	16	8,7	12	6,6	
High / Very high	113	100	88,5	8	7,1	5	4,4	
LSE during COVID-19	701	588	83,9	66	9,4	47	6,7	0,164
Very low	191	159	83,2	19	9,9	13	6,8	
Low	273	220	80,6	30	11,0	23	8,4	
Regular	157	138	87,9	14	8,9	5	3,2	
High / Very high	80	71	88,8	3	3,8	6	7,5	

Legend: * Pearson's Qui-Square or Fisher's Exact Test. Source: Authors (2022).

Religious belief has highlighted the agnostics who presented severe anxiety (30,0%) and also the African-Derived religions (15,4%). Spiritists presented mild anxiety (78,1%). Those that liked Spiritism presented mild anxiety (78,1%). Mild anxiety prevailed on people that did not like Spiritism (82,4%). Spiritism sympathizers presented more prevalence of severe anxiety (9,3%) in comparison to those who did not like it at all (3,9%). Concerning spiritist engagement, the lowest LSE was related to the most severe illness. Before the pandemic, severe anxiety was more prevalent on very low and low LSE (19,6% in total) if compared to high / very high (8,6%), as well as during COVID-19, with a very low and low LSE (17,6% in total) compared to high / very high (7,5%). With a p > 0,05 these data displayed a non-meaningful value (Table 10).

Table 10 – Characterisation of factors related to religious belief and Level of Spiritist Engagement (LSE), before and during COVID-19 and the correlation with anxiety levels of people with Spiritist Engagement in the state of Ceará. Fortaleza/CE, 2023.

| Anxiety Levels | | *Mild* | | *Moderate* | | *Severe* | | |
Factors related to religious belief and spiritist engagement	N	*n*	*%*	*n*	*%*	*n*	*%*	*p*Value*
Religion (more than one answer accepted)	701	546	77,9	95	13,6	60	8,6	
Without religion	27	22	81,5	4	14,8	1	3,7	
Agnostic	10	3	30,0	4	40,0	3	30,0	
Catholic	160	128	80,0	21	13,1	11	6,9	0,705
Evangelist	30	21	70,0	8	26,7	1	3,3	
Spiritist	556	434	78,1	71	12,8	51	9,2	0,318
Africa-derived Religion	39	28	71,8	5	12,8	6	15,4	0,277
Other	10	9	90,0	0	0,0	1	10,0	
Preference for Spiritism	701	546	77,9	95	13,6	60	8,6	
Did not like	51	42	82,4	7	13,7	2	3,9	
A little	54	42	77,8	9	16,7	3	5,6	
Moderate	52	37	71,2	11	21,2	4	7,7	
Liked	179	140	78,2	22	12,3	17	9,5	
Sympathizer	365	285	78,1	46	12,6	34	9,3	
LSE before COVID-19	650	504	77,5	88	13,5	58	8,9	0,810
Very low	121	92	76,0	20	16,5	9	7,4	
Low	233	176	75,5	33	14,2	24	10,3	
Regular	183	144	78,7	22	12,0	17	9,3	
High / Very high	113	92	81,4	13	11,5	8	7,1	
LSE during COVID-19	701	546	77,9	95	13,6	60	8,6	0,607
Very low	190	145	76,3	31	16,3	14	7,4	
Low	274	208	75,9	38	13,9	28	10,2	
Regular	157	126	80,3	19	12,1	12	7,6	
High / Very high	80	67	83,8	7	8,8	6	7,5	

Legend: * Pearson's Qui-Square or Fisher's Exact Test. Source: Authors (2022).

4. Discussion

Moderate stress was related to young adults and severe to the youngest single adults. Young adult women were the most affected by anxiety and low-income individuals exhibited the highest anxiety levels. A meta-analysis with 192 countries demonstrated that conditions associated to stress caused that 43% of cases start before 25 years of age. Regarding anxiety ,73% start before 25, which corroborates this higher prevalence in the young population (Solmi et al., 2022). The Programme of the Anxiety of the Faculty of Medicine of the University of São Paulo conducted a national research on the sociodemographic profile on gender and civil status with 80% of female patients and 53,7% single or divorced (Hemanny et al., 2020).

