



ELEMENTAL

*The Official Mental Health Magazine of the
University of Toronto*

WINTER 2021

U OF T SPOTLIGHTS

SUBSTANCE USE
DURING THE PANDEMIC

U OF T'S COVID-19
WOMEN'S INITIATIVE

COVID-19, MENTAL HEALTH &
SLEEP DISRUPTIONS

COVID-19

THE IMPACT OF LOCKDOWN ON
MENTAL HEALTH

THE POSITIVE EFFECTS OF
COVID-19 ON SOCIETY

HOW TO BE MORE PRODUCTIVE
WHILE WORKING FROM HOME

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LETTER FROM JOSHUA BARKER DEAN, SCHOOL OF GRADUATE STUDIES

Long before COVID-19 upended the way we live and work, we knew that graduate student mental health was a critical issue for our community. Now that the pandemic has affected so many facets of academic life, straining our students in new ways and accentuating existing stressors, there are many additional challenges we need to address. But I am hopeful that we can learn from these challenges and provide our graduate students with all the support they need—to navigate this difficult time, and in the future.

The School of Graduate Studies recognizes that graduate students face a unique set of stressors. Our students often have to manage relationships with supervisors, contend with high academic expectations, and deal with the isolation of writing. We also know that these pressures are unevenly distributed due to the diversity of our students' circumstances and how those circumstances interact with institutional practices.

To address these specificities, we convened a [Mental Health Working Group](#) that would complement the work of the Presidential and Provostial Task Force on Student Mental Health with [recommendations](#) tailored to graduate student concerns. Since then, we have also established a Mental Health Advisory Committee (MHAC) to ensure the timely implementation of these recommendations and provide ongoing accountability in this area. The membership of the MHAC will include student voices that represent our diverse graduate student population and students who are living with mental illness.

These are important steps on the way to creating a [culture of caring](#) at the University of Toronto. We are working toward a systemic change in how we value mental health across our campuses, both by reviewing our policies, procedures, and practices, and by encouraging open, compassionate conversations about mental health and illness. By soliciting student

feedback through advisory groups and a recent Pulse survey, we have learned how important it is to student mental health and wellbeing that we provide flexibility and additional supports.

With the added stresses of the pandemic, many of you are feeling isolated, struggling with anxiety, and finding it difficult to make academic progress. Some of you are parents and caregivers whose workloads have doubled or tripled. We are all worried about our own safety and for the safety of our loved ones.

Please know that you are not alone. To support student mental health and wellbeing during this time, we are offering an [individual, flexible approach](#) to graduate research continuity planning, as well as many additional resources and services that you can find on the SGS [GradHub](#). Establishing an inclusive and accessible system of supports is an iterative process, but we are committed to aligning on-campus services with students' needs, and to providing clear pathways to mental health supports.

As difficult as this past year has been, we can find some comfort in knowing that COVID-19 vaccines are being rolled out across the country. We will get through this. In the meantime, let's continue to care for each other, and continue to have honest, difficult conversations about what each of us needs to feel supported during this challenging time. We will leave the worst of the pandemic behind, eventually, but not, I hope, our hard-won sense of community.

Sincerely,
Professor Joshua Barker
*Dean, School of Graduate Studies
Vice-Provost, Graduate Research and Education*

LETTER FROM THE EDITOR

I am delighted to present the seventh issue of *Elemental*, the University of Toronto's official tri-campus mental health magazine. The theme for this issue is COVID-19. It has been over a year since the first case of COVID-19 was reported in Toronto. What started as a handful of infections related to travel soon doubled, tripled, and quadrupled. Eventually, the number of daily reported cases of COVID-19 and deaths related to the disease grew exponentially, prompting the government to take immediate action. Canadians were forced into their homes, permitted to only leave for essential reasons such as work, medical appointments, and groceries.

As the COVID-19 pandemic raged on, it upended many lives. With the economy shut down, workers were laid off and businesses went bankrupt. Health-care workers struggled to provide care in hospitals with overflowing beds in intensive care units. Military was called in to deal with deadly outbreaks at nursing homes. Families have mourned the deaths of loved ones while unable to hold proper funerals. Yet even amidst the chaos, as people struggled to make sense of the pandemic, small acts of kindness prevailed. New initiatives were formed to deliver groceries to the elderly, and communities came together to cheer for those battling on the frontlines.

The effects of lockdown and social distancing on the mental health of young Canadians have become



apparent. Although the mental health of Canadian youth (aged 15-30) has declined over the last few years, a recent survey indicated that the negative impact of COVID-19 on the mental health of this age group was the most significant when compared with all other age groups.¹ In fact, less than half (40%) reported excellent or very good mental health.¹

If you are struggling with your mental health, please know that you are not alone. What you are experiencing is a normal stress response to a major health, social, and economic crisis. There are readily available mental health resources and supports out there that can help you cope. Remember that no problem is too big or too small. Your feelings are valid, and you deserve help.

