

#### Health and wellness initiatives - Lunch and Learn

# Psychological resilience: strategies for strengthening mental health during isolation

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#### Overview

- 1. Mental health during isolation: what do we know?
- 2. How do we define and measure mental health?
- 3. How can I improve my mental health and increase my resilience: What helps?



## Mental health during isolation: what do we know?



Review paper: Serafina, G., Parmigiani, B., Amerino, A., Aguglia, A., Sher, L., Amore, M. (2020). The psychological impact of COVID-19 on the mental health in the general population. *QMJ: An International Journal of Medicine*, *113*, 8, 531-537. <a href="https://doi.org/10.1093/qjmed/hcaa201">https://doi.org/10.1093/qjmed/hcaa201</a>

Eight studies reviewed:

Restrictions and Lockdowns: isolation was associated with feelings of uncertainty, anxiety, pervasive loneliness, depression, fatigue, boredom; distress, impaired cognitive functioning and decision making, increased alcohol use.

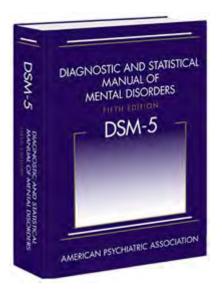
Quarantine: prevalence of emotional disturbance, depression, stress, mood alterations and irritability, insomnia, post-traumatic stress symptoms, anger, and emotional exhaustion was higher in individuals who experienced quarantine compared to those who did not.



#### How do we measure mental health?

#### **Anxiety**

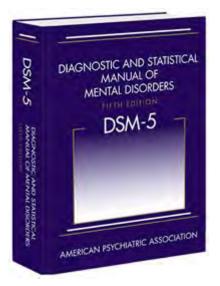
- 1. Excessive anxiety and worry occurring most days, about several events (e.g., work or school performance)
- 2. It is difficult to control the worry
- 3. The worry and anxiety are associated with 3 or more of these symptoms:
  - Restlessness or feeling keyed up or on edge
  - Being easily fatigued
  - Difficulty concentrating or mind going blank
  - Irritability
  - Muscle tension
  - Sleep disturbance (difficulty falling asleep, staying asleep, or restless, unsatisfying sleep)



#### How do we measure mental health?

#### **Depression**

- 1. Depressed mood most of the day, nearly every day (feeling sad, empty, hopeless, tearful)
- 2. Markedly diminished interest or pleasure in all, or almost all, activities, most of the day, nearly every day

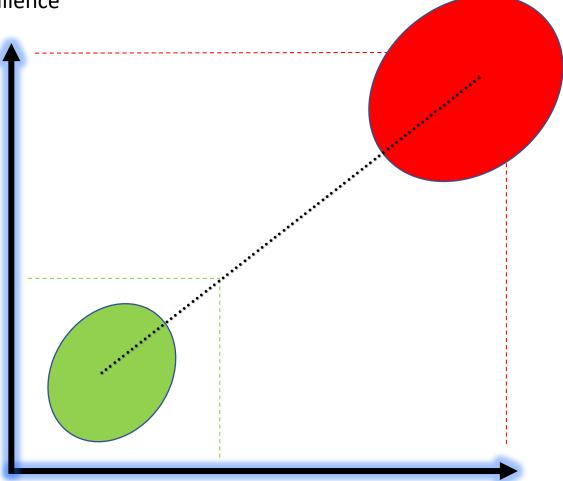


- 3. A change of more than 5% in body weight, or an increase or decrease in appetite, nearly every day
- 4. Sleep disturbance (insomnia, or, excessive sleeping)
- 5. Feeling restless or agitated, or, feeling extremely slowed down
- 6. Fatigue or loss of energy nearly every day
- 7. Feelings of worthlessness or inappropriate and excessive guilt
- 8. Poor concentration, indecisiveness nearly every day
- 9. Recurrent thoughts of death (not just fear of dying), recurrent suicidal thoughts

Five symptoms including either #1 or #2



High emotional distress Weak resilience



Low emotional distress Strong resilience

High emotional distress Weak resilience



#### How do we measure mental health?

Depression and Anxiety

Depression Anxiety and Stress Scale (DASS42)

normal → mild → moderate → severe → extremely severe

Depression

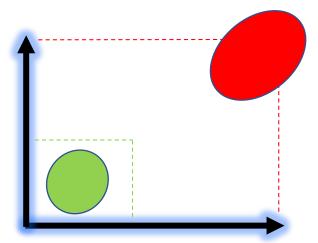
Patient Health Questionnaire (PHQ-9)

minimal  $\rightarrow$  mild  $\rightarrow$  moderate  $\rightarrow$  moderately  $\rightarrow$  severe  $\rightarrow$  severe

