

Emotions and Coping During Crisis

Emotions and Coping During Crisis - Session 6

This Q&A session on the theme "Local Contexts and Policy Emotions " is based on 10 projects registered on the WPRN database



Q&A session - Emotions and Coping During Crisis

1. [Humor Styles Predict Emotional and Behavioral Responses to COVID-19](#)

A correlational study ($n = 180$ adults) in the United States tested the hypothesis that self-directed humor styles predict emotional responses to COVID-19, specifically stress and hopelessness, and in turn predict engagement in protective behaviors. Results from a sequential mediation analysis supported our hypotheses. First, to the extent that people have a self-enhancing humor style they perceived less stress and hopelessness associated with COVID-19 and as a result reported engaging in more protective behaviors. Second, people higher in self-defeating humor style showed the opposite pattern; they perceived more stress and hopelessness due to COVID-19 and thus reported engaging in less protective behaviors. Implications for theory and application are discussed.





Humor Styles Predict Emotional and Behavioral Responses to COVID-19 - WPRN21 Conference

2. [Gender Differences in Emotional Responses to COVID-19](#)

Among the critical challenges around the COVID-19 pandemic is dealing with the potentially detrimental effects on people's mental health. Designing appropriate interventions and identifying the concerns of those most at risk requires methods that can extract worries, concerns and emotional responses from text data. We examine gender differences and the effect of document length on worries about the ongoing COVID-19 situation. Our findings suggest that i) short texts do not offer as adequate insights into psychological processes as longer texts. We further find ii) marked gender differences in topics concerning emotional responses. Women worried more about their loved ones and severe health concerns while men were more occupied with effects on the economy and society. This paper adds to the understanding of general gender differences in language found elsewhere, and shows that the current unique circumstances likely amplified these effects. We close this paper with a call for more high-quality datasets due to the limitations of Tweet-sized data.

WPRN

Takeaways

- Female focus on family and friends (all analyses)
- Male focus on national impact and future outlook (topic models)
- Female focus on negative emotion (n-grams, LIWC)
- Replicates previous research on gender differences
..Effects potentially exacerbated by crisis?

Full paper ->

Gender Differences in Emotional Responses to COVID-19

3. [Worry, coping and resignation - A repeated-measures study on emotional responses after a year in the pandemic](#)

The introduction of COVID-19 lockdown measures and an outlook on return to normality are demanding societal changes. Among the most pressing questions is how individuals adjust to the pandemic. This paper examines the emotional responses to the pandemic in a repeated-measures design. Data (n=1698) were collected in April 2020 (during strict lockdown measures) and in April 2021 (when vaccination programmes gained traction). We asked participants to report their emotions and express these in text data. Statistical tests revealed an average trend towards better adjustment to the pandemic. However, clustering analyses suggested a more complex heterogeneous pattern with a well-coping and a resigning subgroup of participants. Linguistic computational analyses uncovered that topics and n-gram frequencies shifted towards attention to the vaccination programme and away from general worrying. Implications for public mental health efforts in identifying people at heightened risk are discussed. The dataset is made publicly available.



Comparing emotional responses


- Increase in positive emotions (desire, relaxation, happiness)
- Decrease in negative emotions (e.g., anger, anxiety, worry)

Emotion	Phase 1	Phase 2	Correlation r (95% CI)	Difference	Cohen's d (95% CI)
anger	3.81 (2.2*)	3.55 (2.32)	0.40 (0.38; 0.42)	-0.26	0.10 (0.04; 0.17)
anxiety	6.48 (3.3*)	5.05 (2.87)	0.46 (0.40; 0.50)	-1.38	0.55 (0.40; 0.62)
desire	2.88 (1.98)	3.22 (2.38)	0.37 (0.32; 0.42)	0.34	0.30 (0.24; 0.36)
disgust	0.12 (0.12)	2.87 (2.18)	0.36 (0.31; 0.42)	2.75	0.18 (0.04; 0.31)
fear	0.62 (0.38)	3.77 (2.28)	0.43 (0.38; 0.48)	3.15	0.75 (0.66; 0.82)
happiness	3.62 (1.87)	4.22 (2.37)	0.34 (0.28; 0.38)	0.60	0.32 (0.26; 0.38)
relaxation	3.88 (2.11)	4.54 (2.24)	0.34 (0.28; 0.38)	0.66	0.28 (0.19; 0.32)
sadness	5.55 (2.33)	4.69 (2.57)	0.38 (0.33; 0.43)	-0.86	0.32 (0.26; 0.38)
worry	6.57 (1.35)	4.35 (2.67)	0.50 (0.43; 0.56)	-2.22	0.88 (0.75; 0.95)

