

Self-Care in the COVID-19 Era

People living with chronic illnesses are coming up with ingenious coping mechanisms in the face of COVID-19.

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Perhaps no population has been hit as hard by the COVID-19 pandemic as one that is all but invisible in mainstream media: people living with one or more chronic illnesses. In 2018, they numbered around 133 million in the United States.

The term “chronic illness” describes any disease or disorder that significantly impairs an individual’s day-to-day functioning and includes conditions such as HIV, diabetes, heart disease, liver disease and cancer. Regardless of their age or sex, people living with chronic illness are often immunocompromised and require additional medical care. During the coronavirus crisis, that means that they are doubly disadvantaged—more susceptible to COVID-19 and less likely to be able to see their doctors in person due to restrictions.

It should come as no surprise, therefore, that many—though not all—such individuals report a sharp increase in their levels of stress, anxiety and depression.

Adam Hayden is one of them. He’s a writer and palliative care advocate and father of three who was diagnosed with a terminal form of brain cancer known as glioblastoma about four years ago. He needs regular MRI scans and oncology appointments to monitor the disease’s progression, but scheduling these has been difficult since COVID-19 protocols were instituted.

“So that’s been tough,” he says. “I’m used to knowing how I’m doing more objectively on a more regular basis.”

The constant fight to convince hospital leadership that his MRI scans and oncology appointments are necessary has wearied him. But at the moment, Hayden’s medical status isn’t the only stressor in the 38-year-old’s life.

“I’m at this higher risk of complications from COVID because of the chemo that I’ve had,” he says. (Chemotherapy is known to impair the immune response.) “So all of a sudden, regular interaction with friends and things like that have become more risky. What precautions have they followed? Am I another [link in the] chain of transmission?”

To alleviate his anxiety, Hayden journals, attends therapy and does breath work, which refers to a range of breath regulation techniques. Devotees say breath work has a relaxing effect on the body and mind.

Hayden's therapist introduced him to the practice, which has since become an indispensable part of his daily life. Breath work helps him get to sleep and tolerate medical procedures, such as MRIs, "without too much anxiety because these are such anxious times," he says, alluding to the uncertainty about his tumor.

Gloria Searson, ACSW, has also become well-acquainted with breath work in the past few months. She is the founding director and executive director of the Coalition on Positive Health Empowerment (COPE) and has been running self-care workshops during the COVID-19 pandemic. Recent sessions have focused on physical activity, a healthy diet, stress management, grief and loss, posttraumatic stress disorder, sexual health and, of course, breath work.

Like many of her clients, Searson lives with HIV, which she contracted along with hepatitis C in the early 1990s after a period of drug use. She was cured of her hepatitis in 2015 but recently experienced a stroke that has reduced her mobility. Like Hayden, Searson had trouble getting the help she needed because of COVID-19 precautions.

Apart from living with HIV, Searson is at high risk for serious outcomes from COVID-19 because of her age, weight and race. As Searson points out, as a "Black [person who is] overweight with a chronic disease," she is a perfect candidate for the new coronavirus.

Her adult children fear for her safety at work, but Searson is committed to the people who rely on COPE for medical education and testing. Many of them have fared badly with regard to their mental health during the pandemic, she says.

"Especially in the population that I work with, a lot of them are older, with HIV and dealing with lots of medical problems, so the fear of getting COVID just had them back to isolating like the old days," she says, referring to the height of the AIDS epidemic. "I know a lot more people are depressed, a lot more people have anxiety, a lot more people are scared." Once, she even interrupted a suicide.

Stories like Searson's have become more common since the emergence of COVID-19. Rebecca Skolnick, PhD, a licensed clinical psychologist and a cofounder of the Manhattan-based psychology practice MindWell NYC, has noticed a spike in the number of people with existing diagnoses—and people in general—reporting suicidal thinking.

