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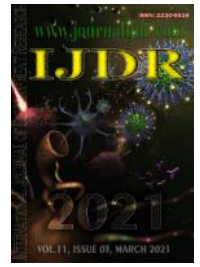
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RESULTS ON THE PERCEPTION OF CONFLICTS ARISING FROM THE ISOLATION OF THE COVID-19 PANDEMIC IN THE STATE OF NUEVO LEÓN-MÉXICO

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ABSTRACT

In this article we will address the issue of conflicts - familial, social and psychological - arising from the isolation produced by the COVID-19 pandemic in Mexico, territorially in the state of Nuevo León, analysed from the perspective of individual-social perception; as well as the interpretation of the results obtained in a case study of the phenomenon described above from the perspective of the perception of the subjects surveyed within the conception of the individual-particular and social-family relationship, once the genesis of the conflict described above exists, based on the experience of the theory of the Brief version of the Fear of Negative Evaluation Scale (BFNE) and the Beck Depression Inventory and the Caring Ability Inventory, justifying these values to the current rational and customary. This research is based on the study of the perception of isolation or confinement caused by the pandemic, which generates a perspective of negative feelings studied from the perspective of fear, stress, panic and depression; a second variable will measure frustration and anxiety, thereby generating a positive or negative perception of the conflict; likewise, the final variable will measure the culture of peace to cement values in our families and confront a possible or future pandemic on the basis of values constructed from this area. The purpose of this research is to generate awareness in the behavioural interaction in a future contingency or pandemic for the objective application of public policies aimed at strengthening healthy coexistence, human rights and legal security as stabilising tools for obtaining a culture of peace in such a conflict.

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INTRODUCTION

Human beings are dependent on ourselves as a species and on the environment in which we live. From the latter we absorb energy, information and organisation in order to maintain our qualities and try to sustain our equilibrium, thus managing to stay alive as individuals, as a group and as a species. We have an absolute dependence on an environment of which we are, in a certain sense, parasitic, in order to guarantee biological and, by extension, social and cultural constants. Our existence is only possible because we have inherited and learned to control in an automated way a large part of the conditions and variables of the relationships we establish with the environment. Phylogenetic, instinctive and emotional mechanisms take part in vital decisions and are included in the evolutionary process, to which freedom and free will are added.

Rationality itself is anchored in many prior qualities that make it possible, but also condition it. These are the reasons why we could say that human beings live a certain schizophrenic -agonic- tension between the different vital proposals dictated by their corporeality, instincts, emotions and reason, since the devices designed to automatically solve the basic problems of life can pose certain contradictions among themselves. (Damasio, 2005); (Martinez, 2007). Indeed, the human being is at once species, group and individual; nature and culture; a network of sub-, inter-, intra- and supra-personal scenarios, in which a series of strata or instances converge: animality, subconscious, unconscious, conscience, conscience, group, community, nation or state. Thus, personal and social life involves conflicts arising from the demands of each level. (Muñoz & Molina, 2010). In perception, although it is a subjective entity, actions can be taken that generate objective actions.

So perception is an element that generates change in the conflicts that arise in society, the aspect of a pandemic is that States are not able to face the immediate consequences such as isolation, confinement or the restriction of certain actions or activities aimed at the free development of the human being, for this in our research the constructs that will be analysed properly measure the perspective of perception, from the field of application of negative feelings - fear, stress, panic, depression, frustration and anxiety; generating this positive or negative perception, using items that will measure the culture of peace to cement values in our families, will be the result of a continuous improvement in the application of future public policies in the protection of the subjects of the Mexican state in relation to the substantial change of this paradigm under study.

Conflict and perception: The conflict aspect of a pandemic - global health crisis COVID-19 - can be studied from the substantive-applicational domain. In this research, the interpretation of the culture of peace, from the application in the field of formalist-letterist rigorism, will help experts to make immediate decisions with the inherent aim of safeguarding emotional, economic and cultural stability in a health contingency or pandemic, regulating the first sketches to avoid fear, stress, weariness, frustration, panic, depression, anxiety, among others. Conflict refers to the relationship that can arise between miscommunication, misinterpretations, incorrect decisions, undermining of an interest - in particular alienation, isolation or even confinement in relationships - among other meanings. Within the holistic social perspective, "conflict is a phenomenon that makes no distinctions and affects people, whatever their race, creed, social class, nationality or ideology" (Gorjón & Sáenz, 2005). Likewise, as it has been suggested, the approach to conflict implies resorting to its very starting point, which is why it is necessary to determine the factors set out below.

The subjectivity of perception, given that people perceive the same objective differently. "Communication failures, as semantic ambiguities distort messages. Disproportionality between needs and satisfiers, because the improper distribution of natural and economic resources generates resentment among members of a society. Incomplete information, when those who express an opinion on an issue know only part of the facts. Interdependence, as overprotection and dependence are sources of difficulties. Frustration, which arises when the commitments made do not allow everything to be fulfilled, generating discomfort that can lead to conflict. Differences of character; because different ways of being, thinking and acting lead to disagreements" (Fuquen, 2003). The perception of the conflicts caused by the COVID-19 pandemic has various aspects that can be analysed. Firstly, people question whether the information provided by official public bodies or international entities is true, together with the information that is displayed on social networks and the information provided by the fourth power of fact, the media, which does not always provide correct information. All this information, together with the compulsory confinement by the administrative authorities in Mexico, generates existential conflicts, such as economic, family, social, psychological and other conflicts.

With respect to the above information, the conflict may or may not exist, just as it may or may not be perceived. The conflict may be real, but one of the parties does not perceive it. If we do not perceive incompatibility, we will not be at odds. The unseen part is made up of the interests, needs, values and emotions involved. Interests would be the benefits we wish to obtain through the conflict. Needs are usually related to interests, although they may not coincide with them. The parties generally find it difficult both to perceive them and to recognise them. What justifies and argues for behaviours are values. These are composed of both cultural and ideological elements. Often, we are not even aware that values play this role in confrontations, nor do we reflect on it. Finally, underneath conflicts there are emotions. It is extremely important that we know how the other feels in order to reach a joint solution. If we do not put ourselves in the other person's shoes and understand them, we will not be able to reach an agreement that satisfies all parties.

To be able to do this, we have to know the psychological processes that are involved in the process (Reguera, 2019). From a psychological perspective, according to Grasa (1987), conflict is the struggle between interdependent individuals or groups who have incompatible objectives, or at least incompatible perceptions. From an ethical perspective, conflict could be defined as a situation of confrontation caused by a clash of interests, whether real or apparent, in relation to the same issue, which can produce real anguish in people when there is no satisfactory solution in sight and the issue is important to them. It is important to distinguish between three different views on the definition of conflict: the technocratic/positive view of conflict, the hermeneutic/interpretative view of conflict and the critical view of conflict. Below we briefly outline some notes on these perspectives in relation to our work. From the technocratic view, conflict is seen as something negative, undesirable and to be avoided, as it is detrimental to the normal functioning of the organisation. The less conflict a school has, the more effective it is. Thus, conflicts are seen as disturbing elements in the achievement of this effectiveness; hence, the logical denial of their existence.