In this issue, we share several UofT student viewpoints on how the COVID-19 pandemic has affected their studies and society as a whole. We also feature expert opinions from UofT faculty and their advice for taking care of our mental health during these times. Dr. Andrea Levinson, Psychiatrist-in-Chief of Health and Wellness at University of

Toronto, emphasizes the importance of finding balance and shares resources available through Health and Wellness. Dr. Indra Narang, Director of Sleep Medicine at The Hospital for Sick Children, explores the link between mental health, sleep, and COVID-19 disruptions. Dr. Tara Elton-Marshall, Assistant Professor in the Clinical Public Health Division at the Dalla Lana School of Public Health, shares her latest research on how the COVID-19 pandemic has affected substance abuse. Additionally, we highlight several non-profit organizations, including Reena and the COVID-19 Women's Initiative, and show how they have taken action in response to the COVID-19 pandemic.

I would like to thank the *Elemental* team for making this issue possible. Seriously, I really mean it. I know we are all busy graduate students going through difficult times, so for those who took the time to write an article (or even just edit an article), please know that it means a lot to me. Also, I would like to thank the Executive Editors, Emily Mastragostino and Curtis D'Hollander, for all their hard work. I could not have done this without their help. Finally, a special thank you to our readers and community for your continued support toward this initiative!

Sincerely,
Jeffrey Lynham
Editor-in-Chief, Elemental Magazine
Co-Chair, Grad Minds

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FINDING BALANCE DURING COVID-19

A CONVERSATION WITH UNIVERSITY OF
TORONTO PSYCHIATRIST-IN-CHIEF,
DR. ANDREA LEVINSON

ASHLEY BO ZHANG & NEGIN REZAIE

Can you briefly talk about your role at the U of T and your field of study/research and what drew you to this area of health and wellness?

As the Psychiatrist-in-Chief, I am responsible for psychiatric care, predominately at the St. George campus but I also have a tri-campus role working with the Vice-Provost of Students. I manage the psychiatric activities, oversee care delivery, assessments, and care; and I play a role consulting in risk management and crisis-driven work on campus. In my career, I have always had an interest in early intervention. Early on, I was very interested in the notion of how psychosis started and how it manifests in the context of mood issues. For a number of years, I ran an early intervention clinic for young people with new-onset bipolar disorder. As a clinician-scientist, my research has also examined the mechanisms of mood disorders.

Over six years ago, I came into my current role, which presented a great opportunity to connect with post-secondary students to support them beyond the clinical arena. I feel very privileged because I am able to learn, firsthand, this intersection between mental health and the continuum of mental health to mental illness and how it interfaces with individuals engaging in learning. Another passion

of mine is interdisciplinary care and education – thinking about how to work with other disciplines to create the best care model for our learners.

With the pandemic, this has definitely exacerbated existing challenges and difficulties to wellbeing and mental health, especially for students from marginalized communities. Can you touch upon some of the resources that the University is offering, in case our readers are not too familiar? Has U of T Health and Wellness taken recent measurements to support students during the pandemic?

Health and Wellness has expanded to reach students virtually and there are various initiatives available on their website (<https://studentlife.utoronto.ca/departement/health-wellness/>).

Just to highlight a few of the resources:

- **Building Positive Mental Health** workshops teach strategies to promote positive mental health during the pandemic.
- **Building Resilience through Self-Compassion** workshops for graduate students
- **Health & Wellness peer support** is a new drop-in virtual program where students can talk to trained



Dr. Andrea Levinson, Psychiatrist-in-Chief, University of Toronto

peers online to find support and get help navigating resources on and off campus.

- **LivingWorks START** is a 90-minute e-learning program that teaches learners to recognize when someone is thinking about suicide and steps to connect them to help.
- **The Connections Coaching Workshop Series** is a three-part workshop series to help students develop connections and feel connected to others.
- **The Community Support Group** is a peer-to-peer support resource for students to get to know and support each other, learn from experts, and connect with long-term support resources.
- **The Better Coping Skills** is a four-part workshop series that can help students develop coping skills to thrive and better meet the demands of university, work and personal life.

- **Breathe Well and Sleep Well** workshops teach techniques for relaxation and how to improve sleep hygiene.
- **The Grief Support Sharing Circle** is a support group for students who have experienced a death, as well as students experiencing anxiety around grief.
- **U of T My Student Support Program (U of T My SSP)** which provides 24/7 ongoing text and phone support to all students, globally and in 146 languages, and is available as an app.
- **The Health & Wellness Newsletter:** Subscribe to this bi-weekly St. George campus newsletter and receive news, information and updates.
- **Health & Wellness Peer Support Service:** Access drop-in support from a trained Peer Supporter online on Wed, Thurs, and Fri in a safe virtual space.

Moreover, there is something new and exciting that I was involved in, which is a partnership between Student Life and IMB, and that is **Navi**, a new online confidential tool that helps students navigate mental health resources at U of T and make decisions about seeking support (<https://prod.virtualagent.utoronto.ca/>).



What are some healthy habits that students should consider adopting in order to tackle the uncertainty and anxiety that accompanies living in a pandemic?

