



Mental Health in the COVID-19 Era

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In March 2020, the World Health Organization (WHO) declared the novel SARS CoV2 (COVID-19) a global pandemic. People abruptly adjusted their daily living, work life, and social engagement in response to ongoing and evolving information about the unprecedented threat of COVID-19. Part of these adjustments included working from home, physically distancing when around others, and in some cases, complete quarantine. As a result of the shift to new ways of functioning, people commonly experienced mental and emotional burdens, and the negative consequences persist nearly two years later. These consequences include physical and emotional isolation, grief and loss, and mental health concerns. Yet, amidst the challenges, people have also demonstrated resilience and found creative solutions to work and social life. This paper serves as an overview of adverse impacts of the pandemic and suggested strategies for coping.

Mental Health Consequences

People around the world adapted their regular routines and functioning due to the pandemic. As a result, people commonly experienced isolation, grief as a result of death-related and nondeath-related losses, and mental health concerns. The following sections include a brief discussion of these areas.

Isolation and Loneliness

Loneliness, already on the rise for adults prior to COVID-19 (Hawkely & Caccioppo, 2010), was likely exacerbated by the pandemic. Physical distancing, though deterring the spread of the virus, meant many people ceased being physically present with family and friends. With increased physical distancing, individuals commonly reported loneliness and a sense of isolation. This is consistent with relational cultural theorists' position that the root of human suffering traces back to isolation (Banks, 2006; Jordan, 2010). Social support buffers negative impacts of stress due to COVID-19 across all age groups (Li et al., 2021). Without social support and engagement, isolation may lead to other mental health concerns such as depression and posttraumatic stress symptoms (Wise et al., 2019).

Grief

Grief remains a major outcome of COVID-19. The pandemic produced many forms of loss including the death of loved ones, loss of employment, and missing routine or significant moments and opportunities. Several types of grief associated with the pandemic include: *ambiguous loss*, *anticipatory grief*, *complicated grief*, and *disenfranchised grief*.

Ambiguous loss seems ubiquitous in situations where “the unknown” predominates (Boss, 2010). The pandemic led to ambiguous losses, or unresolved grief, for many people who were physically separate from other people as well as absent from personal or professional settings amidst uncertainty about the duration of the pandemic and questions about the future. Looking ahead in this manner prompts the next form of grief, anticipatory grief. With the 24-hour news cycle and constant access to social media combined with the fear that the “new normal” will continue to revolve around rates of infection, hospitalization, and death, people may anticipate continued losses of major events, such as graduations and weddings.

Complicated grief may present similarly to anxiety or depression, yet this form of grief distinctly relates to loss and is experienced over an extended period of time (Kersting et al., 2009). Grief may become complicated when circumstances, beyond one's control, occur and intensify the experience of loss (Wallace et al., 2020). COVID-19 created the conditions for complicated grief as it not only caused loss (e.g., death), it exacerbated the loss. Those who could not say goodbye to their dying loved ones and could not hold funerals, memorials, tributes, and other services may experience complicated grief as well as disenfranchised grief, a form of grief one experiences if they believe their loss is not fully acknowledged in society (Wallace et al., 2020).

Other Trauma-Related Concerns

Although the stay-at-home orders were intended to keep people safe by reducing the spread of the virus, those who were vulnerable to domestic violence (i.e., physical, emotional or sexual abuse) by a member of the family or household were not safe if they were quarantined with their perpetrators. The rates of incidents of abuse and violence around the world have only increased during COVID-19 (United Nations Department of Global Communications, 2020). Stressors prompted by the pandemic (e.g., isolation, school closures, and unemployment) allowed for not only more access between perpetrators and survivors but also for escalated levels of stress which commonly leads to violent tendencies and behaviors in the perpetrators (Lee, 2020). Additionally, the pandemic caused decreased availability of social services and resources, further reducing survivors' access to support.

Thus, the paradox of the lockdown for survivors meant the isolation to avoid the threat of the pandemic gave rise to increased threats of partner violence. Relational abuse and intimate partner violence often results in mental health concerns such depression, anxiety, traumatic stress, and suicidal ideation (Lagdon et al., 2014). In addition to mental health concerns, physical health

concerns for survivors of such violence exist along a spectrum from somatic issues to severe injury, if not death.

Helping professionals serving survivors of trauma commonly struggle with experiences of secondary traumatic stress, compassion fatigue, burnout, and vicarious trauma (Rothschild, 2006), which are the helper's internal responses to trauma exposure that negatively impact the helper. During the COVID-19 pandemic, responses of this sort have pervaded personal and professional life for professionals on the front lines providing emergency, medical, or mental health assistance (Hill, 2021). For example, healthcare workers repeatedly witnessing illness and death at a rapid pace and struggling to provide care in overwhelmed facilities caused many of them to feel emotional distress and feelings of helplessness (Hill, 2021) on top of the mental strain of their fear of becoming infected or infecting their loved ones (Xiang et al, 2020). Many mental health counselors, even those who are not working on the front line, experienced shared trauma as they worked with clients across the various presenting concerns that were initiated or exacerbated by the pandemic (e.g., trying to maintain sobriety during quarantine; incidents of interpersonal violence and abuse; grief and loss; distress due to loss of employment, identity, home, etc.) while trying to process similar challenges in their own lives.

Suggestions for Coping and Bolstering Resilience

As people continue to adjust to life during a pandemic and to expand their capacity for managing the aforementioned issues, it becomes increasingly imperative for individuals and families to practice healthy coping strategies. As a licensed professional counselor, the author presents the following areas to foster resiliency during the pandemic and beyond: healthy connection, mindful awareness, practicing healthy habits, and seeking support.