A repeated-measures study on emotional responses after a year in the pandemic

4. Grief, Memorials, and Loss through COVID-19: Resources for caring while physical distancing

Responding to grief in marked and meaningful ways is an effective way of dealing with loss and achieving a sense of closure. In the case of rapid and intense social change, people often feel an exacerbated sense of loss and disempowerment. This can magnify anxieties and regrets, worsening negative thinking and problematic behaviours. The COVID-19 epidemic poses unique challenges regarding the ability for people to respond to loss, grief, providing care, and being supportive, sympathetic or empathetic, especially given the demands of isolation and physical distancing. In response to these needs, our research team has partnered with community organizations like the Canadian Mental Health Association of Hamilton (CMHA) to develop online resources designed to support people coping with the infection, those dealing with loss and grief and to share alternatives to social gatherings for memorials after the loss of a family member, colleague or friend. Resources emerging from this project will attend to the issue of equity and accessibility by incorporating contributions and suggestions of service providers and cultural, religious, and spiritual leaders. The resources will be available in accessible formats, in multiple languages and will be shared by health professionals, social service providers, public institutions, the private sector, and the public. The COVID-19 epidemic poses unique challenges regarding the ability for people to respond to loss, grief, providing care, and being supportive, sympathetic or empathetic, especially given the demands of isolation and physical distancing.



Changes in Grieving Practices


Pre-covid


- funerals, wakes, + memorials
- individual and group therapy
- death rituals and religious ceremonies

During covid

- funeral services closed/limiting participants
- no physical coming and gathering
- inability to perform grief rituals and religious ceremonies
- unable to visit dying loved ones or carry out final wishes

(Burrell & Selman, 2020; Gavett & Sheer, 2020; Patterson, 2000a; Patterson, 2000b)





#WPRN21-A Way Through

5. [Awareness, risk perception, and stress during the COVID-19 pandemic in communities of Tamil Nadu, India](#)

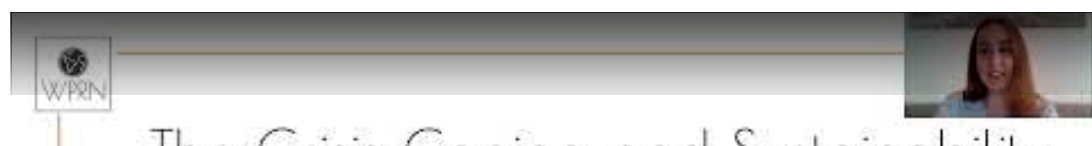
As the health and economic impact of Coronavirus Disease (COVID-19) expands globally, growing attention is being paid to lower-middle-income countries due to high population densities, limited access to health-care-service, and existing financial burdens. Yet, literature on the psychological reaction to COVID-19 pandemic in lower-middle-income countries is still limited. In this study, we examined people's awareness of COVID-19 symptoms, perceived risk of contracting coronavirus, fear in response to the COVID-19 pandemic, and changes in behaviors and stress during the lockdown in peri-urban areas in Tamil Nadu India. Field workers conducted rapid phone call surveys (N=2044) in 26 communities from May 20th – 25th 2020. We found that the majority of the residents in our sampled community perceived no (60%) or low (23%) level of risk of personally contracting coronavirus. Common fears were related to both the health and economic impact of the pandemic, including loss of income (62%), inability to travel freely (46%), and self might get sick (46%). Residents were well-aware of the common symptoms of COVID-19, such as fever (66%) and dry cough (57%), but only a small proportion (24%) mentioned the asymptomatic features of COVID-19. A considerable proportion reported that they did not increase their practice of preventive behaviors since the lockdown, which included not reducing social gatherings (26%) and not increasing social distancing practices (19%). The majority experienced increased stress about finance (79%) and about the lockdown (51%). Our findings emphasize the need to develop context-adequate education and communication programs aimed to raise vigilance about coronavirus, specifically focused on factors such as its asymptomatic features, and to sustain preventive behaviors. The evidence on fear and changes in stress levels may serve as a reference in designing coping strategies and programs with a focus on mental well-being.