The hermeneutic-interpretative stance is a psychologistic and individualistic view. Conflict, from this rationality, is not only not denied, but is also considered inevitable and even positive in order to stimulate the creativity of the group. Conflict is characterised and analysed as a problem of perception in a way that ignores the social conditions that affect the subjects themselves and their perceptions. Although it is an advance on the previous rationality, by focusing exclusively on personal visions, the conception of conflict is reduced to interpersonal spheres, thus falling into clearly conservative positions. The critical stance considers conflict as something natural and necessary that predisposes to change, progress and the transformation of educational structures. (Fajardo, Fajardo, & Castro, 2006). Therefore, conflicts persist in the social factors that motivate the way society evolves. They arise in the development of incompatible actions, of different sensations; they respond to an emotional state that produces tensions, frustrations; they correspond to the difference between behaviours, social, family or personal interaction.

Origins and roots of the conflict: As has been argued, then, addressing the conflict involves going back to its very starting point, which is why it is necessary to identify the factors set out below. The subjectivity of perception, taking into account that people perceive the same target differently. Communication failures, as semantic ambiguities misrepresent messages. Disproportionality between needs and satisfiers, because the improper distribution of natural and economic resources generates resentment among the members of a society. Incomplete information, when those who express an opinion on an issue know only part of the facts. Interdependence, bearing in mind that overprotection and dependence are a source of difficulties. The pressures that cause frustration, as this occurs when the commitments made do not allow everything to be fulfilled, generating discomfort that can lead to conflict. Differences of character; because different ways of being, thinking and acting lead to disagreements. (Fuquen, 2003). Perceptions of how people communicate and what the relationships between communication and the development of conflict and peacebuilding may be can be a key issue. Communication processes are evidence of conflict perception and coping behaviours. Conflicts conducted without communicative understanding and values seem to erode relationships, corrode coexistence, and alienate well-being and peace. Breakdowns in understanding between the parties and non-peaceful solutions seem to be related to the weakening of communication between the parties (Rojas, et al., 2006). "All conflict is perception. This is as a process of extraction and selection of relevant information in charge of generating a state of clarity and conscious lucidity that allows performance within the highest possible degree of rationality and coherence with the surrounding world" (Oviedo, 2004). In conclusion, we will assume that the following table defines the styles of perception according to the characteristics of the conflict, its constituent elements originated by COVID-19 and its actions by the

Mexican state from a critical perspective. This is the basis for our study and its method of measurement.

Table 1. Perspective of the conflict

| Technocratic/positive perspective | Hermeneutic-interpretative perspective | Critical perspective |
|---|--|--|
| Conflict is negative. Conflict is seen as disruption. | Conflict is translated into a new act. The environment is characterised as psychological. It uses the subject's perception, whether good or bad. | Conflict is positive, depending on the act. It generates gradual, effective, systematic, progressive and transformative change. |
| Differences in character; because different ways of being, thinking and acting lead to disagreements. | Communication failures, as semantic ambiguities misrepresent messages. | The subjectivity of perception, taking into account that people perceive the same objective differently. Always with the intention of improving the environment and social position. |

Source. Own creation

METHODOLOGY

In our studied phenomenon we used a non-experimental, explorative and transectional design, since our research had as its main purpose to investigate the feelings or perception of the citizen in the conflict caused by the isolation provoked by the health contingency or pandemic COVID- 19, establishing 3 variables of study; The first variable measures fear and stress, subdivided into items, the first will measure panic and depression; the second variable will measure frustration and anxiety, thereby generating the positive or negative perception generated by the conflict; the third variable will measure the culture of peace as a generator of social exchange, applying family values to cement harmony and peace in homes. A sample of 819 citizens within the territorial scope of the state of Nuevo León was used as a sample. Our study phenomenon was analysed from the descriptive research, using the conflict and its perception for its development, given that in the research it was established to propose the group of citizens mentioned above, thus creating the sample, properly speaking, in the event described above. The instrument used to obtain and collect data was a survey called "Peace in times of Covid-19" and the procedure used to process, generate and scrutinise the information were the interpretative tables according to the development, feeding and interpretation of the SPSS programme (Statistical Package for the Social Sciences).

The COVID-19 global health emergency and/or contingency has provoked a mobility in Mexican territory never seen before in daily life, these actions have reduced the mobility of Mexican citizens, although the administrative authorities have been forceful, these measures are still lax, because we would be in the place of the interpretation of constitutional articles and the possible violation of human rights and individual guarantees of Mexican citizens, In this space no further information will be added, only that it is necessary to mention that all these administrative measures have led to the confinement or gradual isolation of the population, generating the feelings that have been mentioned above, for their study the following general agreements or decrees have been decreed to date:

- J AGREEMENT issued on 23/March/2020 by which the General Health Council recognises the epidemic of SARS-CoV2 virus disease (COVID-19) in Mexico as a serious disease of priority attention, as well as establishing the activities for preparedness and response to this epidemic.
- J AGREEMENT issued on 24/March/2020 by which the General Health Council recognises the epidemic of SARS-CoV2 virus

disease (COVID-19) in Mexico as a serious disease of priority attention, as well as establishing the activities for preparedness and response to this epidemic.

- J DECREE issued on 24/March/2020 signed by the President of the Republic sanctioning the Agreement establishing the preventive measures to be implemented for the mitigation and control of the health risks posed by the SARS-CoV2 virus disease (COVID-19).
- J AGREEMENT issued on 26/March/2020 signed by the Ministry of Health establishing the suspension of deadlines and legal terms in the practice of actions and diligences in the administrative procedures that take place before the Ministry of Health, its administrative units and deconcentrated administrative bodies.
- J AGREEMENT issued on 26/March/2020 by which the Consejo de Salubridad General indicates the non-working days from 26 March to 19 April 2020, for the purposes of carrying out administrative procedures.
- J DECREE issued on 27/March/2020 signed by the President of the Republic declaring extraordinary actions in the affected regions of the entire national territory in terms of general health to combat the serious disease of priority attention generated by the SARS-CoV2 virus (COVID-19).
- J AGREEMENT issued on 30/March/2020 issued by the Consejo de Salubridad General declaring the epidemic of disease caused by the SARS-CoV2 virus (COVID-19) to be a health emergency due to force majeure.
- J AGREEMENT issued on 31/March/2020 issued by the Ministry of Health establishing extraordinary actions to address the health emergency generated by the SARS-CoV2 virus.

