The Struggle to Cope With Depression Amid Coronavirus

The pandemic is especially destabilizing for people with depression and anxiety. But there are steps to take that can help.

By Andrea Petersen
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During the two weeks after Minnesota issued its stay-at-home order in response to the Covid-19 pandemic, Jane Egerdal cried every day.
Ms. Egerdal, 62, has a history of depression. Almost overnight, the things she had been doing to successfully cope with her condition—going to the gym, meeting friends at coffee shops, her job as a school nurse—disappeared.

“I lost that network of people and sense of job and purpose,” says Ms. Egerdal, who lives alone in Faribault, Minn. “The loneliness is unbearable.”

The pandemic is upending everyone’s lives. But it has been particularly destabilizing for the millions of people who deal with depression and anxiety. Many people are worried about their own health and the health of their loved ones. The stress of job losses and the shredding of routines and support systems can exacerbate symptoms and make relapse more likely, says Charles B. Nemeroff, chair of the department of psychiatry at the University of Texas at Austin’s Dell Medical School. Studies have found a link between social isolation and depression. And the tremendous uncertainty around the outbreak can fuel the feelings of hopelessness and helplessness that are a hallmark of depression, says C. Vaile Wright, director of clinical research and quality at the American Psychological Association. “We still don’t have a great handle on the virus. There’s no cure or vaccine. There’s not a lot to feel very hopeful about, which is also a trigger for depression,” Dr. Wright says.

About 22% of Americans ages 13 and older have an anxiety disorder each year, and 9.4% have a mood disorder, including major depression and bipolar disorder, according to a study published in 2012 in the International Journal of Methods in Psychiatric Research. About 32% of Americans will have an anxiety disorder at some point during their lifetimes and 17.5% will have a mood disorder, according to the same study.

More than one-third of Americans say the pandemic is having a “serious impact” on their mental health, according to a survey released March 25 by the American Psychiatric Association. The National Alliance on Mental Illness, an advocacy group, says calls and emails to its help line have jumped 40% in the past two weeks. Most
people mention Covid-19, says Dawn Brown, NAMI’s director of community engagement. “Anxiety is through the roof,” she says.

Crisis Text Line, a service staffed by trained volunteers who offer 24/7 support via text, has seen demand in the U.S. rise by 40% since March 16. The most common issues its users, about 75% of whom are younger than 25 years old, are now mentioning are anxiety, depression and suicidal thoughts, says Bob Filbin, co-founder and chief data scientist.

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— A survey released March 25 by the American Psychiatric Association

The most evidence-based treatments for depression and anxiety disorders are antidepressant medications like Prozac and Lexapro and talk therapy, including cognitive behavioral therapy. Many psychiatrists and other mental health clinicians have pivoted to offer treatment via phone and video, says Bruce J. Schwartz, professor and deputy chair of psychiatry and behavioral sciences at Montefiore Medical Center in New York and president of the American Psychiatric Association. Because of a national shortage of mental health providers, however, it can sometimes be difficult to obtain a new patient appointment. Dr. Schwartz is warning his patients to avoid turning to alcohol and drugs, which some people use to self-medicate their anxiety and depression.

With normal schedules and routines likely impossible, it is important for people with depression and anxiety to create new ones, says Aarti Gupta, a clinical psychologist in Palo Alto, Calif. “When the world feels so chaotic, you need to find organization and predictability,” she says.

She recommends setting regular wake and sleep times. (Insomnia is a risk factor for depression.) She also directs her patients to schedule pleasurable activities every day, with specific times set aside for taking walks or doing video calls with friends.
and family, for example. This technique, which is known as behavioral activation, is a common and effective treatment for depression: A meta-analysis published in the journal Clinical Psychology Review in 2007 found that it had a *large effect* on depression symptoms. Since getting out of bed in the morning can be difficult for people with depression, Dr. Wright suggests setting the alarm on your clock or phone and then “put it as far away from your bed as possible,” she says. “You have to force yourself to get out of your bed.” And since research has found that exercise can alleviate depression symptoms, Dr. Wright recommends sleeping in workout clothes. “You might be more motivated to work out,” she says.

Jenny Meyer, 45, was first diagnosed with depression when she was a teenager. She had a relapse last fall, but recovered with the help of antidepressant medication and the support of friends and colleagues at the startup company she founded in Houston. But she has struggled since she’s been on lockdown: She had what she calls a “tank day” recently, when she could barely get out of bed, the first one she’s had in six months. “My best days are when I have lunch and two coffees out meeting with executives. You can’t do that,” she says. “It’s the uncertainty of what the new normal could be.”

Ms. Meyer, who lives with her 18-year-old daughter, is coping by running more in her neighborhood. She’s added to the wall of inspirational quotes in her home office. And she’s talking to her best friend every day and cooking with her daughter.

Reaching out to friends and family for support is key, says Gary Sachs, a clinical associate professor of psychiatry at Harvard Medical School. Dr. Sachs says he’s also finding that those patients who are giving assistance to others, too, are “finding they actually feel better than they had before,” he says.

That can take the form of making masks for neighbors, going grocery shopping for seniors or participating in peer support groups like those run by the Depression and Bipolar Support Alliance, on whose scientific advisory board Dr. Sachs sits. “These are the things that allow you to have some purpose and meaning,” he says.
Dr. Sachs recommends that people limit their pandemic-related news consumption to two 30-minute chunks a day. Dr. Nemeroff at the University of Texas at Austin, who also serves as the chief medical officer of the Anxiety and Depression Association of America, is emphasizing a technique known as cognitive restructuring (an element of cognitive behavioral therapy) to his patients. He teaches them to change catastrophic thoughts that can fuel anxiety and depression, such as, he says, “I’m totally freaking out. I can’t handle the uncertainty right now,” to healthier, more productive thoughts like “I can’t control the situation around me, but I can control my own actions. I can meditate. I can call loved ones. I can get enough sleep.”

Ms. Egerdal in Minnesota says she’s been feeling better in recent days. She called her primary-care physician and is considering going back on antidepressant medication. She’s treating herself to one meal every day at a restaurant with a drive-through window. She’s going for walks with friends—6 feet apart. She’s doing Zoom meetings with her book club. And when she wakes up in the middle of the night, she’s laughing along to clips of the Carol Burnett Show on YouTube. “Instead of thinking about what you don’t have, you can think about what you do,” she says.

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