There is so much out there in terms of advice - it is important to think about what works for you to stay both informed and connected. When most of us are separated right now and not naturally connected to campus, this can be through academic platforms like the Health and Wellness website or social media. That said, it is also about finding the right balance, moderating our use of these social platforms, and knowing when to take a break from the news and pandemic updates, so we don't get overwhelmed. Practicing good sleep hygiene and promoting regularity in our sleep can also have a positive influence on our mental health. However, with students being in different time-zones and having online classes and graduate

students on staggered schedules, this can definitely be challenging. By developing a mindfulness routine and trying to limit screen time in the evenings, these may be excellent steps in helping wind down before bedtime. Finally, we should maintain our physical health through healthy eating and exercise. With COVID-19, there is evidence that substance use is on the increase, and so doing some self-monitoring and becoming more aware of one's use and possible triggers of use can be helpful during this time. If issues do persist with sleep or difficulties around nutrition, appetite, energy, or focus, definitely do reach out and engage with your primary care physician.

With social distancing and self-isolation being prominent guidelines during COVID-19, what are ways that students can feel connected to their peers and maintain that sense of community?

Using online platforms may be very helpful for students to stay connected with their peers. Considering that in-person activities may not be resuming right away because of the ongoing pandemic, it would be beneficial for students to maintain their social connections through creative ways. From holding online game nights and doing virtual art



YOUR MENTAL HEALTH WAYFINDER

projects to organizing virtual group study sessions, students can stay in touch with their friends and family to maintain a sense of community during these unprecedented times. That said, after a long day of online classes and virtual meetings, students may understandably become weary of online platforms and so finding that balance is key!

Are there any specific challenges and unique areas of difficulty that you believe students, specifically graduate students, face when it comes to mental health during the pandemic?

Uncertainty about the trajectory or progress of the graduate project, ambiguity about future careers and potential career shifts, and financial burdens are all inherent issues pertaining to graduate students. I believe that many of the issues that graduate students faced prior to COVID-19 have been accentuated during the pandemic. While the fabric and context of the research project may dictate the degree to which you are impacted, the pandemic has brought about many obstacles and changes. Furthermore, within the graduate

body, it is important to recognize that international graduate students and other more vulnerable students, including racialized students, Indigenous students, students with prior mental health disorders, students with a disability, those with greater income insecurity, those with unstable living situations and many others. Not only has COVID-19 put students at increased risk of negative health, economic and social outcomes now and in the future, but also the pandemic has highlighted the pre-existing inequities in access to health care, housing, income and social supports that exist.

Personally, in your own life, what are some things you have started introducing into your daily routine during this pandemic? And what are some things that you are looking forward to post-pandemic?

With the pandemic and working from home, obviously we all have latitudes now but in my own life, I try to stick to my pre-COVID practices by waking up and sleeping around the same time and trying to maintain a self-care routine. For example, I continue to

try and do a little exercise before work (even if it is a quick walk around the block), go for regular walks with our dog, stay connected with friends on zoom when I can, and spend time unwinding with something relaxing and creative, either cooking, baking or watching movies with my family. I also have responsibilities with my children, who previously had in-person classes at school, so travelling to school helps maintain that sense of routine. Currently, they are home in on-line school due to the lockdown, so I support them with that. During these times, practising being gentler on oneself and others, and practicing self-compassion and gratitude. I am trying to be more appreciative of the benefits that working from home brings, such as saving on the commute time! And as for what I'm looking forward to post-pandemic? I look forward to seeing my friends and extended family and to attending live theater shows - I have an arts background and I love live music!

Edited by Jeffrey Lynham & Emily Mastragostino





LIFE IN LOCKDOWN: THE IMPACT OF QUARANTINE ON MENTAL HEALTH

ISAYAH ALMAN

"There are days when solitude is a heady wine that intoxicates you with freedom, others when it is a bitter tonic, and still others when it is a poison that makes you beat your head against the wall." – Sidonie-Gabrielle Colette, Nobel Prize in Literature 1948¹

Quarantine. By now, Canadians have lived through months of it. Non-essential services have shut down, and society is in a state of perpetual lockdown. In 2020, novel coronavirus spread across the globe, bringing significant changes to social protocol and daily routine. Gone are the days of a friendly handshake or the leisurely coffee shop visit. Health officials urge us to "stay home and stay healthy."² For those working from home, the day has become a cacophony of virtual rooms, rigid online interactions, and tiled faces on a computer screen. The words "sad, bored, and worried" have been used to describe life in isolation.³ With no end in sight, some experts suggest that long periods of social isolation may contribute to the development of mental health issues.³

The Science of Social Isolation

"Human beings are fundamentally social, and the need to gather with others is extremely important, especially during times of distress." – Cheri Marmarosh, Ph.D. Clinical Psychology⁴

As days go by in quarantine, the impact of long-term isolation on mental health comes into question. Humans are social creatures that require contact with other humans to maintain mental wellbeing.⁴ Prolonged isolation leads to feelings of loneliness, decreased activity, and increased vulnerability for mental and physical deterioration.⁵ The risk for mental health concerns increase the longer an individual is kept in isolation.⁶ Indeed, aside from the death penalty, the worse punishment we have invented is being locked in solitary confinement. Although quarantine is a far cry from confinement, it may be close to truth for those living alone, unemployed, or without access to reliable social support systems.

Social isolation can be a painful experience. This is because social loss triggers the same brain neurons as physical pain.⁷ Social pain arises when one feels excluded from social connections: feelings that may be relatable to people in quarantine. Because social pain is tangible, akin to physical pain, it can trigger our stress response systems. These systems flood the brain with neurotransmitters that help us handle difficult situations.⁸ Unfortunately, protracted firing of these systems can cause anxiety, nausea, and fatigue. Social pain is a subjective experience and may be expressed in ways not dramatically apparent, yet still intensely taxing on the mind and body. If your quarantine mornings have you feeling stressed, nauseous, anxious, or fatigued, keep in mind: these emotions may be justified. It may be timely to practice self-compassion in the context of social isolation, disruption of routine, and a global pandemic.