With this, and up to the date of the conclusion of this research, the administrative authorities have increased the pertinent actions to avoid contagion by the COVID-19 disease. Of which the confinement or the social isolation contracts conflicts in diverse indoles as the psychological, economic, familiar and social ones; and as they have been elaborated according to the action or omission of the walk of this pandemic, they were not implemented or established previous studies in the performance of these administrative actions and this is justified because it is a new act for our authorities so much local, national and the own international ones; all this entails to a social disorientation, for the previous thing it was decided to implement this study. The main theme of the surveys is to avoid psychological, family or social conflict, trying to counteract it positively with emotional well-being or mental health. The survey will allow us to know the magnitude, characteristics and evolution of the psychological, family and social impact that COVID-19 is having on the population described above. The aim of the survey is to carry out a descriptive analysis of the participants by establishing the parameters of the items duly qualified, divided and classified in such a way that it is possible to evaluate the affirmations or negations that correspond to the attitudes foreseen in the questionnaire itself, analysing the characteristics of the age and gender of the respondents. The profile of the respondents will allow a more precise understanding of the results of the study.

In addition, our measurement instrument contains 15 statements to identify the degree of agreement with the perceptions stated above on a Likert scale from 0 to 10. These statements are enshrined in the experience-based theory of the Brief version of the Fear of Negative Evaluation Scale (BFNE) and the Beck Depression Inventory and the Caring Ability Inventory. Our survey is implemented and based on the Likert scale as it allows us to find a wide possibility of answers used in other scales, without affecting the high correlation with respect to other methods of measuring attitudes. From the perspective of considering attitudes as a continuum ranging from unfavourable to favourable, this technique, in addition to placing each individual at a certain point (which is a common feature of other scales), takes into account the breadth and consistency of attitudinal responses (Garza, 2017). We began by surveying gender, to ground the population and target the sample according to the age of the sample.

Table 2. Reliability of variables with Cronbach's alpha percentage

| Variable | Item/Categorisation | Reliability Statistics | Measuring elements |
|------------------|---------------------|------------------------|--------------------|
| Fear | Depression-Panic | .893 | 6 |
| Stress | Frustration-Anxiety | .903 | 5 |
| Culture of Peace | Family values | .750 | 2 |

Source. Own creation

Table 3. Reliability statistics on the final instrument Reliability Statistics

| Cronbach's alpha | No. of Elements |
|------------------|-----------------|
| .816 | 15 |

Source: Own creation. SPSS software.

Assuming that the conditions between ages may be different from the others, the socio-economic item was not selected in this sample because of the complexities that this item would have entailed in studying it, but it makes an important dent in the study of age and gender. As well as the same violence that can be generated in the home or in any other environment in which the whole family interacts in closed and prolonged spaces, we decided to discard it due to its complexity, justifying this variable in another independent and individualised study because it is a topic of social relevance.

RESULTS

The dynamic of interpretation is based on a statistical graph, explaining the results obtained according to the age range of the sample, with the aim of breaking down the positive or negative results according to the edge of the affirmation or negation of the survey. Likewise, for the effective understanding of the reader, it was decided to establish the guideline of the affirmations with a theoretical-descriptive explanation, in order to ratify the interpretative framework of the same. The measurement is based on the age range, because we believe that fear, panic, depression, sadness and all negative feelings decrease or increase depending on the age range or vice versa.

The ages measured range from 17-27, 28-38, 39-49 and 50-plus, with some sectors being more vulnerable than others depending on the item being measured. The reading of the graph contemplates the visual and interpretative aspect, it is measured by gender, i.e. male-female-other, measuring the result in the proportion of age, giving as a final result the total breakdown by the indicators stated above.

Table 4. Peace in times of COVID-19 survey

| Question | Affirmation | Measurement Item |
|----------|--|--------------------------|
| 1 | What is your gender? | Gender of the Population |
| 2 | What is your age range? | Age of the population |
| 3 | During this quarantine, have you felt the need to be constantly reading or listening to news related to Covid-19? | Fear-Panic-Depression |
| 4 | During this quarantine, have you felt that the prevalence of your health (or that of your family members) is out of your own control? | Fear-Panic-Depression |
| 5 | During this quarantine, have you or your family members made larger than usual purchases of food, medicines, cleaning or personal hygiene items? | Fear-Panic-Depression |
| 6 | During this quarantine, have you or any of your family members thought you were infected with Covid-19 | Fear-Panic-Depression |

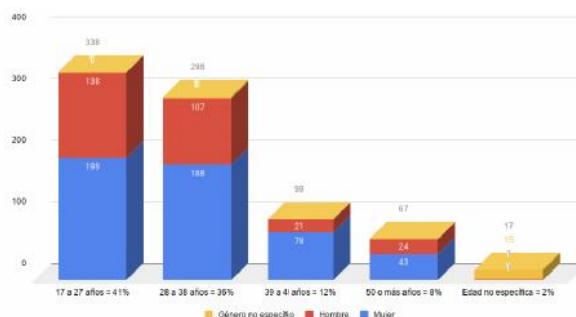
| | | |
|----|--|----------------------------|
| | without having all the symptoms? | |
| 7 | During this quarantine, have you slept more than usual, at times when you would not normally sleep? | Fear-Panic-Depression |
| 8 | During this quarantine, have you felt sad for no apparent reason? | Fear-Panic-Depression |
| 9 | During this quarantine, have you felt angry for no apparent reason? | Stress-Frustration-Anxiety |
| 10 | During this quarantine, have you lost interest in Covid-19 related news? | Stress-Frustration-Anxiety |
| 11 | During this quarantine, have you felt the need to eat more than usual? (snacks between meals or larger portions at meals). | Stress-Frustration-Anxiety |
| 12 | During this quarantine, have you suffered from insomnia, or have you woken up in the middle of your normal sleep period? | Stress-Frustration-Anxiety |
| 13 | During this quarantine, have you felt nervous, shaky or agitated for no apparent reason? | Stress-Frustration-Anxiety |
| 14 | What positive aspects have you gained from the confinement? (you can choose more than one) | Culture of Peace |
| 15 | Which of the following activities have you carried out during this Covid-19 quarantine? (you can choose more than one) | Culture of Peace |

Source. Own creation.

Measuring factor

Graph 1. Age range by gender.

What is your age range?



Source. Own creation.

| Gender | 17 to 27 years old | 28 to 38 years old | 39 to 49 years old | 50 years and over | Age unspecified | Grand Total | |
|--------------------|--------------------|--------------------|--------------------|-------------------|-----------------|-------------|-----|
| Woman | 199 | 188 | 78 | 43 | 1 | 509 | 62% |
| Man | 138 | 107 | 21 | 24 | 1 | 291 | 36% |
| Gender unspecified | 1 | 3 | | | 15 | 19 | 2% |
| Grand Total | 338 | 298 | 99 | 67 | 17 | 819 | |
| | 41.27% | 36.39% | 12.09% | 8.18% | 2.08% | | |

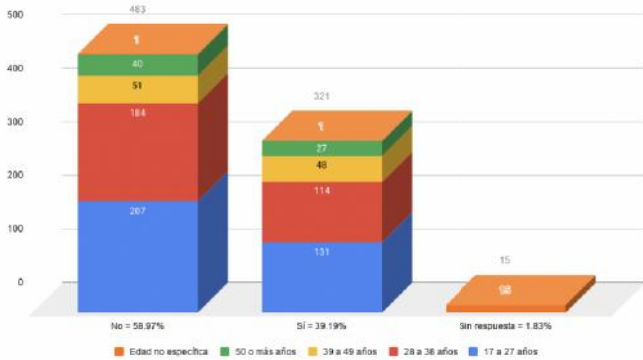
Source. Own creation.