Anxiety

Generalized Anxiety Disorder (GAD-7) Scale

mild → moderate → severe

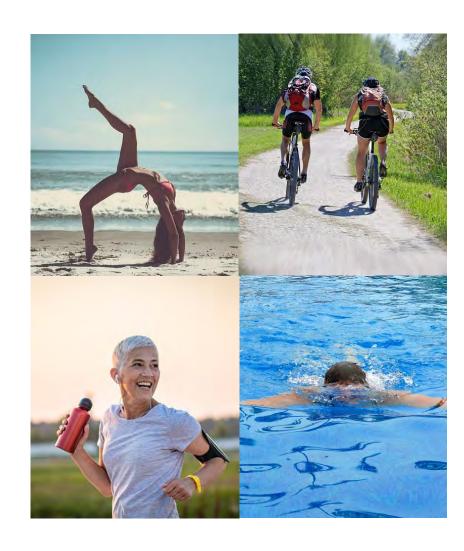






# What helps?

# EXERCISE











# POSITIVE CONNECTIONS





## MEDICATION





# PSYCHOTHERAPY









# Does everyone need cognitive therapy?

## Does everyone need Cognitive Therapy? (No, but...)

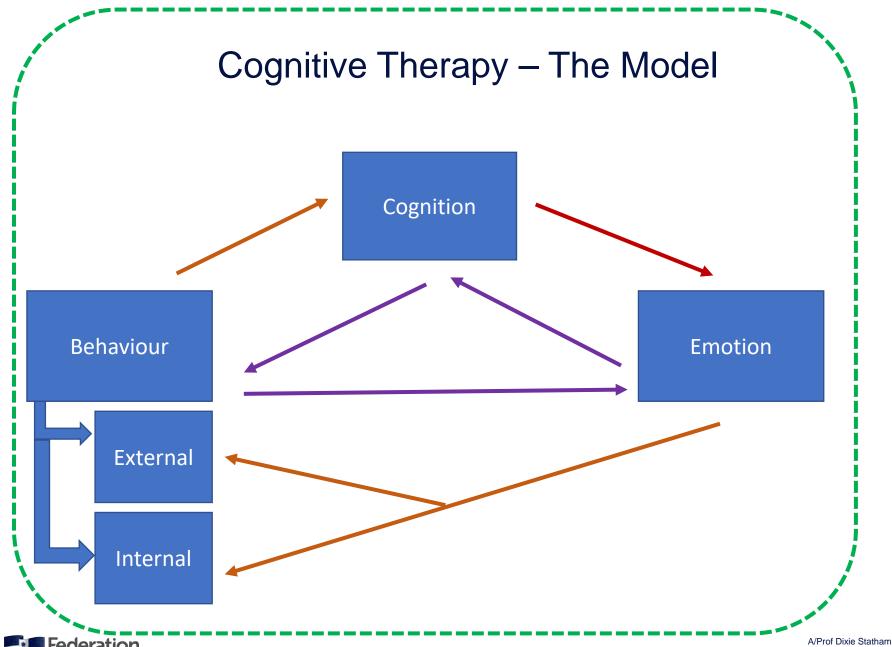
High emotional distress Weak resilience Understanding and using evidenced-based cognitive techniques is helpful for anyone wanting to improve their psychological functioning and resilience.