During COVID-19, another national investigation used DASS-21 on the workers mainly with higher education (92%).The most affected with higher levels of anxiety were females and singles, and among the latter , regardless of gender, 68,8% presented higher anxiety (Guilland et al., 2021).The low income was linked to anxiety and poverty has already been linked to the highest risk of mental illness worldwide (Marbin et al., 2022). The low income population, in Brazil, displays 2 to 5 times higher risks of anxiety disorders when compared to high income population, with the poorest Brazilians holding the highest risk of taking psychoactive substances, besides anxiety (Barros et al., 2018).

Psychic status, unemployment, personal or familial illness, mourning and social isolation were connected to moderate stress, whereas moderate anxiety was associated to physical illness, unemployment, mourning and social isolation. On the other hand, physical illness and marital crisis were linked to severe stress. According to these data, stress and anxiety were identified as negative psychological repercussions caused by the pandemic (dos Santos & dos Santos Rodrigues, 2020). During pandemic,

an American and a Canadian sample of over more than 6000 people showed that 16% presented a higher level of stress connected to COVID-19, in a five- class division, which demonstrated a possible need of professional assistance (Taylor et al., 2020). Also, marital crisis might raise the stress due to the increasing of basal cortisol, an hormone related to body stress (Bierstetel & Slatcher, 2020).

Severe stress was associated to self-perception of bad or worse mental health and to suffered or self-inflicted violence, which is in line with the evidence of systematic reviews during the pandemic, that showed the mounting of interpersonal domestic violence (Bazyar et al., 2021), self-mutilation and suicidal behaviour (John et al., 2020). The use of illicit drugs committed or self-inflicted violence, bad or worse mental health self-perception were associated to mild and moderate anxiety. The use of alcohol, smoking and illicit drugs due to the easy access was connected to severe anxiety, in agreement with the mounting of smoking (Patwardhan, 2020) and alcohol consumption (Calina et al., 2021) to deal with anxiety during the pandemic. Self-inflicted and inflicted violence also related to a high level of anxiety (Bazyar et al., 2021; John et al., 2020).

A recent meta-analysis about sensitivity on anxiety and the relation with suicide, which is a self-inflicted violence aspect, a sample with more than 14.000 participants has shown a significant association of anxiety with suicidal ideation (CI 95% [0,13 – 0,24]) and with suicide risk (CI 95% [0,22 – 0,32]) (Stanley et al., 2018). Inpatients in a Ceará's trauma hospital, victims of interpersonal violence, presented a high prevalence of anxiety and depression, 31% and 29%, respectively (Peixoto et al., 2019).

Before COVID-19 the psychiatric assistance has shown that moderate stress and anxiety were associated to psychiatric diagnosis and follow-up, to the use of 2 psychiatric medicines for a psychic disorder and to psychiatric medication for non-psychiatric illness. This availability of assistance and psychiatric treatment, even for moderate stress and anxiety, might be associated to a higher literacy and socioeconomic status, which allowed the access to private health care, as the city of Fortaleza has no mental health assistance on primary care (23%) and has a scarce medicine prescription (31%), when compared to Porto Alegre, São Paulo and Campinas (68%, 64% and 39%, respectively) (Amaral et al., 2021). Severe anxiety in relation to moderate only differed due to a higher use of psychiatric drugs on psychic disorder, with the use of three or more, which is in opposition to the short supply rate (58%) of Fortaleza's primary care, the highest among these cities (Amaral et al., 2021).

During pandemic, psychiatric assistance evidenced that moderate stress was associated to professional diagnosis and follow-up, to the use of 2 psychiatric drugs for psychiatric disorder and to psychiatric drugs for non-psychiatric illness. Moderate anxiety was connected to ongoing psychiatric follow-up caused by the pandemic and to the use of 2 psychiatric drugs for psychiatric disorder. Economic power might have been relevant to ensure psychiatric assistance and treatment during the pandemic that affected the structure, organization, and the professionals of the mental health national service worldwide (Gourret Baumgart et al., 2021). In the United States, the prescription of new treatments with psychiatric drugs decreased 7,5%-(antidepressants), 5,6% (anxiolytics) and 2,6% (antipsychotics) when comparing to pre COVID-19 (Nason et al., 2021).