The sample includes 199 women and 138 men aged 17-27 years, giving a total of 338 participants, 48% of the sample; in the 28-38 age group, 188 women and 107 men, 36% of the sample; in the 39-49 age group, 78 women and 21 men, 12% of the sample; In the 50-0 range and above we have 43 women and 24 men, giving 8% of the sample; likewise the sample reported 15 unspecified cases and 2 unassigned, giving 2% of the sample, with a total of 509 women, 291 men and 19

unspecified, with a final result of 62% of women, 36% of men and 2% unspecified, bringing the sample to 819 participants.

Fear, Panic and Depression: Figure 2. Fear - Over-information. Fear is measured through the following question, related to over-information:

During this quarantine, have you felt the need to be constantly reading or listening to news related to Covid-19?



Source. Own creation.

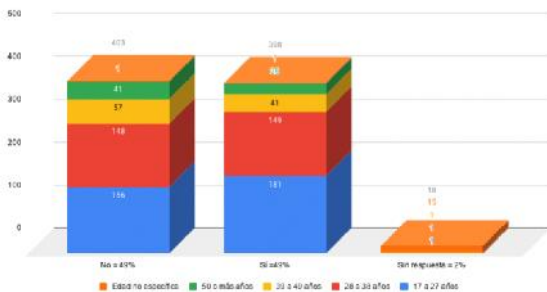
| Age range | No | Yes | No response | Grand Total | |
|--------------------|------------|------------|-------------|-------------|-----|
| 17 to 27 years old | 207 | 131 | | 338 | 41% |
| 28 to 38 years old | 184 | 114 | | 298 | 36% |
| 39 to 49 years old | 51 | 48 | | 99 | 12% |
| 50 years and over | 40 | 27 | | 67 | 8% |
| Age unspecified | 1 | 1 | 15 | 17 | 2% |
| Grand Total | 483 | 321 | 15 | 819 | |
| | 58.97% | 39.19% | 1.83% | | |

Source. Own creation.

This generates a vicious circle, and a fake news story is replicated thousands of times in a matter of seconds. All this is happening in a context of post-truth, a term defined by the Oxford dictionary as the word of the year in 2016 and referring to circumstances in which objective facts are less important in shaping public opinion than appeals to emotion or personal beliefs. Quality journalism and the right of citizens to be properly informed are being impacted by this increasingly dangerous phenomenon, which influences democratic practices in a variety of ways (IFJ, 2019).

Disinformation has always existed, starting from the moment when people became aware of the media's influence on public opinion. What is new and really worrying, however, is the fact that disinformation is spreading with unprecedented speed and breadth through digital platforms such as Google or Facebook. Fake news has transformed journalism by posing a serious challenge to the extent that it is not always easy to distinguish what is true from what is false. At the same time, however, hoaxes and fake news have considerably strengthened the role of journalism. If anyone is capable of denouncing false information, it is journalists - responsible journalists, of course. I would say that in the short term these false reports are a thorn in the side of the professionals, but in the longer term they will reinforce the legitimacy of their profession and give them greater weight in society (UNESCO, 2017). So the population most vulnerable to picking up the misinformation spread by fake news is in the 17-27 age range, with the majority of people susceptible to sharing such information without first verifying it or seeking the effectiveness of the source, in the 18-38 age range this population range is in the middle, however it is still very high in participation, The range of 39 to 49 and 50 and over is the contiguous range of the generation that least use mobile devices, computers, tablets or any electronic device with internet access, from which it can be deduced that the majority of this population is in the traditional generational assumption of access to information, such as radio, newspaper or satellite television itself.

During this quarantine, have you felt that the prevalence of your health (or that of your family members) is out of your own control?



Source. Own creation.

| Age range | No | Yes | No response | Grand total | |
|--------------------|------------|------------|-------------|-------------|-----|
| 17 to 27 years old | 156 | 181 | 1 | 338 | 41% |
| 28 to 38 years old | 148 | 149 | 1 | 298 | 36% |
| 39 to 49 years old | 57 | 41 | 1 | 99 | 12% |
| 50 years and over | 41 | 26 | 1 | 67 | 8% |
| Age unspecified | 1 | 1 | 15 | 17 | 2% |
| Grand total | 403 | 398 | 18 | 819 | |
| | 49.21% | 48.60% | 2.20% | | |

Source. Own creation.

One of the negative aspects of fear is panic, and a variable of study is found in truthful information, this leads to knowing how to discern what is true and false in the field of application. For this, there has always been misleading news, but since the emergence of the Internet and new communication and information technologies, Fake News has proliferated throughout the world. This term is used to conceptualise the dissemination of false news that causes a dangerous circle of disinformation. Social networks allow users to be producers and consumers of content at the same time, and have facilitated the dissemination of misleading, false or fabricated content.

Figure 3. Fear - Health at risk. Fear is measured through the following question, related to health risk: Mental health plays a fundamental parameter in isolation; depression is a symptomatology that must be treated psychologically. In a pandemic, actions were taken in a forceful manner without prior studies to back up such actions. For this, emotions, conscience, intelligence and will itself must be assessed before taking actions from the public administration in order to generate awareness and an effective public policy to protect and safeguard security and mental health, otherwise the processes could fall into the assumption of developing mania, melancholy, paranoia and hysteria. For this, the abnormal aspect of people must be studied, in order to verify if we are in the normal assumption that psychology marks in these cases. In this order of ideas, Acosta (2004) and Schultz and Schultz (2002) allude to the fact that in recent years, humanistic psychology has been promoting a new conception of mental health. Thus, Carl Rogers speaks of mature behaviour and fully functioning people as synonymous with normality (or mental health) and describes the following characteristics as essential in this type of person:

Openness to experience: Open to both positive and negative feelings; they are not defensive and do not need to deny or distort experiences. They live each moment fully and richly. Each experience is fresh and potentially new. They do not need preconceived structures to interpret each event rigidly; they are flexible and spontaneous.

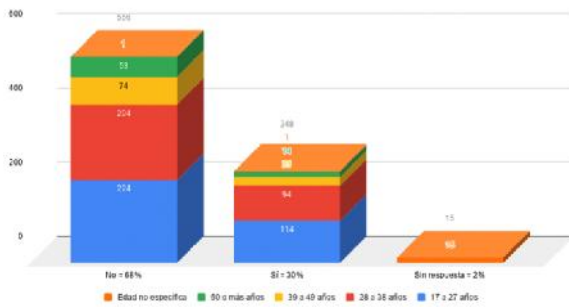
They trust their own organism: That is, they trust their own reactions rather than always being guided by the opinions of others or by intellectual judgements (separate from affective needs). They are authentic or self-satisfied people.