Low emotional distress Strong resilience

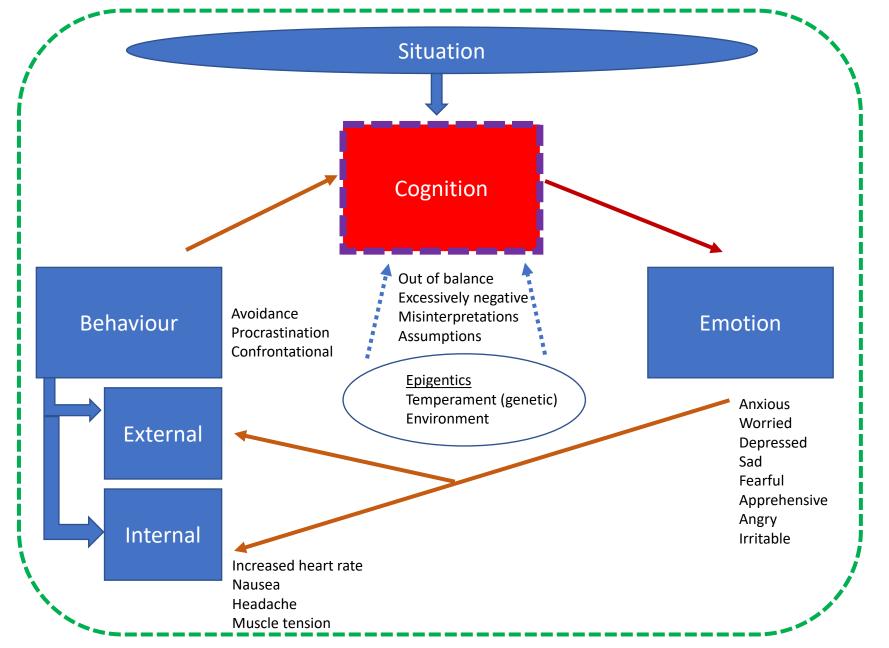


High emotional distress
Weak resilience

A/Prof Dixie Statham





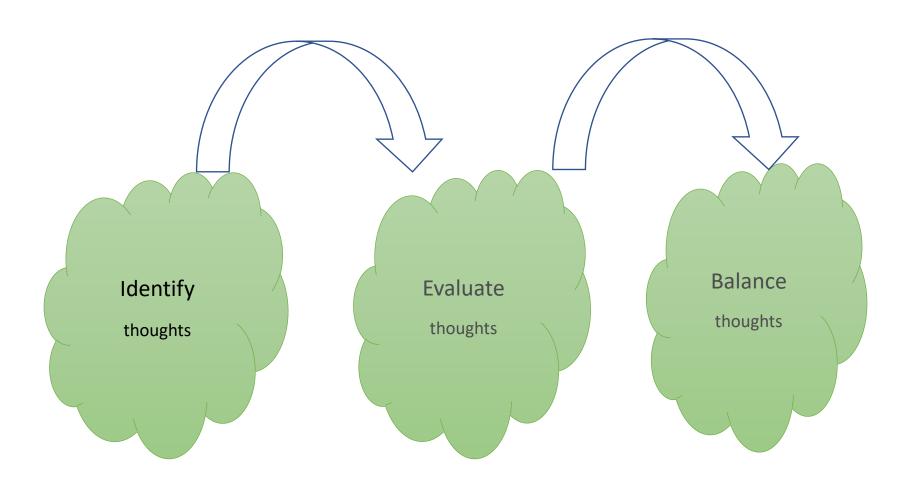






## How can I use this model?

## A Three Step Process





### Step 1. Identify

The out-of-balance, negative, exaggerated or unrealistic/distorted patterns of thinking which can often occur automatically, and lead to the onset and the continuation of negative psychological states (frustration, anger, anxiety, depression...)

#### Common types:

- Polarised thinking (black and white thinking).....thinking in extremes, something is either all good or all bad
- Overgeneralisation.....making global attributions; tendancy to use "always" and "never"
- Catastrophising.....thinking that the worst consequences will always occur
- Personalisation.....taking things personally, i.e., blaming yourself for circumstances that are not your fault, or are beyond your control

Automatic Negative Thoughts (ANTS)





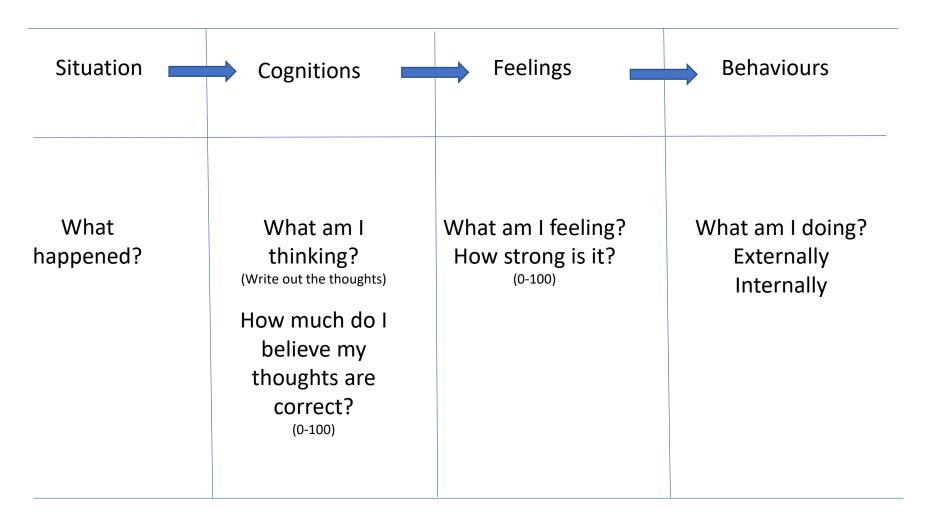
#### Common types:

- Mind-reading.....assuming that you know what others are thinking, without any evidence
- Filtering .....ignoring any positives and focussing exclusively on negatives
- "Should"......telling yourself what you 'should' do, and evaluating yourself negatively when you don't do the 'should'
- Emotional reasoning....believing that the way you feel about a situation is a reliable indicator of reality, rather than looking for evidence
- Labelling.....attaching critical, blaming labels to oneself (harsh self-criticism) and to others



### The Thought Record

#### Step 1: Identify:





The Thought Record

#### Cognitions Situation **Feelings** I forgot about an I'm an idiot Anxious important meeting This is a disaster Guilty where I had to Afraid My manager present a report on will think I can't my team's do my job progress to the seníor manager I've let everyone catastrophising down mind reading The team will be polarised thinking angry with me I'll never get promoted now

#### **Behaviours**

Avoidance:

labelling

Don't answer the phone

Avoid my team members

Avoid my manager

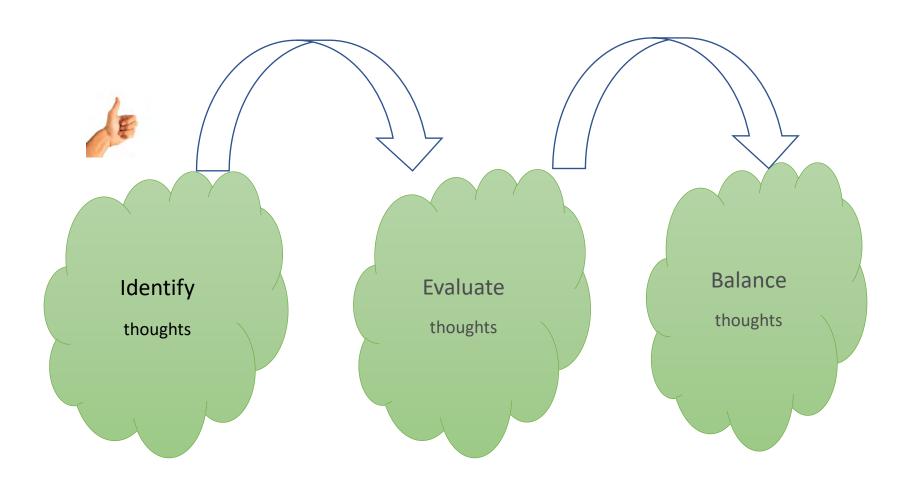
Tense

Shaky

Tearful



## A Three Step Process





## Step 2. Evaluate

My thought (s):
What evidence do I have that supports my thought?
What evidence do I have that does not support my thought?
What would I say to a friend if they were thinking this?
Am I worrying about something I can't control?
How does this thinking help me?

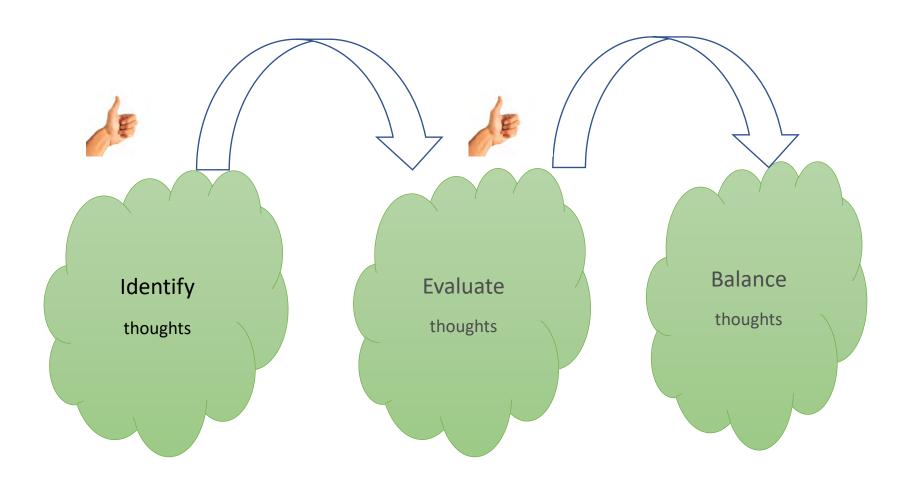


#### **Evaluate**

Is there possibly another reason, other than what I'm thinking, that would explain this?
Am I interpreting this situation without all the evidence?
What is the worst possible thing that could happen? (Am I catastrophising?)
Am I basing my thoughts on facts or on feelings?
Could I be misinterpreting the evidence?
Am I seeing this situation in black and white terms, when it's actually more complicated?