Those with generalized anxiety disorder or obsessive-compulsive disorder have "actually been

handling things almost more effectively because they've been in treatment," Skolnick says, but others have struggled to adjust to the new normal.

"People are generally experiencing a lot of loss, whether it's actual death or health issues or job loss or loss of social life or routine," she says. Loss, of course, is not a diagnosis, but it "could contribute to depression or exacerbate symptoms that might have already been there."

Skolnick says making time for yourself is important when you're under a great deal of stress. "So that might mean listening to calming music, lighting candles, watching [lighthearted] online videos, drinking tea or putting on comfortable clothes," she says.

Depending on your ability level, exercise is also likely to help lift your mood. Skolnick recommends trying to "incorporate a walk or run into your day" or at the very least "making sure you're moving a little bit."

It's one of the oldest tricks in the book, but it works, according to Gina Dallison. As a lifestyle coach who has been living with relapsing-remitting multiple sclerosis since 2009, she lists yoga and daily walks among her main coping mechanisms.

"I have a dog, bless her little heart, and I get outside every day and make sure I'm out in nature," she says.

If striking a Warrior I pose or working up a sweat isn't your speed, Hayden suggests cracking open a notebook. In addition to practicing breath work, Hayden takes some time every day to journal, which allows him to freely express his frustration with the political climate.

"Access to health care [is] a concern, knowing that what I have is a preexisting condition," he says, citing Republicans' repeated attacks on the Affordable Care Act. "But I think just the rhetoric, by and large, about this characterization of folks who are calling for more social support and more welfare programs as communists and as hate groups and as the radical left does affect my mental health."

As a resident of Indiana, a so-called red state, Hayden holds minority opinions. Journaling, unlike posting on social media, he says, allows him to process his thoughts and feelings about policy changes and across-the-aisle mudslinging in a way that will not have repercussions on his relationships with more conservative family members, such as his in-laws.

If you're considering giving journaling a try, Jessie Shedden, an author, speaker and consultant who was diagnosed with early-onset rheumatoid arthritis in her 20s, suggests writing down several affirmations—positive statements such as "I am successful" or "I am talented"—and goals as a starting point.

This "keeps me looking forward [for] inspiration rather than being stuck and rehashing negative

stuff,” she says.

As psychologically beneficial as breath work and journaling can be, it’s important to get out of your head every now and then too. One of the best ways to do this? Maintaining some semblance of a social life.

“I find a lot of comfort from being on the screen with people and hearing people’s voices and having them share with one another,” says Gregg Cassin, a community organizer and activist who, like Searson, lives with HIV. Cassin resides in the San Francisco Bay Area, which has some of the strictest masking and social distancing rules in the nation, so he’s been keeping in touch with friends via Zoom.

But don’t feel tied down to Zoom or FaceTime, Skolnick says. If digital platforms aren’t for you (and they’re not for a lot of people), try something more old-school: Write letters, send cards or put together care packages.

“Emotionally, staying in touch with people is really important. Because [COVID-19] is a global pandemic, it’s helpful to remember that everyone’s going through it,” she says. “Sometimes when people have mental health struggles or even physical health [struggles], they can feel isolated. But in some ways, we’re all dealing with this together.”

Regardless of your health status, there’s certainly no shortage of reasons to be stressed, anxious, depressed or frustrated in the COVID-19 era. The new coronavirus has turned supermarkets and airports from economic hubs into danger zones; the numerous instances of police brutality have exposed the flaws in the legal and judicial systems; and the fallout from the presidential election has widened the ideological gap.

It’s no wonder that 19% of Americans report that their mental health has worsened. If you’re among them, then taking a couple of deep breaths, putting pen to paper, hitting up a friend, going for a quick walk or jog or all of the above could help lift your spirits. Most important, recognize when you’re engaging in negative self-talk, and mute that little voice in your head.

As simple as these activities are, they can make a big difference in your baseline mood. And we could all use a little bit of that right now, regardless of our medical history.

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