They possess a sense of freedom to make choices without restrictions or forced inhibitions. This produces a sense of empowerment, because they know that their future depends on their own actions and is not

entirely determined by present circumstances, past events or other people. They take responsibility for their decisions and behaviour. They are creative people, living constructively and adaptively as environmental conditions change. Spontaneity and flexibility are allied characteristics of creativity. (Mebarak, Castro, Salamanca, & Quintero, 2009).

Figure 4. Panic - Overbuying. **Panic** is measured through the following question, related to overbuying:

During this quarantine, have you or your family members made larger than usual purchases of food, medicines, cleaning or personal hygiene items?

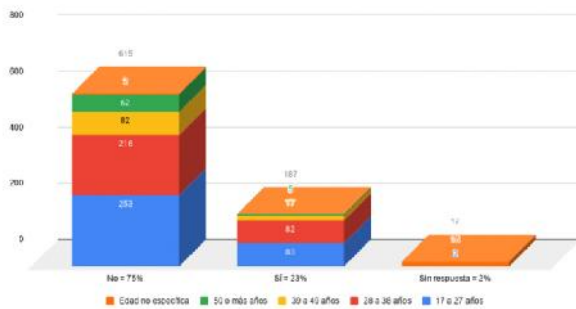


Source. Own creation.

| Age range | No | Yes | No response | Grand total | |
|--------------------|------------|------------|-------------|-------------|-----|
| 17 to 27 years old | 224 | 114 | | 338 | 41% |
| 28 to 38 years old | 204 | 94 | | 298 | 36% |
| 39 to 49 years old | 74 | 25 | | 99 | 12% |
| 50 years and over | 53 | 14 | | 67 | 8% |
| Age unspecified | 1 | 1 | 15 | 17 | 2% |
| Grand total | 556 | 248 | 15 | 819 | |
| | 67.89% | 30.28% | 1.83% | | |

Source. Own creation.

During this quarantine, have you or any of your family members thought you were infected with Covid-19 without having all the symptoms?



Source. Own creation.

| Age range | No | Yes | No response | Grand total | |
|--------------------|------------|------------|-------------|-------------|-----|
| 17 to 27 years old | 253 | 83 | 2 | 338 | 41% |
| 28 to 38 years old | 216 | 82 | | 298 | 36% |
| 39 to 49 years old | 82 | 17 | | 99 | 12% |
| 50 years and over | 62 | 5 | | 67 | 8% |
| Age unspecified | 2 | 1 | 15 | 17 | 2% |
| Grand total | 615 | 187 | 17 | 819 | |
| | 75.09% | 22.83% | 2.08% | | |

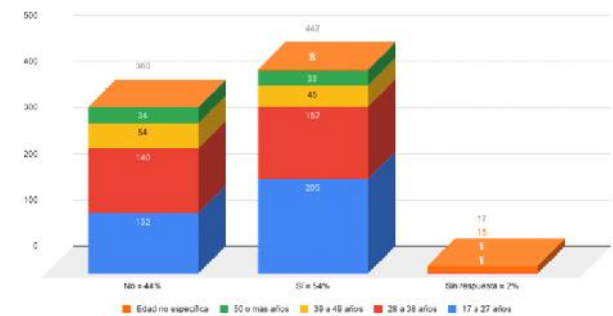
Source. Own creation.

The scene has been repeated in many parts of the world and is becoming more and more frequent: scores of people grabbing many packets of toilet paper in crowded self-service shops. As the new coronavirus (covid-19) has spread around the world, in the last month many people have been searching for supplies and essentials to cope with the pandemic. The FOMO (fear of missing out) syndrome is what is seen in many people in crises such as covid-19, explains Professor Nitika Garg of the University of New South Wales. Another consumer expert, Dr Rohan Miller, believes that what is seen with this particular item is a reflection of an urbanised society and lifestyle

where modern convenience is king. Or at least in places that are more developed than rural areas or countries with constraints. (BBC, 2020). In the field of mental health, there is a lack of attention duly oriented to the solution of its problems, which are associated with a multifactorial origin where personal and social factors converge unfavourably. Specifically, the individual who is affected by mental health problems such as anxiety, depression, alcoholism, etc., sees his or her well-being and functionality diminished, which is reflected in his or her general quality of life. These conditions can vary from person to person as each individual lives and perceives their experiences and environment differently, which can change throughout the life cycle. (Ornelas & Ruíz, 2017).

Figure 6. Depression - Oversleeping. Depression is measured through the following question, related to the prolongation of natural sleep time.

During this quarantine, have you slept more than usual, at times when you would not normally sleep?



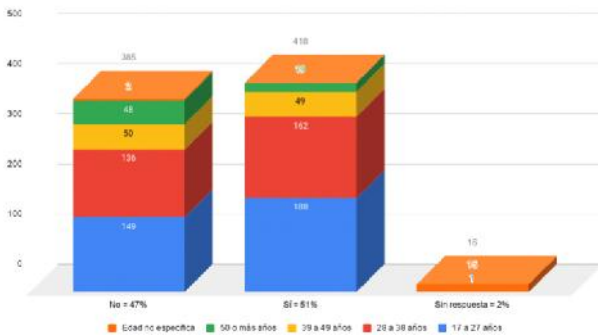
Source. Own creation.

| Age range | No | Yes | No response | Grand total | |
|--------------------|------------|------------|-------------|-------------|-----|
| 17 to 27 years old | 132 | 205 | 1 | 338 | 41% |
| 28 to 38 years old | 140 | 157 | 1 | 298 | 36% |
| 39 to 49 years old | 54 | 45 | | 99 | 12% |
| 50 years and over | 34 | 33 | | 67 | 8% |
| Age unspecified | 2 | 1 | 15 | 17 | 2% |
| Grand total | 360 | 442 | 17 | 819 | |
| | 43.96% | 53.97% | 2.08% | | |

Source. Own creation.

One of the most important factors contributing to this state of physical and psychological well-being is sleep. Sleep is a fundamental biological function - just remember that we spend approximately one third of our existence sleeping. Sleep is essential in our lives, not only because of the amount of time we spend sleeping, but also because of the significance we attach to a good night's rest and the effect sleep has on our health. Current research shows with increasing empirical strength that there is a close interrelationship between sleep processes and a person's general state of physical and psychological health. The serious physical and psychosocial consequences of sleep disorders such as insomnia or apnoea are well known (Roth & Ancoli-Israel, 1999). Similarly, sleep problems are very often present in various medical conditions and psychopathological disorders (Benca, Obermeyer, Thisted & Gillin, 1992). On the positive side, a good measure of an individual's mental and physical health could be assessed in the ability to fall asleep and stay asleep for an uninterrupted period of time. On the negative side, as when sleep disturbances occur, sleep can make a negative symbiosis with numerous medical illnesses and psychological disorders. (Miró, Cano Lozano, & Buela, 2005). Graph 7. Depression - Sadness. **Depression** is measured through the following question, related to sadness. Sadness has traditionally been considered one of the unpleasant emotions, although it cannot always be said to be negative. There is great cultural variability, and some cultures do not even have words to define it. Nevertheless, sadness-depression, like any other emotion, has an 1.95% adaptive phylogenetic function in terms of seeking attention and care from others, as a mode of communication in situations of loss or separation, or as a way of conserving "energy" to cope with further adaptive processes

During this quarantine, have you felt sad for no apparent reason?