The Impact on Mental Health

The psychological impact of quarantine affects people in different ways. In past pandemics, quarantine conditions have been a predictor of acute stress, exhaustion, detachment from others, irritability, insomnia, poor concentration, deteriorating workperformance, and indecisiveness.⁶ Essential workers, hospital staff, health care professionals, and people directly affected by the virus are at highest risk for these symptoms, as they are placed in harm's way and are proximate to continuous fear, crisis, and grief.^{6,9}

A study of pandemic psychology in Wuhan, China found that pre-existing adversity predicted unfavourable mental health outcomes.^{9,10} Long periods of stress and isolation have heightened the allure of negative

coping behaviours. Smokers and substance users may increase usage in pursuit of anxiety relief, increasing their propensity for misuse, withdrawal, and addiction.¹¹ Other maladaptive quarantine behaviours include compulsive drinking, excessive media consumption, and gambling.^{11,12} Constrained household contact has increased the likelihood of relationship conflict and intimate partner violence.¹³ Unfortunately, limited social services and decreased access to mental health professionals have compounded issues for people in dire need of support.^{12,14}

Peoples with intersecting identities face increased vulnerability during a pandemic. Communities that have been historically oppressed based on race, class, and ability are the most disadvantaged.¹⁵ Immigrant families living with elderly relatives may find it difficult to social distance due to inadequate housing. Racialized communities have been hit hardest by the virus, suffering disproportionate COVID-19-related deaths due to a disparity of social resources.⁴ Many low-income workers have lost their jobs and struggle to make ends meet.¹⁶ People without reliable access to a computer have less opportunity for social contact and stay-at-home work.⁶ An unfortunate heuristic, it is often those most vulnerable who are prone to further victimization.^{4,15} The pandemic is no exception.

Finding the Silver Lining

“Hope is better than fear. Optimism is better than despair. So let us be loving, hopeful and optimistic. And we’ll change the world.” –Jack Layton, Member of the Canadian Parliament, 2004-2011¹⁷



Despite many alarming aspects of the ongoing lockdown, benefits can be found in this experience. More time indoors provides an opportunity to incorporate self-care practices into our daily routine. Grounding, optimism, and mindfulness are evidence-based techniques with proven therapeutic value.¹⁸ Identifying positive exceptions within a problematic experience can lead us away from stressful emotions and negative thinking patterns.¹⁹ Other positive activities include reconnecting relationships, creating useful meaning in solitude, remaining optimistic, and fostering feelings of gratitude.^{6,10,13}

The lockdown provides a chance to reconnect relationships which have grown distant. A study on families in the pandemic has found that themes of family improvement and partner reconnection exceed that of relationship deterioration.¹³ The pandemic may serve to bring people together in times of hardship. Strategies for maintaining positive relationships in quarantine include open communication, emotional expressiveness, and balance between individual and shared needs.¹³

People living alone can benefit from solitude, a now scarce opportunity.²⁰

Some benefits of solitude include:

- 1) Creating a comfortable home environment
- 2) Detaching from social media
- 3) Reflecting on life circumstance
- 4) Constructive planning for the future
- 5) Starting a new project, hobby, or learning endeavour

There are reasons to stay optimistic. The pandemic presents a window of opportunity for improving systems in society. On October 27th, the Government of Canada launched a \$1-billion-dollar program to improve shelters and develop new affordable housing.²¹ The Canadian Emergency Relief Benefit has given an indication for the viability of universal basic income, helping millions throughout the country with the financial strain of lockdown.²² With more people remaining close to home, there has been a statistical decrease in crime and pollution.²³ Furthermore, the disruption of global supply chains has forced corporations to improve efficiency, reducing global levels of waste and pollution in the process.²⁴

As we wait for a return to normalcy, there is time to foster gratitude for things often taken for granted. Life in Canada provides many privileges.

Diverse multicultural communities allow the experience of unique foods, traditions, and peoples. Robust infrastructure provides the enjoyment of parks, social gathering spots, and recreational services. Although these facilities remain closed, they give us something to look forward to. Despite the challenges, we are going through this experience together.

Quick Tips for Surviving Quarantine

1. Stay informed.
2. Manage expectations.
3. Maintain a regular routine.
4. Keep in contact with social supports.
5. Plan time for physical activity.
6. Separate productivity and self-worth.
7. Create healthy habits and practice mindfulness.
8. Make time for self-care, hobbies, and recreation.

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Edited by Emma Syron & Curtis D'Hollander



THE POSITIVE EFFECTS OF COVID-19: HOW GENERATION-DEFINING EVENTS CHANGE SOCIETY

JASON LO HOG TIAN

At the turn of the decade, we saw the emergence of the first case of coronavirus disease 2019 (COVID-19). Millions of cases later, the world is almost unrecognizable. The global pandemic has changed the way we live; lockdown restrictions have relegated most people to work or learn at home, border closures have made travelling a thing of the past, and we have a heightened sense of personal safety with masks and social distancing front of mind each time we step outside. It has also caused the stock market to plummet and widespread job loss, not to mention the millions suffering from illness and the resulting deaths. Currently, it is difficult to see a world that is unaffected by COVID-19 and the damage it has caused. However, we cannot let this suffering be in vain. We must utilize this time to reflect on

how society is run and come together to affect meaningful global change, for humanity improves not during idyllic times, but under conditions that strain the very fabric of our existence.