#WPRN21- Risk perception, stress and sanitation practices in the early phases of the COVID-19 pandemic

6. [The Crisis Coping and Sustainability \(CCS\) Study - Lithuania](#)

The CCS study is using an online questionnaire to assess the impact and mechanisms that individuals use to cope with the quarantine measures adopted in different countries in the COVID-19 crisis. The study explores the relationship between people's stress reactions, coping mechanisms and their perceptions and intentions related to sustainability. Our goal is to inform actionable insights and recommendations for public, private and third sector institutions to reduce the negative psychological and social impacts of the COVID-19 and other future crises. The CCS questionnaire is an adaptation of the Crisis Coping Assessment Questionnaire (CCAQ) (@Lahlou et al., 2020) <https://wprn.org/item/413152>. While the CSS uses most items of the CCAQ, it also assesses the perceived impact of the crisis on three aspects that are essential for society's capacity to adapt to changing conditions and be sustainable over time according to research in social sustainability (@Missimer & Broman_2017) : mutual trust, self-organization and a sense of common meaning.



The Crisis Coping and Sustainability (CCS) Study - Lithuania

Dr. Paulius Yamin, *University of Pennsylvania, Behavioural Lab LT and London School of Economics*

Eglė Žeimė, *Behavioural Lab LT*

Dr. Dalia Bagdžiūnaitė, *Behavioural Lab LT*

Giulia Magnani, *London School of Economics*

WPRN-ID - 427152

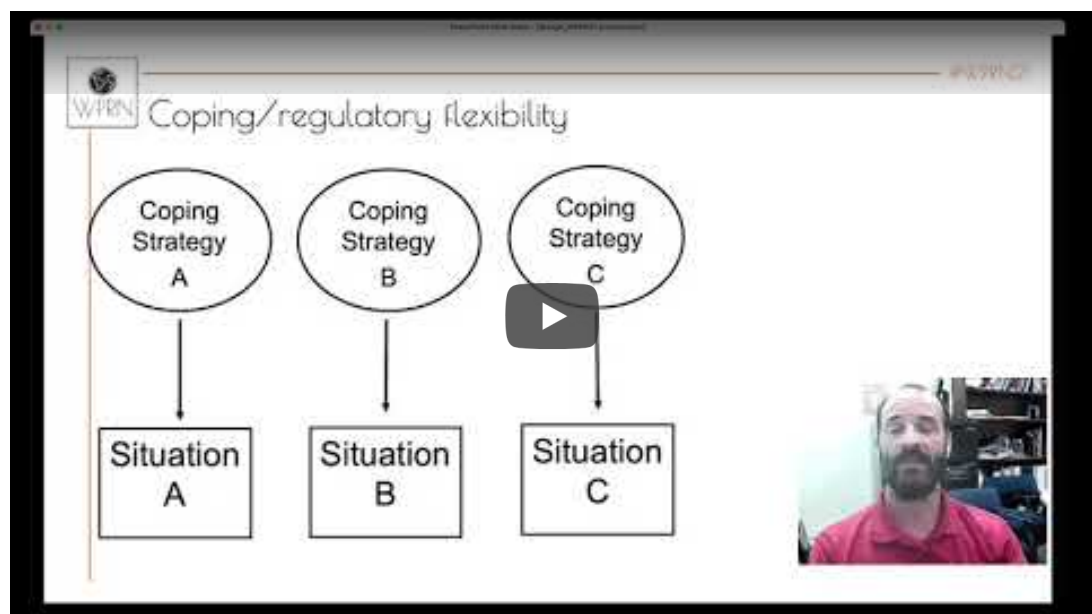


www.behavioural-lab.com

The Crisis Coping and Sustainability (CCS) Study - Lithuania

7. [Coping with Corona: Distraction as an effective strategy during pandemics](#)