Source. Own creation.

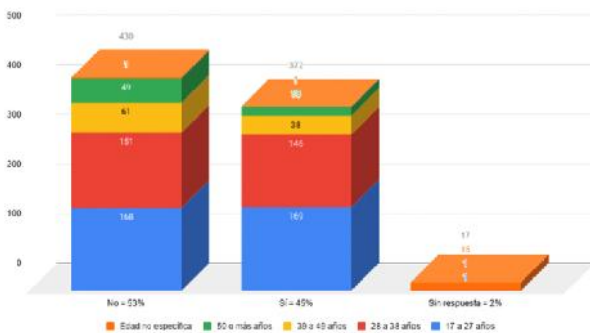
| Age range | No | Yes | No response | Grand total | |
|--------------------|--------|--------|-------------|-------------|-----|
| 17 to 27 years old | 149 | 188 | 1 | 338 | 41% |
| 28 to 38 years old | 136 | 162 | | 298 | 36% |
| 39 to 49 years old | 50 | 49 | | 99 | 12% |
| 50 years and over | 48 | 19 | | 67 | 8% |
| Age unspecified | 2 | | 15 | 17 | 2% |
| Grand total | 385 | 418 | 16 | 819 | |
| | 47.01% | 51.04% | 1.95% | | |

Source. Own creation.

(Whybrow, Akiskal & McKinney, 1984). From the point of view of the relationship between negative emotions and the stress response, the experience of sad mood would depend on the subject's cognitive evaluation of the situational demand and coping resources, which in such a case would be negative and often predominant when the stressor(s) becomes chronic (Beck, Rush, Shaw & Emery, 1983). Sadness and depression is therefore the end result of the interaction of multiple constitutional, developmental, environmental and interpersonal factors, which modify the patterns of neurotransmission between the cerebral hemispheres and the limbic system. (Piqueras, Ramos, Martínez, & Oblitas, 2009).

Frustration, Stress and Anxiety: Graph 8. Frustration - Anger. **Frustration** is measured by the following question, related to anger.

During this quarantine, have you felt angry for no apparent reason?



Source. Own creation.

| Age range | No | Yes | No response | Grand total | |
|--------------------|--------|--------|-------------|-------------|-----|
| 17 to 27 years old | 168 | 169 | 1 | 338 | 41% |
| 28 to 38 years old | 151 | 146 | 1 | 298 | 36% |
| 39 to 49 years old | 61 | 38 | | 99 | 12% |
| 50 years and over | 49 | 18 | | 67 | 8% |
| Age unspecified | 1 | 1 | 15 | 17 | 2% |
| Grand total | 430 | 372 | 17 | 819 | |
| | 52.50% | 45.42% | 2.08% | | |

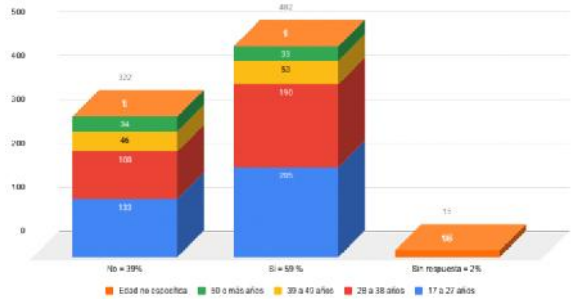
Source. Own creation.

Anger brings with it the identifiable and triggering emotions or reactions of short duration mostly expressed by the protestors: surprise, joy, courage, fear and sadness, as well as despair, disappointment, discouragement and anxiety.

In terms of feelings or sensations, also considered as secondary emotions, the following were found: pain, discomfort, disgust, tiredness, but also well-being and tranquillity. (Rodriguez, Juárez, & Ponce, 2011).

Graph 9. Frustration - Disinterest in information. Frustration is measured through the following question, related to loss of interest in Covid-19 information.

During this quarantine, have you lost interest in Covid-19 related news?



Source. Own creation.

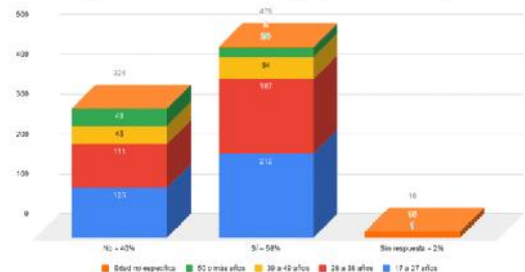
| Age range | No | Yes | No response | Grand total | |
|--------------------|--------|--------|-------------|-------------|-----|
| 17 to 27 years old | 133 | 205 | | 338 | 41% |
| 28 to 38 years old | 108 | 190 | | 298 | 36% |
| 39 to 49 years old | 46 | 53 | | 99 | 12% |
| 50 years and over | 34 | 33 | | 67 | 8% |
| Age unspecified | 1 | 1 | 15 | 17 | 2% |
| Grand total | 322 | 482 | 15 | 819 | |
| | 39.32% | 58.85% | 1.83% | | |

Source. Own creation.

One of the aspects to avoid stress, frustration and anxiety is the effective access to information that provides or feeds tranquillity, for this access to the internet gives us the guideline to be able to access international organisations or news programmes with high fidelity in information, the majority of those surveyed have ceased to have interference, interest in information related to the COVID-19 disease, since the institutions in charge of providing this information, discrepancy one from the other and more, together with the information that comes from state-municipal organisations against the information from the federation. This is a milestone to be able to generate public policies aimed at regulating the information of the 3 entities manifested in administrative law in conjunction with international organisations.

Graph 10. Stress - Overeating. Stress is measured through the following question, related to increased appetite.

During this quarantine, have you felt the need to eat more than usual? (snacks between meals or larger portions at meals).



Source. Own creation.