The world has gone through many events so impactful that they have shaped generations, yet we have survived each one and the lessons learned from them transformed society. World War I highlighted the importance and capabilities of women in the workforce, earning them the right to vote shortly after the war. From the Great Depression came government programs designed to help those most heavily impacted, including pension plans, unemployment insurance, and government care for children and people with disabilities. World War II drove the development of new

technologies, many of which form the backbone of modern society. Tragedy forces us to set aside our differences and work together for survival. In his book entitled *Epidemics and Society*, Frank M. Snowden explains how pandemics “hold a mirror to society,” forcing us to examine our relationship to our own morality, as well as the relationships we have with our environment and the people around us.¹ It is still too early to say what changes the COVID-19 pandemic will bring, but this kind of introspection allows us to leverage these stressful and dire conditions for the betterment of the future of mankind.

The most obvious improvement resulting from COVID-19 is in our response to infectious diseases. This pandemic will change the way we

think about public health, identifying what works well and the pitfalls to avoid. The world was unprepared for a crisis of such magnitude with many nations slow to respond and a plethora of misinformation and fearmongering in the media. Millions have already died due to COVID-19; although it is currently difficult to estimate the exact mortality rate, it appears to be lower than previous pandemics, e.g., the case fatality rate of severe acute respiratory syndrome (SARS) and Middle East Respiratory Syndrome (MERS) were 10% and 36%, respectively.² If COVID-19 had a similar level of mortality and we were as unprepared as we were, the consequences would have been unimaginable. This is not a baseless hypothetical; research suggests that increased contact between humans and animals through the massive expansion of agriculture, deforestation, and farming creates a “perfect storm” for the spillover of diseases from wildlife to people.³ Diseases originating in animals (known as zoonotic diseases) have already impacted humans, e.g., novel influenza A (H1N1), avian flu, Ebola, SARS, MERS, and COVID-19, and similar outbreaks could become more common. The lessons we learn in this pandemic, such as wearing face masks, early lockdown measures, widespread testing implementation, contact tracing, and rapid vaccine development may be the difference between nipping a future virus in the bud and another pandemic with levels of mortality akin to the Bubonic Plague.

If pandemics hold a mirror to society, then inequality is reflected back. While some say that COVID-19 does not discriminate, data shows that it disproportionately affects minority populations and people of low socioeconomic status.⁴

Minority populations make up a large proportion of essential workers who, ironically, often have low wages, e.g., grocery workers, public transportation employees, healthcare workers, and custodial staff.⁴ Many individuals cannot afford to stay at home in the absence of earning an income and must put their own health and the health of the public at risk in order to survive. People from marginalized groups are also more likely to live in crowded housing, have preexisting health problems, and have poor access to healthcare, further exacerbating the risk and severity of infection.⁴ These problems existed before COVID-19, but the increased focus on public health shines a spotlight on them brighter than ever before. The knowledge that marginalized populations carry the heaviest burden of the pandemic has pushed the issue of structural and racial inequalities over the tipping point and into the collective consciousness of the media, government, and society. The wrongful killing of George Floyd by the Minneapolis Police Department in May 2020 galvanized the world into action, which included the resurgence of the Black Lives Matter movement. Unfortunately, this was

not the first instance of such a tragedy and yet none before sparked outcry quite like this one. The new world under the COVID-19 pandemic has left little room for complacency regarding increasing inequality; with all eyes on the internet, major social movements are made more enduring and widespread.

Possibly the largest global crisis besides COVID-19 is climate change. However, as countries went into lockdown, industrial and manufacturing sectors slowed down, and road and air transportation came to a halt, causing pollution to decrease by nearly 30%.⁵ Pollution has been directly linked to mortality and the reductions we have seen, even if only for a few months, have the potential to save thousands of lives.⁶ While promising, the exact impact of lockdown on the environment is not yet clear. With many countries beginning to re-open, causing a rise in greenhouse gas emissions back to regular levels, downstream effects on the climate and levels of pollution are likely to be small.⁷ COVID-19 will not directly solve climate change, but it may be the catalyst we need to turn the tides in our fight against global



pollution. The temporary reduction in emissions proves to the world that environmental change is possible, however small. Governments and policy makers can use this as a test and take the lessons learned from this natural experiment to develop sustainable changes toward reducing our carbon footprint. We have a unique opportunity while recovering from a pandemic to rebuild and strengthen not only our public health and the healthcare system, but the energy and transportation industries to build a better future.

Life during the pandemic has been a trying time for us all; social isolation is causing a strain on mental health, work and school life are unpredictable, and we must constantly protect ourselves against a threat we cannot see. However, COVID-19 has forced us to critically examine society and highlighted the most pressing issues. When we eventually emerge from this crisis, the world will be a different place. It is up to us today to turn a dire

situation into an opportunity to affect meaningful and long-lasting change for a better tomorrow.