## A Three Step Process





#### Step 3. Balance

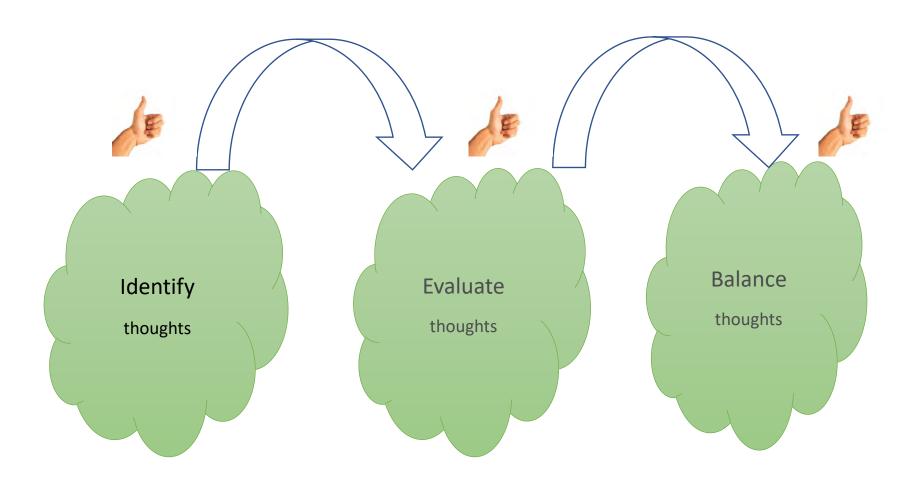
After looking at all the evidence for and against my thought(s), and having asked myself the evaluating questions, I balance my thinking:

#### Thought Record

#### **Behaviours Feelings** Situation Cognitions Engage: I forgot about an I made a místake Hopeful important meeting call my manager and This is not a Bit concerned where I had to apologíse good situation Mostly present a report on Talk to my team and comfortable My manager my team's apologise will be progress to the wondering what senior manager Offer to make a recorded happened presentation Some of the team may feel let down or annoyed I hope this doesn't affect my promotion.



## A Three Step Process





#### The take-away points:

- ❖ We are *all* affected psychologically by the experience of isolation
- Levels of emotional distress occur on a spectrum (low to high), as does resilience (weak to strong).
- Emotional distress can be measured
- Strategies we can use to support our psychological health include:
  - Exercise
  - Diet
  - Positive Connections
  - Medication
  - Psychotherapy

#### Cognitive techniques

- \* Identify out-of-balance thoughts (recognise the ants when they appear)
- \* Evaluate the thoughts (how are these ants helping me?)
- \* Balance the thoughts (getting the ants out of your head)



#### Resources

CENTRE FOR CLINICAL INTERVENTIONS: is a specialised clinical psychology service based in Perth - useful online resources.

Back from the Bluez - an online, self-help workbook (free) with 9 modules for understanding depression and strategies for how to manage your mood: <a href="https://www.cci.health.wa.gov.au/Resources/Looking-After-Yourself/Depression">https://www.cci.health.wa.gov.au/Resources/Looking-After-Yourself/Depression</a>

Looking After Yourself: Self Help Resources for Mental Health Problems. <a href="https://www.cci.health.wa.gov.au/Resources/Looking-After-Yourself">https://www.cci.health.wa.gov.au/Resources/Looking-After-Yourself</a>

THIS WAY UP: is part of the Clinical Research Unit for Anxiety and Depression (CRUfAD). CRUfAD is a joint facility of St Vincent's Hospital and the University of New South Wales established to reduce the impact of anxiety and depressive disorders on individuals.

iCBT: internet based CBT + other well-being courses (low fixed cost) <a href="https://thiswayup.org.au/how-we-can-help/courses/">https://thiswayup.org.au/how-we-can-help/courses/</a>

Blog: Supporting you through the COVID-19 Pandemic (free online tools) <a href="https://thiswayup.org.au/blog/">https://thiswayup.org.au/blog/</a>