The COVID-19 coronavirus pandemic is an unprecedented stressor for people all over the world. We wish to learn about how people are coping with this stressor. Specifically, we hypothesize that because most of the events surrounding this pandemic are uncertain and uncontrollable, people who use positive distraction coping techniques – taking a break from the stressor to do something pleasant – will experience higher well-being and lower depression especially when compared with those who try avoid all thoughts and feelings toward the stressor. To test this hypothesis, we are collecting 3 weekly surveys (T1, T2, T3) and 6 daily surveys (in between T1 and T2) from > 250 participants across the country. These surveys will ask participants about their vulnerability to coronavirus, whether they have it or not, their coping strategies, emotions, and psychosocial outcomes such as depression and well-being. We will test our hypothesis using multilevel modelling. This pandemic is a unique stressor that comes along once in a couple of generations and we aim to understand how people are coping with such a monumental disruption in their lives. Dr. Christian Waugh, an expert in positive emotions and coping, heads the project with Dr. Veronica Cole as the data analyst and Calissa Leslie-Miller as the project coordinator.

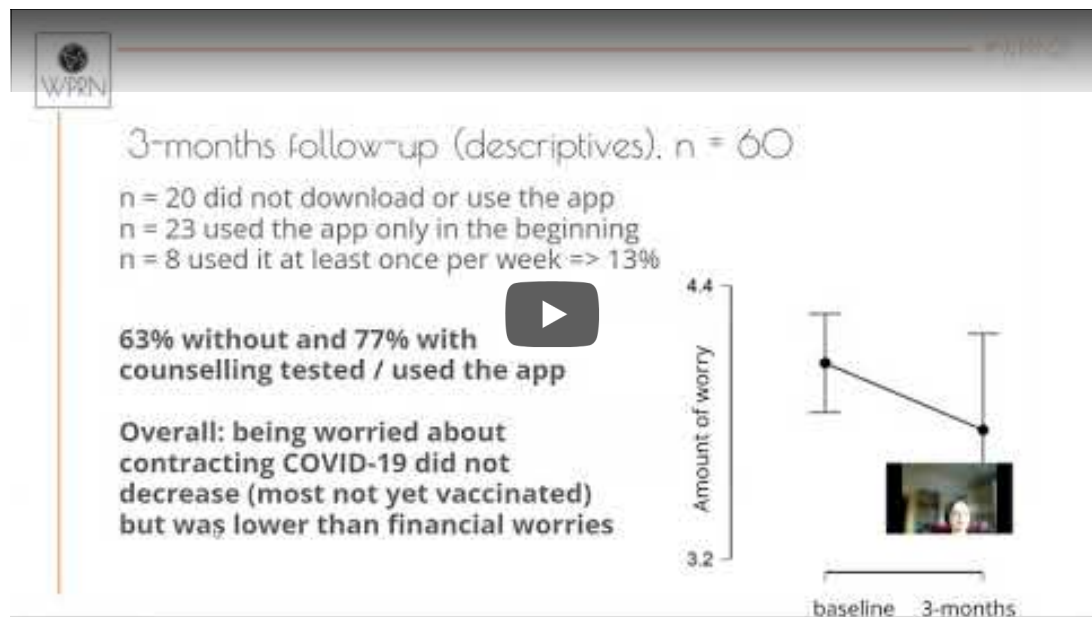


Coping during COVID 19 - the role of distraction - World Pandemic Research Network

8. [Mental health self-help apps for coping with COVID-19](#)

The current worldwide SARS-COV-19 pandemic situation increases feelings of isolation and worry. Preliminary evidence indicates that smartphone-based interventions could complement face-to-face therapies. We aimed to monitor change of symptoms of depression and anxiety throughout the reduced social life during the coronavirus pandemic using a self-help app and to measure the efficacy and feasibility (attrition, duration, participant evaluation) of two different mental self-help apps; a CBT-based self-help

smartphone application called MCT & More App compared to an alternative CBT-based app “SMART” among students at UiT - The Arctic University of Norway with follow-up at 3, 6 and 12 months after enrolment.