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POST TRAUMATIC GROWTH IN COVID-19

ASHLYN JAMES

Fellow students, we finally have some good news! This has been a year of trials and tribulations, but 2020 can also be considered a year of growth. I am a counselling and psychotherapy student currently attending the University of Toronto. I am interested in looking at the effects of COVID-19 on our mental health. COVID-19 abruptly swept over the globe, interrupted our lives, and left a mark on our mental health. However, psychologists would say this struggle can lead to betterment within ourselves.

Post-traumatic growth (PTG) was a theory developed in the mid-1990s by psychologists Richard Tedeschi and Lawrence Calhoun. PTG theory explains that through psychological struggle, one can cope through a positive or negative transformation. PTG comes out of a difficult situation with new possibilities, an inner strength, stronger relationships, and a new appreciation for life.

An example which helps illustrate PTG was when a devastating death occurred at the hands of a drunk driver. The grief-stricken mother of

the victim went on to create Mothers Against Drunk Driving (MADD), a non-profit organization in the United States, Canada, and Brazil, that seeks to stop drunk driving. This inspirational mom channelled her inner strength in a difficult situation and created a new opportunity with the MADD charitable organization.

I will be telling you my story as a student going through this pandemic. I cannot say things have been easy. When the pandemic first hit, I was living alone in a small bachelor apartment of five hundred square feet where the gym was my only escape. Then the gym closed, causing my mental health to deteriorate. I could not leave my apartment to grab a coffee, nor could I use my number one coping mechanism, which was the gym. The death tolls were rising, governments did not know what to do, and different reports on the seriousness of the pandemic were being released. This made me, along with the world, scared.

I then moved to my childhood home in Edmonton, Alberta, in order to help my mom who is immune deficient.

I continued to work, increasing the number of people I had contact with. This left me in fear that I was a silent carrier who could give my mom the virus, and potentially make her ill or worse. I was left with a hard decision. I could move across the country to Toronto and leave my family to fend for themselves, or I could stay home and give up my dreams of becoming a psychotherapist. As students, this pandemic has placed a lot of challenges upon us including: the possibility of having someone we know contract the virus, knowing someone who died, living off the Canada Emergency Response Benefit, isolating from our family, isolating with our family, setting back our research, having our voices heard over Zoom, and new mental health issues arising. I am sure this year has been filled with hard decisions for students all over Canada.

Tedeschi and Calhoun would say COVID-19 and the events of 2020 placed students in a position to develop a new understanding of themselves, the world, how they relate to others, their future, and a better understanding of how to live.

Tedeschi and Calhoun created a Post-Traumatic Growth Inventory (PTGI). PTGI survey items cluster around 5 factors: relating to others, new possibilities, personal strength, spiritual change, and appreciation of life.

Now that you know growth is possible through trauma, how are you going to take action and grow from this tough year? I will ask you a few questions based on the PTGI to recognize if you have grown on any or all of the 5 factors.

Edited by Maverick Smith & Curtis D'Hollander

THE ANXIETIES OF INTERNATIONAL STUDENTS AND THEIR PARTNERS WHO ARE WAITING AT HOME

BRIAN LI

Despite many great medical discoveries and advances in the last 100 years, it is hard to believe that in 2020 we have been pushed into an uncontrollable pandemic. From the first reported case in December 2019 to the end of October 2020, over 1,000,000 people worldwide have died. Hundreds of airlines have been cut, and many cities around the world have been locked down due to multiple waves of the virus. Travel bans have been implemented in many countries, and they have shut down their Visa operations to reduce incoming people. (Note: This article is based on public data and interviews conducted by the end of October 2020)

With everything that has happened in 2020 so far, anxiety seems to be, understandably, at an all-time high. We are trying to live in a world with rules we are not accustomed to, with fears and uncertainties that can make us feel small and powerless.

I am the husband of a full-time MBA student at the University of Toronto Rotman School of Management. My family and I would have settled in Toronto in August, 2020 and started with the exciting overseas experience had it not been for the pandemic. Now we are still living in our home country waiting for Visas. My wife has been taking online classes late into the night and working during the day. I am with my old job and trying to get involved with the people and life in Toronto in some way. We have a five-year-old boy who is facing uncertainty about entering elementary school next year.



Our funds have been trapped in the Visa application process. Our parents continuously express concerns for the future. It is hard to deny any anxiety or depression for these months and those to come. This is how I started discussion with the international students at Rotman to explore their mental well-being during the pandemic.

Daniel is a classmate of my wife; he and his wife are from Brazil, where they are still currently living. Daniel applied for a Visa in February but still hasn't got it, and his wife applied for her work permit later, but she can't finish her application because she needs to do the next phase at the Visa Application Centers, which are closed. He told me that international students in Brazil have to endure extended wait times, and many have not received study permits. Many who have submitted applications in as early as March either have not received the approval, or they have received the approval in principle, but not the final approval. Their partners are still waiting with no specific timeline. The situation, which was caused by the

closure of Canadian embassies and consulates due to the pandemic, has not improved. Daniel is now expecting some progress since Immigration, Refugees, and Citizenship Canada announced updated travel policies in October.

What do their lives look like? How have their lives been affected by anxiety?

