The “Hidden Pandemic” - The Psychological Impact of COVID-19: What can we expect; what we can do.

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The COVID-19 pandemic will likely be a defining event for an entire generation. By the end of this pandemic, we will see well over a million cases of the disease worldwide. Virologists and epidemiologists are helping us prepare for the surge of physical casualties the virus will leave in its wake. But what of the “hidden pandemic?”

History teaches us that there will always be more psychological “casualties” than physical casualties as a result of disasters such as the pandemic. When I use the term psychological casualty, I mean someone who has been adversely impacted to the degree they cannot adequately do the things they need to do. Estimates vary widely but we can say that roughly one third of the population directly affected by the pandemic will suffer such significantly adverse psychological reactions and could benefit from some form of psychological support (Manderscheid, 2006).

In various capacities, I have responded to SARS, the H1N1 influenza, Ebola, and a wide variety of other disasters throughout the world over the last 30 years, including the invasion of Kuwait, the Serbo- Croatian War, the Oklahoma City bombing, the World Trade Center attacks and Hurricane Katrina. While appearing to be very different in their nature and scope, they all followed a similar trajectory of psychological reactions which we expect to see unfold in response to COVID-19. The trajectory I share below is not a fait accompli, rather it is an informed prediction designed to better prepare us to minimize adversity and foster resilience.
We currently find ourselves in the impact/heroic phase of the pandemic. Initial reactions were confusion, shock, fear, and even denial. There were, and continue to be, reflexive acts aimed at self-preservation (fleeing, hoarding, stigmatizing). To some degree we are still in that phase as we anticipate a surge in physical casualties in the next two to four weeks. After the self-preserving reactions of the impact phase, we often see heroic reactions of sharing, support, altruism, and in the cases of emergency services and healthcare professionals, among others, risking their own physical and psychological well-being, and potentially that of their families.

Social distancing and even self-quarantine is being advocated by public health experts. Adherence to such guidelines appears absolutely essential. While essential physically, it actually may inadvertently erode the single best predictor of human resilience which is social cohesion and the support of others. The popular notion of “work-life balance” has become a victim of the pandemic’s forced shelter at home self-quarantine. For most, it is now a matter of what I shall call “work-life integration” where there are no clear lines separating work from family from hobbies. It’s all a blur. But what that may also mean is there is simply no respite to be found.

We will get through this. And when we do we will take a deep collective sigh of relief punctuated by a collective “high five.” In this “honeymoon” phase, we will embrace an attitude of gratitude. Cohesion will be enhanced. But like most honeymoons, it will be short-lived for most.

Disillusionment follows our initial elation of survival. We mourn our losses. We ask ourselves “Why did this have to happen?” We become angry, often searching for someone to blame. Guilt is somewhat common in this phase, survivor guilt being especially severe. Depression and even despair may emerge. Domestic violence may emerge or increase. At times such as these people may question their jobs, marriages, faith, and the very meaning of life itself. Marital discord and divorce often increase. People may quit their jobs. They move their residences in an attempt to escape the remembrances of the past. People who were already facing challenges of mental illness may see their symptoms worsen.
But as I said earlier, we will get through this. Physically, most will heal. Psychologically most will recover and resume their lives, or construct new lives. On the anniversary of this pandemic, we will pause and remember. Then we will move on. Some will re-experience the angst of the past year, but they too will move on.

As I noted earlier, the trajectory I have shared is not a fait accompli, rather it is an informed prediction designed to better prepare us to minimize adversity and foster resilience. Other than this guidance, what else can we do to lessen the adverse psychological impact of COVID-19? Here are a few of the lessons I’ve learned from many of the remarkably courageous and resilient people whom have descended into the belly of the beast and come out stronger:

• Be kind to yourself and compassionate with others. When angered or annoyed, try for even just a moment to take the other person’s perspective. Try to see the world through their eyes.

• Take care of yourself physically and psychologically. Stress can compromise the immune system.

• Left to its own devices, the mind often descends into an abyss of darkness, worry, and despair. Mindfulness combats worry. Whenever your mind takes a distressing excursion, refocus, be mindful of where you are and what you are doing.

• Control what you can, cope with the rest. But remember the only thing you can really control is how you react to the world as it unfolds around you.

• Staying connected to others, though physically distanced, makes you stronger. This is a good time to rekindle old friendships, or bury old hatchets.
• Though we are often eager to help others in distress, learning the principles of psychological first aid can help you ease another’s pain beyond the verbal “hail Mary” we offer when we say “Everything will be ok.”

• Remember that seeking formal psychological or psychiatric treatment when needed helps not only yourself but those who love, and often depend on, you.

• Lastly, remember you are part of something greater than yourself. This is a time to put differences aside. We are all in this together.