Healthy Connection

Neurobiologically, humans are made to exist and engage in connection with others (Banks, 2006). Relational support provided at the micro level (e.g., partner, family, friends) and macro level (e.g., community, institutions, society) helps mitigate mental health concerns in times of crisis (Li et al., 2021). Throughout the pandemic, many people have taken safety measures that resulted in increased sense of isolation, so maintaining connection through this time and safely engaging in social interactions with family and friends is vital (World Health Organization, 2020). Yet, one should discern the connections that promote good will and good health from those that do not. According to Miller (1986), healthy relationships are comprised of “five good things” (pp. 2-3) including: (a) zest, or a sense of energy derived from spending time with others; (b) personal and relational clarity such that one knows who they are, is clear about the relationship, and understands how they fit in the context of the relationship; (c) a sense of self-worth; (d) creative and productive capacities; and (e) the desire for more connection. The “good things” that characterize healthy connection remain available via video chat, phone call, email, and text message. The important thing is to continue engaging in connection – even if it looks differently.

Taking the above description of healthy connection into account, a related relational concept of authenticity is noteworthy. Authenticity allows one to show up in their relationship without pretense (Jordan, 2010) and to honestly self-appraise one’s own emotional status and mental health concerns. Then, one can begin practicing self-compassion, a practice permitting one to accept their own experience without shame or self-condemnation (Neff, 2003). Connecting to oneself through self-compassion remains important during the COVID-19 era as one navigates their responses to fluid and everchanging circumstances. Additionally, being self-compassionate permits one to show compassion to others (Neff, 2003) – also a necessity during this time. Having

compassion for others allows people to remember that most people are doing the best they can in an unprecedented time.

Mindful Awareness

In a time of uncertainty, one way people can take action and control occurs through staying mindful. Mindfulness, or intentionally directing attention to the present moment without judgment (Shapiro & Carlson, 2017), can include movement-based practices like yoga or meditation techniques, both commonly used to treat mental concerns and for managing stress. In the context of the current pandemic, mindfulness and meditative practice could complement other mental health treatment and reduce anxiety in this unpredictable time (Behan, 2020).

Remaining aware of the intake of information is another form of mindful self-care. Although social media is a source of connection and community support and is relied upon for news, prolonged use of social media may be related to signs and symptoms of depression (Magson et al., 2020). Information from reliable sources such as global and local health authorities can be useful for educating and protecting oneself and others (WHO, 2020). Yet, individuals can limit the information they consume if the constant flow of news coverage and commentary becomes overwhelming. Social media, like most activities, can prove beneficial when engaging with intention, care, and healthy boundaries.

Practicing Healthy Habits

Over the course of the pandemic, many have experienced decreased physical and social activity and increased mental health concerns. Yet, physical health choices impact overall wellness. Further, people can assume a sense of agency and control through addressing their physical movement, nutrition, and sleep.

Regular physical exercise is known to reduce depression, nervousness, and stress symptoms (Jurak et al., 2020). Moving the body through physical activity benefits people via improved immune system and relieves anxiety and depression (Jurak et al., 2020). Keeping physically active – even walking and stretching – helps improve mental health. Although no foods prevent infection, healthy diets promote stronger immune systems and improved mental health. According to the WHO, eating healthy and unrefined foods with vitamins, minerals, dietary fiber, protein, and antioxidants enhances better immune systems and reduces risk of illness (World Health Organization, 2020). The WHO also recommended that people in isolation establish regular sleep routines to manage their mental health (World Health Organization, 2020). Sleep directly impacts immunological responses that are associated with the mental health concerns linked to COVID-19, and better sleep quality is connected to decreased stress and anxiety (Sohel et al., 2021).

Seeking Mental Health Support

Counseling plays an essential role in the response to the COVID-19 crisis. Professional counselors are trained and qualified to explore sequelae of social isolation and loneliness, grief, and mental health disorders. Although the mental health field has included telehealth services for many years, the pandemic prompted many mental health professionals who were previously not using that form of service delivery to quickly pivot toward providing telehealth counseling. A range of mental health services and supports have been successfully designed to virtually meet the mental health needs of specific groups including individual therapy with adults and youth, family therapy, and group therapy. Some graduate training programs and nonprofit community agencies provide counseling services free of charge and others have sliding scale fees based on income to support the mental health needs of those who cannot afford standard costs.

The therapeutic relationship and counseling provides a much needed space for clients who are grappling with a changed world and possibly a changed self as a result of COVID-19. The therapeutic relationship affords safety for clients to reflect on what has been lost and gained during COVID-19. Plans for incorporating strategies such as the aforementioned areas and building on clients' strengths become central to treatment. The benefits of counseling typically include improved sense of self, improved relationships, and greater ability to self and co-regulate in times of adversity and uncertainty. In the context of the pandemic, these benefits have never been more salient.

Conclusion

COVID-19 has impacted and continues to impact mental health. There remains a host of mental health concerns including but not limited to the concerns discussed in this paper. Of course, none of these concerns should be conceptualized without context. One must consider the fact that levels of loneliness were on the rise prior to the pandemic (Hawkely & Caccioppo, 2010). Additionally, and amid the pandemic, there existed civil unrest, a reckoning with systemic racism, a heated political climate, and polarization inclusive of and beyond issues and policies related to COVID-19, vaccines, and masking. Although trauma responses exist for the general public and helpers alike, resilience abounds. Mindful awareness contributes to resilience and well-being in general and in times of heightened stress such as the COVID-19 crisis. Physical activity, nutrition, consistent and positive sleeping habits may be cost-effective, realistic ways to improve physical and mental health. As people continue to adapt to a new normal, they can focus on what they can control, manage, and learn; forge healthy connections; cultivate self-compassion for themselves and compassion for others; and reach out for support and resources.

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