

Living through the uncertainties: Covid-19 pandemic

The impact of the SARS-CoV-2 has been to severely disrupt people's lives, while posing an invisible threat. In Hong Kong, we've been particularly fortunate in that our prior experience with SARS has ensured we have a robust and effective system in place to control novel outbreaks of infection, the Centre for Health Protection.



Even then, work makes social distancing ineffective, so we are conflicted about possible exposure to the virus. It is not surprising that under these circumstances, the perceptions of threat can be very high and the lack of available coping options to avoid it are limited at best.

For many people the result is high levels of anxiety, uncertainty, and in many cases a deterioration in mood, especially if facing the loss of social contacts during a lockdown if you are the kind of person who relies heavily on social support to get you through the week.

Research carried out during SARS¹ indicated that population levels of anxiety among Hongkongers remained high in the early stages when the outcome of the epidemic was unclear, but as deaths began to decline, even though the absolute number of cases was still increasing, population anxiety levels went down. We now see a very similar pattern in other countries, such as Italy, Spain and the UK where the peaks of the first epidemic wave appear to have passed.

Empty pockets

The other major cause of anxiety that was less apparent during SARS but most strong during SARS-CoV-2 is financial stress. The loss of income and, for many, of employment has been profound and pushed many to the edge of financial insolvency. This in turn, along with the high uncertainty around virus exposure mentioned above creates a very “short-fuse” situation for many people; while previously having plenty of personal resources and coping capacity to deal with demands, SARS-CoV-2 has created circumstances where much available coping capacity is occupied, leaving little room to accommodate additional demands, such as from family or relationships. This will manifest as an increase in arguments, irritation, and outbursts, in some cases even abusive behaviour, and most people are at risk of at least the lesser of these difficulties.

Chronically ill faces the challenge

There is a third factor for many people, and that is the additional challenge faced by being chronically ill. In one of the earliest studies carried out, colleagues at The Hong Kong Jockey Club Institute for Cancer Care (JCICC) and the School of Public Health at HKU polled 260 recovering cancer patients and almost 100 health individuals.² Surprisingly, cancer patients were actually less anxious about Covid-19 than healthy people, but had greater anxiety about their health. Also, cancer patients were more likely to have catastrophic thinking – thinking where the most extreme outcomes are regularly or constantly imagined or expected, which is associated with increasing anxiety. Cancer patients were more likely to avoid hospital consultations.

Coping with the situation

What can we do to minimise these reactions? First, it is important to monitor how you think about your situation. If you feel particularly vulnerable, and past studies consistently indicate that women feel more, and younger men feel the least vulnerable, remember, people are as a rule very poor at judging risks. So you might simply be scaring yourself unnecessarily, or, alternatively, placing yourself at greater risk, in extreme forms, the macho,

toxic masculinity idea embodied by the risky bravado of some politicians in the West.

If you find your thinking getting panicky, you can make statements to yourself as you would to a family member or friend who was scared – be reassuring, calming and balanced in describing the situation. Try to be realistic, avoid catastrophic thoughts and, if need be talk to others about your worries. If your mood is low and loss of interest in your activities is becoming a problem, then try to get out, maintaining social distancing, and, if you can, start doing some regular exercise – this is the most powerful antidote to anxiety and depression, it is free and you will feel much better. If all else fails, you can seek the help from a qualified clinical or counselling psychologist.



Covid-19 hasn't gone away yet, and we may need to adjust our lives permanently to live with it, but that doesn't mean that you can't adapt and thrive under different conditions to those that existed before Covid-19. Indeed, things have the potential to be even better than before as growing numbers of people realise that there are more options in life than those they were living before.

References

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2. Ng DL, Chan HF, Barry TJ, Lam C, Chong CY, Kok HCS, Liao QY et al. Psychological distress during Covid-19 among cancer survivors and healthy controls. (Under review).

About the author

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But nonetheless, there have still been over 1,000 cases of Covid-19 recorded in Hong Kong and four deaths. The rest of the world is struggling with much more severe Covid-19 epidemics and incoming travellers have been the main source of outbreaks in Hong Kong for some time now.

This is likely to continue to be the case and, despite testing and self-quarantining, it is quite possible that some asymptomatic cases will escape detection, so further outbreaks are expected. This presents a highly uncertain situation for Hongkongers. Eager to return to their normal habits, there is nonetheless the (low) risk of encountering a silent asymptomatic Covid-19 case.

The struggle and anxiety

However, for many people not returning to work or home working is not an option and so they must venture out, as I do, onto packed public transport systems. This scenario presents a classical high stress situation for many. First, the potential hazard from Covid-19 ranges from no symptoms to severe respiratory and other systemic disease to, in the worst case, death.

Additionally, there are no markers for the hazard – it is invisible. So avoiding it becomes infeasible if you have to go out. We rely therefore on assurances from the diligent public health specialists keeping track of the cases. How does one judge how much precaution is needed? This will vary by the degree of susceptibility that a person perceives – a young fit female may deduce she is at very low risk and take very few precautions. If infected, the risk of severe illness is very low, but the risk to others around her, elderly grandfather for example, may be significant. More uncertainty, and very little past experience, not even SARS, prepares us for such widespread and almost total uncertainty.

So here we have two things; a variable, and potentially lethal impact or hazard, and a complete absence of clear markers or warning signs that enable us to avoid that hazard. In this situation, we cannot determine how best to avoid infection, so social distancing and mask wearing are our only two fall back options.