

PSYCHOLOGICAL EFFECTS OF QUARANTINE DURING THE CORONAVIRUS OUTBREAK: *What Healthcare Providers Need to Know*

Quarantine is defined as the separation of individuals who may have been exposed to an infectious disease from the rest of the population to determine if they are ill and to reduce their risk of infecting others. During the coronavirus (COVID-19) outbreak, quarantine has been used as a public health strategy to reduce disease transmission. COVID-19 quarantine efforts have ranged from the mass quarantine of entire cities in China, to isolation in government-run

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facilities, to self-isolation at home. While quarantine can broadly serve the public good, it is also associated with psychological challenges for those quarantined, their loved ones, and the healthcare workers caring for them. Described here are the psychological effects of quarantine, as well as strategies for how

healthcare providers can care for their patients' and their own mental well-being during periods of quarantine.

Stressors of Quarantine and their Psychological Effects

Stressors during quarantine include:

1. **Frustration and boredom related to the isolation of quarantine**, which involves loss of one's usual routine (e.g., regular home and work activities, shopping for necessities) and limited social and physical contact with others.
2. **Inadequate supplies and access to regular medical care**, including food, water, or change of clothes as well as masks, prescriptions, and thermometers.
3. **Insufficient information**, such as lack of, or delayed, information from public health authorities, often due to poor coordination among health and government officials; unclear guidance; confusion about reasons for quarantine; and perceived lack of transparency.
4. **Longer durations of quarantine** (i.e., 10 days or longer), as well as extension of quarantine length.
5. **Fears about becoming infected and/or infecting others**, which can manifest as increased attention to and worry about one's health and physical symptoms, and may be particularly concerning for pregnant women and parents of young children.

Stressors following quarantine include:

1. **Financial loss**. Absence from work, healthcare costs, and other unanticipated financial burdens can result in socioeconomic distress, particularly among those with lower incomes.
2. **Stigma from others**. Stigmatization and rejection by neighbors, co-workers, friends, and even family members can manifest as being treated differently or with fear and suspicion, being avoided or excluded from leisure, workplace, or school activities, and experiencing stigmatizing comments. Stigma can be exacerbated if quarantined individuals are members of a particular ethnic or religious group.
3. **Getting back to one's "normal" routine**. Returning to usual work and social routines may take anywhere from several days to several weeks or even months. Knowing that it might take time to get back into regular routines can help with concern, anxiety, and frustration.

Promoting Psychological Wellbeing During Quarantine

1. **Use communication as an intervention**. Clear, understandable, and practical communication can reduce adverse psychological responses and increase behavioral adherence. Provide rapid, repeated,

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- and developmentally and culturally appropriate communications about the nature of the disease, the reasons for quarantine, and other essential information.
2. **Facilitate communication with loved ones.** Knowledge of loved ones' conditions can have a powerful impact on the emotional health of quarantined individuals and improve adherence to recommended quarantine. For example, knowing that loved ones are safe, healthy, and well-cared for can reduce stress, while increased stress should be anticipated when information is lacking or in cases of worrisome news. Before quarantine, allow sufficient time (within the limits of public health concerns) for patients to make arrangements, reassure their loved ones, and say goodbye. During quarantine, facilitate the use of technology (e.g., phone and video calls, social media) to keep loved ones in contact with each other.
 3. **Prepare for quarantine.** Households and facilities under quarantine will need adequate food, household supplies, and medications to last for the duration of the quarantine. Once quarantine is imposed, there may be limited ability to move about and shop as usual. Obtain necessary resources in advance of quarantine if possible, e.g., by making this part of a family's or organization's disaster preparedness planning.
 4. **Reduce boredom and isolation.** Planning for activities during quarantine can help reduce boredom and lessen the focus on symptoms and feelings of being isolated from family and friends. As above, facilitating access to the internet and social media is important to maintaining social networks and remote communication while in quarantine. However, media exposure should be monitored, as too much exposure and exposure to unreliable sources can increase stress.
 5. **Take care of yourself.** Healthcare providers are also vulnerable to experiencing the psychological effects of quarantine, and this can be compounded by the stress of caring for sick and distressed patients. Make sure your own basic needs are met, including: eating, drinking, and sleeping; taking breaks at predetermined intervals; checking in with colleagues and loved ones; and ensuring that your family and organization are safe and have a plan in place for possible quarantine. If you are likely to work with infected individuals, have frank discussions with your family about the risk to you and to them and steps being taken to minimize that risk. Plan for the possibility that you may be quarantined separately from them if they are not exposed.
 6. **Keep quarantine as short as possible.** When advising patients on length of time in quarantine, restrict the length to what is scientifically reasonable and take care not to adopt an overly cautious approach. In addition, do not extend quarantine length unless absolutely necessary, and if this occurs, provide patients with up-to-date information as soon as possible.

Resources

Centers for Disease Control and Prevention (CDC).
<https://www.cdc.gov/coronavirus/2019-ncov/index.html>

Center for the Study of Traumatic Stress (CSTS):
<https://www.cstsonline.org/resources/resource-master-list/coronavirus-and-emerging-infectious-disease-outbreaks-response>

Brooks, SK et al. The psychological impact of quarantine and how to reduce it: rapid review of the evidence. *The Lancet*. Published online February 26, 2020.
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