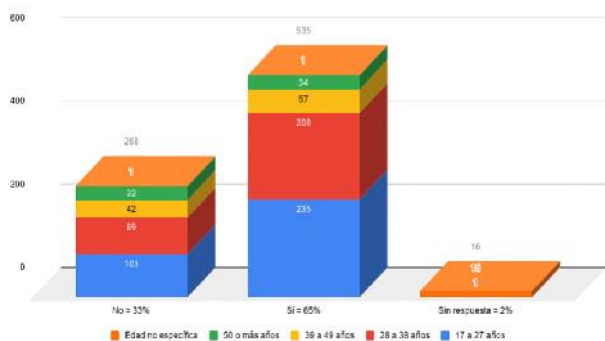
| Age range | No | Yes | No response | Grand total | |
|--------------------|--------|--------|-------------|-------------|-----|
| 17 to 27 years old | 125 | 212 | 1 | 338 | 41% |
| 28 to 38 years old | 111 | 187 | 1 | 298 | 36% |
| 39 to 49 years old | 45 | 54 | | 99 | 12% |
| 50 years and over | 43 | 24 | | 67 | 8% |
| Age unspecified | 2 | 2 | 15 | 17 | 2% |
| Grand total | 324 | 479 | 16 | 819 | |
| | 39.56% | 58.49% | 1.95% | | |

Source. Own creation.

Overcrowding and stress may be receiving stress-mediated shaping that influences their emotional reactivity and could be linked to the increasing prevalence of obesity. Conversely, Silva (2008) noted that stress induces isolation are common conditions in large cities, those who suffer from them the intake of palatable and/or energy-dense foods and predisposes to obesity, particularly for those who practice restrictive diets who tend to fall back on inappropriate eating habits during episodes of stress or anxiety. The level of anxiety is modulated by threatening events that trigger physiological stress responses, with some individuals being more reactive to such events and therefore more likely to suffer from anxiety (Cardenas-Villalvazo, et al., 2010).

Graph 11. Stress - Insomnia. Stress is measured through the following question, related to sleep disorders.

During this quarantine, have you suffered from Insomnia, or have you woken up in the middle of your normal sleep period?



Source. Own creation.

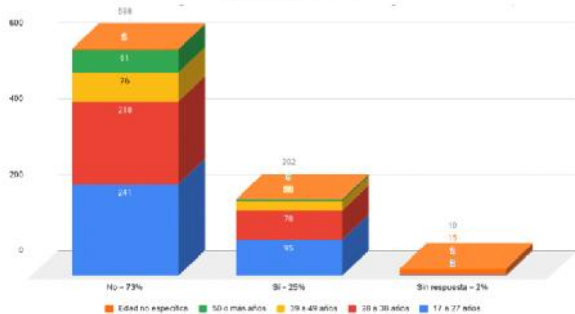
| Age range | No | Yes | No response | Grand total | |
|--------------------|--------|--------|-------------|-------------|-----|
| 17 to 27 years old | 103 | 235 | | 338 | 41% |
| 28 to 38 years old | 89 | 208 | 1 | 298 | 36% |
| 39 to 49 years old | 42 | 57 | | 99 | 12% |
| 50 years and over | 33 | 34 | | 67 | 8% |
| Age unspecified | 1 | 1 | 15 | 17 | 2% |
| Grand total | 268 | 535 | 16 | 819 | |
| | 32.72% | 65.32% | 1.95% | | |

Source. Own creation

Sleep disturbances are associated with reduced vitality, poor social functioning and impairment in physical activity, mental health, cognitive processes, psychomotor performance and quality of life. Sleep plays an important role in memory consolidation, learning, restorative processes and coding. Therefore, good quality sleep is important. In addition, several factors and habits recognised as generators of sleep problems and poor sleep quality may be present, especially smoking, alcohol consumption, sedentary lifestyles, excessive internet use and lack of social support. (Monterrosa, Ulloque, & Carriazo, 2014).

Graph 12. Anxiety - Nervousness. Anxiety is measured through the following question, related to nervousness and agitation.

During this quarantine, have you felt nervous, shaky or agitated for no apparent reason?



Source. Own creation

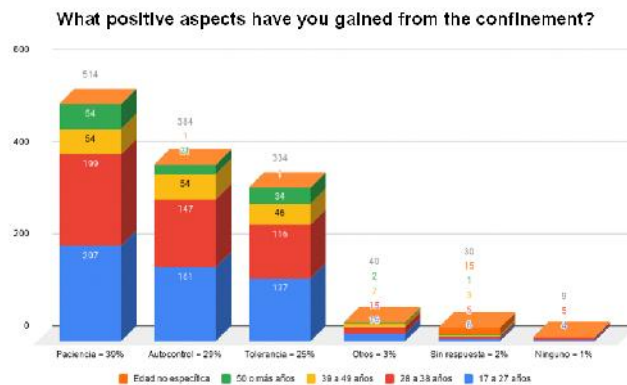
| Age range | No | Yes | No response | Grand total | |
|--------------------|--------|--------|-------------|-------------|-----|
| 17 to 27 years old | 241 | 95 | 2 | 338 | 41% |
| 28 to 38 years old | 218 | 78 | 2 | 298 | 36% |
| 39 to 49 years old | 76 | 23 | | 99 | 12% |
| 50 years and over | 61 | 6 | | 67 | 8% |
| Age unspecified | 2 | | 15 | 17 | 2% |
| Grand total | 598 | 202 | 19 | 819 | |
| | 73.02% | 24.66% | 2.32% | | |

Source. Own creation

In general, the term anxiety refers to the combination of different physical and mental manifestations that are not attributable to real dangers, but which manifest themselves either in the form of a crisis or as a persistent and diffuse state, which can reach panic; however, other neurotic characteristics may be present, such as obsessive or hysterical symptoms that do not dominate the clinical picture. Although anxiety is notable for its proximity to fear, it differs from fear in that, while fear is a disturbance whose presence is manifested in the face of present stimuli, anxiety is related to the anticipation of future, indefinable and unpredictable dangers (Marks, 1986). Both anxiety and fear have similar manifestations, both involving thoughts of danger, feelings of apprehension, physiological reactions and motor responses, which is why some authors use one term or the other interchangeably (Cambell, 1986; Thyer, 1987). Moreover, both are considered to be evolved adaptive mechanisms that enhance the survival of our species (Thyer, 1987). Along these lines, Johnson and Melamed (1979) indicate that anxiety differs from fear in that the former consists of the emission of a more diffuse, less focused response, occurring without apparent cause and perhaps best described as apprehension for the individual. (Sierra, Ortega, & Zubeidat, 2003).

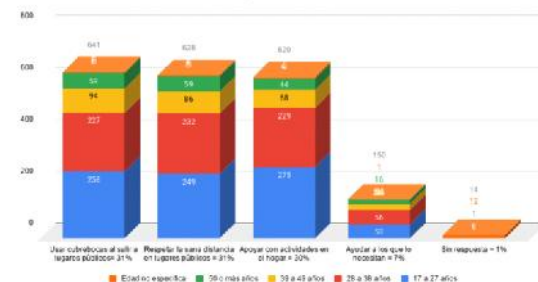
Other

Figure 13. Positive aspects



Source. Own creation

Which of the following activities have you carried out during this Covid-19 quarantine?



