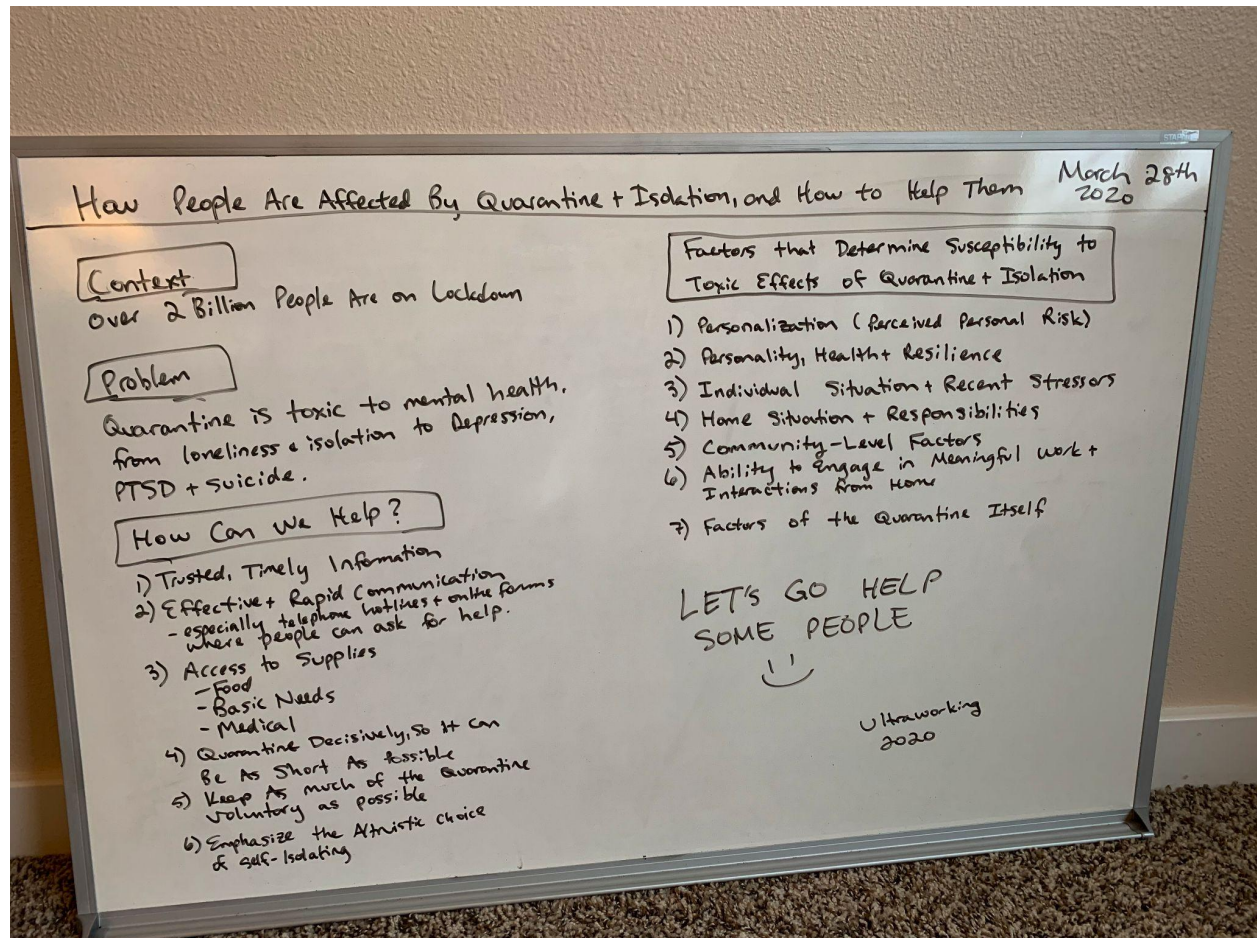


How People are Affected by Quarantine and Isolation, and How to Help Them

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Context

As of March 28th, 2020, one third of the global population, over 2 billion people, are on lockdown due to Covid-19, better known as Coronavirus. Lockdowns are imposed for weeks at a time, and are being extended with minimal warning, because public health and government officials can't predict where their situation will look like in another 24-48 hours, let alone 1-2 weeks.

The situation will remain critical for months, and quarantine and isolation are already becoming a way of life for people in hotspots and beyond.

Problem

Humans are social creatures, and we suffer in isolation, especially forced isolation. 73% of people who were forcibly quarantined during the SARS pandemic suffered low mood, and 57% felt irritable. 31% demonstrated symptoms of clinical depression, and 29% showed signs of PTSD, for a month afterward. 29% felt other people avoided them after they were quarantined.

In fact, loneliness is so toxic that research has shown it to be as deadly as smoking 15 cigarettes per day.

What Can We Do To Mitigate the Damaging Effects of Quarantine? (Text Form)

Description of Key Findings from a study in Lancet on March 14th, 2020 on effects of Coronavirus Quarantine (presented in both text and bullet form).

Since quarantine is essential, data suggest that officials should take every measure to ensure that this experience is as tolerable as possible for people. This can be achieved by: **telling people what is happening and why, explaining how long it will continue, providing meaningful activities for them to do while in quarantine, providing clear communication, ensuring basic supplies (such as food, water, and medical supplies) are available, and reinforcing the sense of altruism that people should, rightly, be feeling.**

As many as 50% of respondents to a survey of individuals quarantined during the coronavirus pandemic felt that they had not received adequate information regarding at least one aspect of home infection control, and not all of the respondents adhered to recommendations. Why some infection control measures were adhered to while others were not is unclear.