The main reason most international students haven't landed yet is because they haven't received a Visa, but their anxiety comes from a lot more than hopeless waiting. There are several problems they need to deal with:

1. The dangers of living with the virus

The most important thing International students need to do is take care of themselves and their family members. With the virus spreading so quickly, international students have to first deal with the dangerous virus itself, as well as adapting to restrictions in a new country. Perhaps more

serious is the impact the outbreak has on daily living, such as coping with the death of relatives and friends, needing to protect yourself constantly, being strong for your family, dramatically adjusting your lifestyle, and coping with loneliness and isolation.

“My family has been on edge since my father tested positive for COVID-19, and my partner is also disturbed by the insurmountable odds we’re facing all the time. He recovered about a week ago. We haven’t been able to step out, apart from medical reasons. Juggling his medical visits with the MBA has not been easy.” — Anonymous

“My grandmother sadly passed away a few months ago (unrelated to COVID-19), and we were not able to have a funeral for her.” — Fabiola and Luis, Mexico

“I am a physician. There is less work in private practice and more stress in national hospitals.” — Claudia, Peru

2. Loneliness caused by social distancing

Through interviews with students, we see that lockdown causes many problems: not being able to see friends in person, feeling bored and stuck at home, not being able to exercise at the gym, shame felt by eating too much and gaining weight, etc. Dealing with these problems all at once can be overwhelming and can make the situation feel worse.

The outbreak has cut off our normal social connections, which has caused many of us to feel lonely and isolated. Unfortunately, loneliness and isolation often occur at the same time and strengthen each other; lonely people tend to isolate themselves. An Australian government survey in April

found that a majority of respondents (57%) reported increased feelings of loneliness and isolation since the outbreak. Dr. Catherine Barrett, clinical psychologist and scholar, found that people deal with isolation in two ways: Some people like to spend time alone and understand that it is temporary, while others feel lost and disoriented, which makes them feel sad and lonely.

“Luis and I were supposed to get married in a 220-guest ceremony and had to change it for a 40-guest backyard wedding. My brother also canceled his wedding. I find it harder to stay motivated. I feel sad because I rarely get to see my family. I feel very alone all day (Luis has to go to work in person).” — Fabiola and Luis, Mexico

3. Online classes and online socializing

Online education is a challenge for both students and teachers. There is the sense of oppression that the camera gives to people. Seeing themselves on the screen may give people different degrees of uncomfortable

feelings. Realizing that others can see themselves so intimately, compared to being in the classroom, can put them in a state of tension. Second, distance is a strange thing, for courses that require a lot of teamwork or discussion, the disadvantage of online education is that, most of the time, it is impossible to accurately judge the other person’s inner thoughts. After all, body language is also an important aspect of communication.

“Even before I was studying online, I was sent to work from home. The screen exhaustion is real.” — Anonymous

“Not being able to see people and interact with them physically has been a nightmare.” — Byron and Dirkie, South Africa

4. Time zone problem

Time zone differences is an issue for overseas students’ learning. Taking online courses while in a different time zone adds even more stress and anxiety for international students, especially those in Asia. This is a big problem because of the lack of practicality when



it comes to teamwork and efficiency. Faulty internet connections could cause even more problems, especially during exam season. It may be difficult for teachers to solve these problems, but it can hurt international students' feelings because their needs are not being taken into consideration.

"Classes are from 5:30 pm to 9:30 pm in my time zone. It is easy to attend classes, but I am unable to attend any other events that happen during the day after class since it is in the middle of the night." — Anonymous, India

"The time difference is definitely very disruptive because I often have to stay up later or get up really early to attend other events, and after a long day of studying/activities, my brain is not functioning at its prime in terms of understanding and retaining new information." — Anonymous, China

"In Brazil, we are on GMT-3, so only one-hour difference from Canada. It does not affect online classes. However, my assignment group colleagues are from different countries, so it can be disruptive when finding the best time that fits everyone." — Daniel, Brazil

5. Economic problems

The total cost for international students is much higher than for domestic students. For example, higher tuition fees and living costs, and thus international students tend to be more concerned about uncertainties in the future. For those who wish to work in Canada upon graduation, the unstable global economy has added to their anxiety.

The situation is slightly different in China and other areas that have been less affected by COVID-19 for periods. Although Visas still cannot

be approved, the outbreak has been effectively controlled. People have been back at work for a long time now. International students who have been waiting are starting to think about the way back, re-examining the meaning of studying abroad with high costs and concerns about the future economy. Some of those who continue to wait for Visas say they are afraid to go, because even if they receive a Visa, Toronto's second wave is discouraging. Students with children are more anxious, worried about whether their children will be infected going to school in Toronto. Others, however, have given up.

"Also, all the worry about the global economy, people's wellbeing and getting sick was and sometimes is a real burden." — Byron and Dirkie, South Africa

"I am considering deferring, since I need to be in Canada to access money from a local government scholarship. Without the money from the scholarship we will be facing financial issues (three months in Mexico without the money is fine but more than that starts to put a lot of pressure)." — Fabiola and Luis, Mexico

"Yes. Greatly. We are at a loss because we are unable to get the most out of the MBA experience and unable to do anything about it. There is no social component to the university experience either." — Anonymous, India

"We encouraged each other to make more money before moving to Canada." — Anonymous, China

What have they done to deal with the depression and anxiety?