WPRN Borch Pfuhl

9. [Crisis Coping Assessment Questionnaire \(CCAQ\) and the impact of Covid-19 on the Italian population](#)

The Crisis Coping Assessment Questionnaire (CCAQ) assesses the impact of a crisis on individuals, during the crisis or its aftermath. The questionnaire is designed to be reused in whole or parts by those interested in assessing the psychological impacts of the crisis (Creative Commons licence). Questions address the respondent's situation, degree and forms of stress, coping mechanisms and social scaffold. CCAQ was designed to be used in whole, or parts to be added to specific surveys, to which it offers a set of standard explanatory variables. CCAQ questions are usable in various cultural contexts and types of crises (epidemics, catastrophes, etc.) Each question is provided with a short rationale that facilitates adaptation and translation from the original English version, to be used face-to-face, telephone or online.

WPRN

Why is the CCAQ different to other questionnaires?

- Based on existing questionnaires from validated stress, coping and crisis literature
- Traditional instruments are often somewhat **narrow** (focusing on one type of variable)
 - The CCAQ assesses the interaction between individuals' personal disposition, life condition, sociodemographic status and reactions to stressful events
- Traditional instruments measure reactions to **acute** instances of stress
 - The CCAQ was built by experts from a range of different disciplines:
 - health, social, family psychology and other human and social sciences
 - forming a more comprehensive interpretation of ongoing stressful situations
- Traditional instruments are designed **primarily for Western populations**
 - The CCAQ is designed to eliminate cultural biases
- Traditional instruments were built using **non-standardised formats**, making it difficult to compare scales
 - The CCAQ standardizes existing instruments so that items across variables can be analysed as a whole

Crisis Coping Assessment Questionnaire (CCAQ) and the impact of Covid-19 on the Italian population

10. [Coping in Lockdown: Challenges surveying across four countries](#)

Mass quarantine and other restrictions to prevent the spread of SARS-CoV-2 disrupted research-as-usual. Restrictions varied by country. Research that could be done in isolation or remotely could continue or start. Ethical review boards limited reviews to essential and COVID-19 related studies. In April–July 2020 we ran a multi-country anonymous online cross-sectional survey of substance use during lockdown. This paper presents the methodological challenges encountered. Countries selected were: New Zealand (NZ), Russia, and the United States. To meet ethics board requirements a co-investigator was recruited in India. Participants were aged 18 or over and had been consumers of tobacco/nicotine products, alcohol, and or other drugs prior to or at the time of lockdown. The survey was developed for NZ then adapted per country and translated for Russia. The Indian ethics board wanted a Hindi and Tamil translation. Only a Tamil translation was achieved in time. India's ban on electronic cigarettes meant for India the vaping section was omitted. Also, the drug use section had to be deleted. Recruitment challenges included: print media was suspended; online advertising space was in high demand and they wanted us to buy space excess to our needs. An Indian agency was used to do recruitment there. When enrolment slowed we used our personal social media accounts to ask our networks to share the study notice. The Russian team changed to recruiting in hospitals. A total of 635 people participated, exceeding our target, but each country cohort differed vastly preventing comparison and undermining the generalisability of the results. Studying unprecedented disasters is important for identifying how to prevent or mitigate harm. Evidence-based policy decisions cannot be made without it. Pandemic preparedness should include having teams, study protocols, and ethics pre-approved for potential future events, and access to rapid-response type funding when they occur.



WPRN

Coping in lockdown: Challenges surveying across four countries

Marewa Glover, *Centre of Research Excellence: Indigenous Sovereignty & Smoking, NZ*
Alexander Merkin, *Academy for Postgraduate Education, Russia*
Carl V Phillips, *Epiphi Consulting, New Hampshire, USA*
Sree T Sucharitha, *Tagore Medical College and Hospital, Chennai*
Kyro Selket et. al.

WPRN21

Small video thumbnail in the bottom right corner showing a person speaking.

Coping in Lockdown #WPRN21