A combination of lack of knowledge, an incomplete understanding of the rationale for these measures, and a lack of reinforcement from an overwhelmed public health system were likely contributors to this problem. Of particular interest, strictly adhering to infection control

measures, including wearing masks more frequently than recommended, was associated with increased levels of distress.

What Can We Do To Mitigate the Damaging Effects of Quarantine? (Bullet Form)

- **Information is key**; people who are quarantined need to understand the situation
- **Effective and rapid communication is essential**
 - Recommend setting up a **telephone hotline or online service dedicated to answering questions** about the illness in question and as to what people should do should they develop any symptoms.
- **Supplies** (both general and medical) need **to be provided**
- The quarantine period should be short and the duration should not be changed unless in extreme circumstances
- Most of the adverse effects come from the imposition of a restriction of liberty; voluntary quarantine is associated with less distress and fewer long-term complications
- Public health officials should **emphasize the altruistic choice of self-isolating**

What Affects Susceptibility to Poor Outcomes from Quarantine?

Personalization (how much does it affect ME?)

- Risk stratification (age, immune status, chronic illnesses, respiratory compromise)
- Perception of danger to self
- Perception of severity/risk of the disease
- Level of disruption of daily activities
- Propensity for risk-taking behavior
- Anxiety/stress level in general
- Consumption of media
 - Amount (number of minutes/hours)
 - Slant/sensationalism of media outlet
 - Trustworthiness of media they are accessing

- WHO, CDC, local health department vs biased news media outlets aiming for ratings

Personality, Health & Resilience

- Flexibility/adaptability
 - Also overall preparedness for and attitude toward change
- Engaging in healthy coping mechanisms
 - News fast, physical movement/exercise, meditation, food choices
- Mental health
 - Depression & anxiety especially increase risk for poor outcome with quarantine/isolation
- Physical health
 - Need to engage in health care regularly for any reason
 - Physical pain level, especially chronic pain
- Extraversion vs introversion

Individual Situation

- Personal support network
 - Proximity of friends & family, both in-person & digital, and both physically and emotionally
 - Engagement with community
 - Civic, religious, hobby, anything that includes a component of identity
- Financial solvency
- Overall stress level
- Age

Recent Stressors

- Death of a parent/spouse/child, divorce, marriage, new home, new job or newly unemployed
- Financial problems, marital separation or strain, new baby or pregnancy, chronic illness, imprisonment of loved one
- Retirement or major life transition such as graduation from school, child leaving the home
- Inability to access basic food/supplies, business stress, promotion, stress with inlaws
- Number of people in home
 - Alone = much higher incidence of isolation/loneliness
 - Partner/roommate and kids suddenly spend all time together = can create anger/frustration

- Presence/absence of pets
- Proximity to support network (spouse/friend/roommate in home for support? family close?)
- Stability, status of rent/mortgage payment
- Amount of space in home (to avoid arguments)
- Basic staples - food, water, sanitation, strong internet

Responsibilities

- Home/family
 - Children, elderly parents, disabled adults and others requiring care
- Community
 - Vulnerable people and groups the person helps through their hobby/religious affiliation
 - meal delivery to elderly, letters to prison inmates
- Teachers
 - Students, parents, colleagues, administrators and the public
- Healthcare Workers
 - Patients, families, colleagues, administrators and the public
- Businesses
 - To employees, employees' families, customers, shareholders
- Leaders
 - Who supports the church pastor, the CEO/founder, the doctor and the school principal?

Community Factors

- Disease activity
 - How close is it to my home? how severe is it near me?
- Community response
 - Neighborhood, borough/vicinity, city/town, county, state/province, country and world
- Community support
 - Response of religious organizations, local health department, civic organizations to helping the community members in need
- Media creation & consumption patterns
 - e.g. Facebook "echo chamber" of friends & family can create both horrific and Pollyanna-ish beliefs
 - Slant/sensationalism of local news, as well as viewership
- Access to food, healthcare, medicine & other necessities close to home
- Duration of stay in the community

- Longer = more opportunity to be engaged with support system of the community

Engagement Factors

- Ability to engage meaningfully with work from home
 - Able to WFH without issue? Sort of? Not at all?
- Ability to engage in meaning-making non-work activities from home
 - Hobbies, learning interests, passion projects
- Ability to engage in social contact from home
 - Tech-savviness, ability/willingness to engage with friends/family using technology
- Whatever helps the person feel engaged in pursuit of meaning from their home

Quarantine Features

- Length
- Uncertainty
- Severity
 - Recommendation vs Request vs Requirement
 - Imposition of fines for breaking?
- Extensions
 - Frequency, how likely to be done again, and how well communicated

Conclusion

Quarantine is a way of life for 1/3 of the global population as of March 28th, 2020, due to the Coronavirus. Quarantine is necessary to protect the world and health care systems against surges of the Coronavirus causing mass illness and death. Quarantine is noxious to human health, and immediate action is needed to mitigate its destructive effects on quarantined and isolated individuals, groups and societies.

The six crucial elements of effective quarantine support include: 1) timely and trustworthy information, 2) effective and rapid communication (including ways to ask questions), 3) basic health and food supplies, 4) knowledge of the quarantine duration, 5) allowing as much of the quarantine to be voluntary as possible, and 6) understanding of the altruistic benefits of self-isolating.

Susceptibility to poor outcomes from quarantine are affected by the following 7 areas: 1) perception of effect on one's self, 2) personality, health & resilience, 3) individual situation and

recent stressors, 4) home situation and responsibilities to provide for others, 5) community factors, 6) engagement factors and 7) features of the quarantine itself.

This report 1) provides context on the global Coronavirus quarantine and isolation situation, 2) describes how people are affected by quarantine, 3) explains how to best serve them, and 4) assists those providing quarantine support to determine who is most at risk from damaging effects of quarantine and isolation.

Let's go help some people!

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