Source. Own creation

One of the selected topics of the culture of peace can be found in values and these can be taught from the point of view of patience, self-control, tolerance and more in a spontaneously produced confinement or isolation. Staying physically and emotionally healthy is a major factor in improving our health.

| Age range | Patience | Self- monitoring | Tolerance | Other | No response | None | Grand total | |
|--------------------|----------|------------------|-----------|-------|-------------|-------|-------------|----|
| 17 to 27 years old | 207 | 161 | 137 | 16 | 6 | 4 | 26 | 3% |
| 28 to 38 years old | 199 | 147 | 116 | 15 | 5 | 5 | 25 | 3% |
| 39 to 49 years old | 54 | 54 | 46 | 7 | 3 | | 10 | 1% |
| 50 years and over | 54 | 21 | 34 | 2 | 1 | | 3 | 0% |
| Age unspecified | | 1 | 1 | | 15 | | 15 | 2% |
| Grand total | 514 | 384 | 334 | 40 | 30 | 9 | 819 | |
| | 62.76% | 46.89% | 40.78% | 4.88% | 3.66% | 1.10% | | |

Source. Own creation

| Age range | Wear masks when going out | Keep social distancing | Support with household activities | Helping those in need | No response | Grand Total | |
|--------------------|---------------------------|------------------------|-----------------------------------|-----------------------|-------------|-------------|-----|
| 17 to 27 years old | 258 | 249 | 275 | 53 | | 328 | 40% |
| 28 to 38 years old | 227 | 232 | 229 | 56 | 1 | 286 | 35% |
| 39 to 49 years old | 94 | 86 | 68 | 24 | | 92 | 11% |
| 50 years and over | 59 | 59 | 44 | 16 | 1 | 61 | 7% |
| Age unspecified | 3 | 2 | 4 | 1 | 12 | 17 | 2% |
| Grand Total | 641 | 628 | 620 | 150 | 14 | 819 | |
| | 78.27% | 76.68% | 75.70% | 18.32% | 1.71% | | |

Source. Own creation

Public policies of confinement or isolation do not tell us how to maintain or achieve optimal health. The Mexican government, for example, does state how to confront the spread, but does not mention the procedures to confront, resolve, counteract, resist, combat and overcome this situation, knowing that this is the first test of a new way of resolving conflicts arising from pandemics or possible or future chronic degenerative or pandemic diseases. Values such as patience, self-control and tolerance can strengthen our immune system. We should generate a new way of conceiving the pandemic conflict by a new way of choosing and change our daily conflicts into a positive action. Exercise every day and make sure that the parks in the neighbourhoods are suitable for it. This, according to the experts, will eliminate toxins and help our body to build up its defences. Previously, sleep was measured. This pandemic relationship has brought disturbances in the biological clock, we must rest better. Sleep according to experts is restorative and builds a better immune development as well. These values together will allow us to build positive thoughts, emotions, activities and behaviours in favour of the family, to get out of the negative and disruptive information helps our brain to improve our social condition. Because a body that is uninformed, stressed, drowsy, stressed, fearful, consequently produces an immunological state that is more prone to suffer from any disease due to its low defences. We must understand that isolation or confinement as a public policy only leads to the fact that hospitals are not saturated, but sooner or later this will happen, or else they are already within our health system. We should expose ourselves to COVID-19 by having the parameters described above as well as the values already mentioned, thus having a healthy body and mind, resulting in an immunologically stronger organism than in the negative position described above. With this being healthy, the COVID-19 is more likely to be less vulnerable in that organism than one that is immersed in those negative elements.

In conclusion the values will give us the big difference between infected versus asymptomatic healthy informed bodies. The theme is to understand that happiness is the responsibility of all of us to take care of ourselves, because this pandemic has already brought a new vision of facing the above described conflicts, prudence, responsibility and body intelligence are required to bring to fruition this new way of facing life in the pandemics of the 21st century. One of the conflicts that arose in the pilgrimage was the new way of directing them in the family support of the organisation of daily chores. Wearing masks, respecting a healthy distance, helping with household chores and helping others are just a few examples. The information provided by the federal government together with the local authorities placed a lot of emphasis on the use of masks, as we can see this has been implemented correctly in the studied sector, the healthy distance was highlighted due to the constant propagation of the media, the correct and daily use in order not to spread COVID-19, the critical element was found in the customary help in supporting household chores and more in the ages from 17 to 38 years old, The internet, parents actively working are common factors in the new

visualisation of the new detriment of this valuation, thus generating, this study, a watershed to generate, based on the values cemented by the families, the integration of the customary support in the housework, thus generating social and existential harmony and generating effective social inclusion.

CONCLUSION

Conducting this type of social research will allow us to continue advancing our knowledge of the impacts that COVID-19 disease is having on the general population, contributing in a very important way to the design of urgent and effective interventions such as public policies aimed at resolving the conflicts caused by isolation, confinement or the legal and social rules that emanate from the Mexican government to implement effective social responsibility. These investigations help us to verify the negative content in which we incur by not having an effective social strategy before a pandemic, although it is true that all these actions have brought with them a new way of acting and directing ourselves in recent days, the actions that we have taken as a society have been directed as the day to day goes by without any previous strategy and this is not only a problem of Mexico, but of the whole world itself, Even developed countries did not have public policies aimed at confinement or isolation in the event of a pandemic, which is why these studies will help us to generate new data and statistics applied to combat the mistakes we have made now in the present in order to eradicate them in the future.

For the purposes of reducing or protecting against all the negative effects that have developed from this pandemic, especially those targeting the most vulnerable populations such as children, the elderly, exposure to gender-based violence, imminently excluded populations, vulnerable groups, the homeless, those segregated from highly conflictive neighbourhoods, among many others. What humanity, the whole world and our country are suffering requires scientific, medical, natural, social and anthropological studies in order to establish a new position for the implementation of public policies aimed at effective action, to have protocols and guidelines that allow us to regulate economic activity and that do not distort it, to have protocols for action in information and above all actions aimed at social welfare for the continuous improvement of the population in general.

Proposals: At the end of the investigation of our variables and measurement items - fear, stress, panic, depression; frustration and anxiety, culture of peace - allow us to generate proposals to declare an effective protection of human rights, to propagate for establishing public policies to improve our mental health and to find suitable spaces to implement public policies protecting the economic rights of the governed, our actions and proposals derive in the following affirmations:

- J) Propose the effective immersion of government transparency in access to information. Generating public policies to condemn or penalise those institutions, individuals or legal entities that transgress the collective right by spreading false information.
- J) Propose public policies that generate effective universal access to health services, generating mental health programmes, both for public servants in the health sector and for the population in general. Working more on the aspect of emotional intelligence.
- J) Generate actions by the 3 forms of government to generalise and unify public information in the health sector, with effective systems applying epidemiological science to generate congruence and peace in society in subsequent decision-making.
- J) Establish public policies aimed at effective citizen control over national and public security, managing actions that make it possible to comply with prevention standards for reporting actions or omissions of abuse or inter-institutional and/or family violence.

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