

COVID-19 AND PSYCHOLOGICAL COPING RESOURCES:

Short infographics:

I really like these posters from Hong Kong Red Cross on Psychological coping:

- For general population: https://www.communityengagementhub.org/wp-content/uploads/sites/2/2020/03/MHPSS-during-disease-outbreak_GEN_ENG_final.pdf
- For health care providers: https://www.communityengagementhub.org/wp-content/uploads/sites/2/2020/03/MHPSS-during-disease-outbreak_provider_ENG_final.pdf
- For older adult communities (e.g. a population who is already socially isolated): https://www.communityengagementhub.org/wp-content/uploads/sites/2/2020/03/MHPSS-during-disease-outbreak_elderly_ENG_final.pdf

All the posters are listed on the Red Cross/Crescent website here:

<https://www.communityengagementhub.org/what-we-do/novel-coronavirus/page/1/> They have several pages of resources, and in different languages.

Longer, more detailed resources:

- I really liked this document from IASC. It was thorough and then had practical suggestions for different groups (e.g. older adults, people with disabilities, etc). It is not specific to healthcare workers throughout but they are specifically mentioned in detail on page 6: <https://interagencystandingcommittee.org/system/files/2020-03/MHPSS%20COVID19%20Briefing%20Note%20%20March%202020-English.pdf>
- There was also a recent publication in the Lancet about provision of psychological intervention to those affected by COVID-19: <https://app.mhpss.net/?get=354/psychological-interventions-for-people-affected-by-the.pdf> Honestly, I didn't find it too helpful apart from it emphasizing the frontline staff take over these roles due to infection precautions and that makes it tricky to provide- yet they should have some sort of mental health team also available. It didn't provide a whole lot of guidance for what TO DO. Maybe you'll get something different from it though.
- Some excellent resources and suggestions from the American Psychological Association regarding coping during social distancing, quarantine or isolation as well as resources in general <https://www.apa.org/practice/programs/dmhi/research-information/social-distancing>
- National Child Traumatic Stress Network has a resource for parents/caregivers for helping families cope with COVID-19: <https://www.nctsn.org/resources/parent-caregiver-guide-to-helping-families-cope-with-the-coronavirus-disease-2019>
- Anxiety and Depression Association of America resources for COVID-19: <https://adaa.org/finding-help/coronavirus-anxiety-helpful-resources> (e.g. talking to your anxious child, managing anxiety during isolation, older posts on health anxiety in general, media articles featuring experts about COVID-19)

General Tips

Things you can do to support yourself:

- Take breaks from watching, reading, or listening to news stories, including social media. Hearing about the pandemic repeatedly can be upsetting.

- Take care of your body. Take deep breaths, stretch, or meditate. Try to eat healthy, well-balanced meals, exercise regularly, get plenty of sleep, and avoid alcohol and drugs.
- Make time to unwind. Try to do some other activities you enjoy.
- Connect with others. Talk with people you trust about your concerns and how you are feeling.
- [Sharing the facts](#) about COVID-19 and understanding the actual risk to yourself and people you care about can make an outbreak less stressful.
- When you share accurate information about COVID-19 you can help make people feel less stressed and allow you to connect with them.

For responders specifically:

Responding to COVID-19 can take an emotional toll on you. There are things you can do to reduce secondary traumatic stress (STS) reactions:

- Acknowledge that STS can impact anyone helping families after a traumatic event.
- Learn the symptoms including physical (fatigue, illness) and mental (fear, withdrawal, guilt).
- Allow time for you and your family to recover from responding to the pandemic.
- Create a menu of personal self-care activities that you enjoy, such as spending time with friends and family, exercising, or reading a book.
- Take a break from media coverage of COVID-19.
- Ask for help if you feel overwhelmed or concerned that COVID-19 is affecting your ability to care for your family and patients as you did before the outbreak.
- Other tips for first responders during emergency responses:
<https://emergency.cdc.gov/coping/responders.asp>

SOURCE for above: <https://www.cdc.gov/coronavirus/2019-ncov/prepare/managing-stress-anxiety.html> (note, this article also has some good tips for parents of children too)

For people with OCD/Anxiety:

- Understand why this time may be so triggering for OCD and anxiety:
 - Many people are talking about it so that can increase our *perception* of risk due to availability of this risk information- actual risk may not be different but increased availability of many people talking about something, or personal stories, can affect our perception
 - Government recommendations for “frequent” or “regular” handwashing is somewhat vague. That lack of precision and element of uncertainty can be threatening for people who worry about the specific definitions of certain terms or phrases (e.g. do I know if I washed them frequently “enough” or long “enough”)
- With regard to hygiene practices- complete the government recommendations for hand washing and hand sanitizer use- but don’t go above and beyond. Notice how doing “extra” can be a safety behavior (as opposed to a behavior that actually reduces risk) and how it may actually cause your anxiety (and associated behaviors) to become worse. Recognize how OCD will set rules and guidelines in your brain- it acts like it’s an authority on all things safety and tells you what you should or shouldn’t do. But OCD is not the authority on this. It doesn’t have the knowledge here- follow the government guidelines instead.
- If you have thoughts like “I didn’t do it enough” or “I didn’t do it right” or “let me check I’ve cleaned it one more time”- acknowledge them but let them go. That’s your OCD/anxiety talking.
- Avoid endless researching and reading of media (including social media) regarding COVID-19. Visit only credible websites or feeds (e.g. CDC, WHO), and try to limit the amount of time each day spent on this activity (e.g. 20mins per day, two chunks of 30mins).

- Remember that often we feel like we can control something if we know everything about it (e.g. are “totally informed”)- and yet realize that’s an illusion. Just because you know the statistics about the outbreak or what is happening in X hospital doesn’t mean that you have any more control over the situation. Instead focus on what you CAN control.
- Avoid endless chatting and discourse about COVID-19 with others. As mentioned above, know that personal stories are more “sticky” in our memories and we perceive them as more threatening than statistics/numbers. One may have an increase in *perceived* risk- although actual risk may be no different. Also remember that panic and anxiety have contagious elements as well so the more you may talk to people who are also feeling anxious, the more anxious you in turn are likely to feel.
- Remind yourself that feelings are a source of information- but they are not facts. E.g. I may *feel* scared seeing a dark, moving shadow, that doesn’t mean that there is something actually threatening there. My emotion is quick, informative about the possibility of threat, but I can also check this out too. Feelings are not facts.
- Recognize that there will be uncertainty in this situation and coming weeks. Also recognize that OCD and anxiety are rooted in an intolerance of uncertainty. Part of anxiety treatment is about learning that 1) Uncertainty is not necessarily bad or catastrophic and 2) You can cope- whether it’s your ability to cope with not knowing or controlling the future, or your ability to cope with “worst case” scenarios. Know that it may be hard to relax, or not feel anxious, unless you have a clear, 100% guarantee of safety. But also recognize this is the intolerance of uncertainty and that 100% certainty isn’t possible. Focus on what you can control and how you can cope instead.
- Stick to usual routines as much as possible. Be sure to include activities of pleasure and mastery as much as possible (e.g. making tea, having a treat, watch a favourite movie, do a push up challenge with yourself or a partner, etc).
- Use telehealth to speak to a professional if necessary. Most psychologists and EFAP programs have video and/or phone appointments set up to support you if necessary.