Severe stress was related to the psychiatric follow-up due to COVID-19, the use of three or more psychiatric drugs for psychiatric disorder, and a more regular use of phytotherapy. Severe anxiety was linked to the psychiatric diagnosis caused by the pandemic. The association between severe stress and anxiety with psychiatric follow-up and diagnosis caused by COVID-19 met the increase of anxiety symptoms (6,3% to 50,9%) and stress symptoms (8,1% to 81,9%) demonstrated by a systematic-review of a population of eight countries in 2020 (Xiong et al., 2020). This was reinforced by the high prevalence rate of anxiety disorders (15,15%) and stress disorders (21,94%) evidenced by a systematic-review and meta-analysis with more than 2000 papers, in 2021 (Cénat et al., 2021). Similarly, an integrative review has shown the mounting of medicine use for anxiety and depression during the pandemic, with benzodiazepines, as clonazepam, and the selective serotonin reuptake inhibitors, as sertraline (Lopes et al., 2022). The raise of psychiatric drugs intake during the pandemic reinforces the possibility the sample had a better access to medication due to a higher income in relation to general population.

Non-medical assistance has shown that severe stress and anxiety were associated to a low practice of psychotherapy, before and during the pandemic, whereas the low adherence to ICPs was correlated to severe stress during the pandemic. Higher levels of stress and anxiety related to a lower adherence to psychological assistance and to ICPs suggest how important is this assistance as a promoting factor of mental health, mainly in times of illness, like the pandemic (Schmidt et al., 2020). Psychological interventions are relevant to assist death and mourning (Crepaldi et al., 2020), and when there are none, even with on-line assistance (Evangelista & Cardoso, 2020), individual and collective psychic illness might occur often. On the other hand, ICPs might increase relaxation, decrease anxiety and stress and improve mood (Mangione et al., 2017). When they fail, mental health resources decrease.

Although insignificant, a lower stress index was seen between spiritists and evangelists in relation to the other religions. Mild stress and anxiety were most prevalent, regardless of LSE, which consolidates the high pattern of illness and the Spiritism profile as a religion of psychological quest (Dalgalarrondo, 2007). Moderate and severe stress and anxiety were linked to a low LSE when compared to the high and very high, before and during COVID-19.

Scarce research is available about Spiritism and the relation with stress and anxiety. However, some studies have shown positive results of spiritist intervention. A national prospective randomized controlled trial has shown that the spiritist "passe" (spiritist healing touch) was able to reduce anxiety criteria on 63% in the intervention group, while the control group presented a 17% reduction (de Souza Cavalcante et al., 2016). A double-blinded randomized controlled trial with cardiovascular inpatients tested 3 groups of patients and showed a significant reduction ($p = 0,001$) on anxiety and muscle tension in the intervention group that received the spiritist "passe" when compared to the other groups, that received hand touch with healing intention and to the control group (Carneiro et al., 2017). A more recent investigation used this research method in pre-surgery anxiety in patients undergoing surgery and has exhibited that the intervention group patients with spiritist "passe" presented a higher reduction on anxiety ($p < 0,05$) and muscle tension ($p < 0,01$), increase of wellbeing ($p < 0,01$) when compared to the other 2 groups: hand touch with healing intention and control group (Carneiro et al., 2020).

The Complementary Spiritist Therapy that comprised therapeutic resources of spiritist guidance, as praying, spiritist "passe", fluidified water and spiritual education or spiritual control was conducted in a randomized controlled trial with professionals of a Brazilian public hospital and has demonstrated a medium efficacy on the reduction of stress in the intervention group in comparison to control group. The outcomes showed that a higher number of interventions of spiritist therapy raised the sample effect (Carneiro et al., 2022).

The findings of the current investigation are strong, however limited by the type of the study, which suggests that further investigations with this population should be conducted, e.g., longitudinal research that might determine risks and protection measures among stress, anxiety and LSE.

5. Final Considerations

People with Spiritism Engagement showed high prevalence of stress and anxiety, which demonstrated how Spiritism attracted people with psychological quest. Before and during COVID-19, severe levels of stress and anxiety were associated to a high level of psychic follow-up and in the pandemic psychiatric drugs use increased, which reinforced the higher illness profile of this population. Severe stress and anxiety also connected to a smaller spiritist engagement, which led to think about a possible influence of this engagement to reduce the severity of these disorders. Further studies on this scope are needed to enlarge the understanding of Spiritism impact on mental health.

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