Going for a walk was mentioned the most, others eat more and enjoy

having a beer, and reading books and listening to music are also helpful. For those who have a partner they live with, they do their best to be there for them.

"My partner and I are very anxious. We've both tried meditation to relieve anxiety, but I think it works better for her than me." — Saurav Ghosh and Krupa Kapadia, India

"We try to support each other and try to go for a walk every day to relieve the stress." — Fernanda and Alexis, Mexico

"Medication." — Anonymous

"I am medicated for panic and anxiety, also a little of sleepless. Patricia is eating more and trying to exercise." — Claudia and Patricia, Peru

"We train hard five days a week - this helps a lot. It keeps my body feeling well." — Byron and Dirkie, South Africa

What will you do first when you get to Toronto?

"Probably quarantine. After that, drink a beer and visit Toronto, because I have never been there." — Anonymous

"Explore all the parks and nature we can find." — Anonymous

"Meet up with people once out of quarantine! I really want to see my study team in real life." — Anonymous

Can something good come from all this?



What are the long-term effects of the outbreak on us? In addition to the unpleasant aspects mentioned above, could there also be benefits? It could lead to reform of public health systems, improvements in social governance systems, profound changes in the global economic climate, and the reduction in social activity gives us the opportunity to re-examine ourselves. There's another effect that's not grand and intuitive, but it's already permeated us, and that's how the pandemic has reminded us to take care of our mental health, ourselves, and our partners.

As the sample size of this discussion was not large, the cases mentioned in this article do not represent the situation of all overseas students. In addition, based only on the feedback from the interviewees and questionnaires, most students are not anxious to the extent

of mental illness. Nonetheless, the purpose of my writing is to shed light on a situation experienced by a large number of overseas students, which is worthy of our attention.

I hope the COVID-19 pandemic will pass as soon as possible so that international students can meet in Toronto. More importantly, no matter what the reality is, we should try our best to be optimistic.

Contributors:

Rachele Chaar and Cody Littlefield in Rotman Life Partners Club of University of Toronto. They helped me with the survey and sent it to their members.

Zihan Li for providing her professional suggestions.

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VOLUNTEERING DURING A PANDEMIC: SUPPORTING INDIVIDUALS WITH DEVELOPMENTAL DISABILITIES

ELIZABETH KARVASARSKI

Reena is a non-profit agency that provides many services for individuals with developmental disabilities. Some of the services include residential (providing homes for people to live in that are always equipped with staff), day programs (individuals partake in sensory activities such as arts and crafts, exercise, or music), employment programs and outreach programs (various social enrichment programs, such as Camp Renna). In addition, Reena partakes in advocating within various levels of government to obtain more services for individuals with developmental disabilities.

As a Volunteer Coordinator at Reena, Raquel Heayn sat down virtually with Element Magazine to discuss how the absence of in-person volunteers, due to the current pandemic, is affecting the mental health of the individuals who are part of Reena. Graduating with a degree in Biology, Raquel had partaken in a variety of jobs throughout her working life, however; volunteering has always been a prominent and consistent part of her activities.



Raquel Heayn, Reena Volunteer Coordinator

Whether it was at her children's school or in local sport leagues, Raquel enjoyed volunteering, and as a result, ended up pursuing a career in volunteer services and volunteer management. She went back to school and received her certificate in Non-Profit Voluntary Sector Management. Shortly after, she accepted a position at Reena to become the Volunteer Coordinator, where she applies her education, skills, and lifetime experience to her work.

Before the pandemic, Reena offered a variety of in-person volunteer opportunities. These opportunities included, spending one-on-one social time with an individual who has developmental disabilities, visiting and helping individuals in their residences, and assisting participants and staff in the day programs or outreach programs. There were also opportunities to volunteer in the administration, including assisting with fundraisers such as "Striking for Reena" and other special events. However, in order to remain safe during this pandemic, these in-person volunteer opportunities have come to a halt.

The lack of in-person volunteering has caused individuals at Reena to miss their interactions with the volunteers and miss that physical link to the community provided by the programs at Reena. Raquel explained that it is difficult for these individuals to understand what is



happening causing an increase in anxiety. Therefore, the Learning and Development department has created 5-10-minute videos that help explain the pandemic, the personal protective equipment required, the safety precautions that must be followed, and the videos reassure them that it is ok to be feeling anxious right now. Furthermore, these videos address questions that the individuals may have, including, "what happens if my friend gets diagnosed with COVID and why can't I go out or to work?" The staff working with the individuals have been doing their best to try to fill in the gaps and offer support. As well, the staff have been running mini day programs within the residences, to try to recreate the experience of these programs, but with a smaller group that consists of residents at that location. Although the individuals

cannot see their friends from other locations, Raquel explained that through Zoom or Skype they can still interact with friends. With all of the technology that is being introduced, Raquel senses that the younger individuals have been able to adapt quicker than the older individuals.

In order to continue the important aspect of individuals at Reena interacting with volunteers and being integrated into the community, all volunteer opportunities are now virtual. Raquel explained that they tried to reimagine the in-person volunteer experience onto virtual platforms so that they are still enjoyable and interactive. For events such as 'Arts & Crafts' a lot more planning was involved, including delivering the supplies to all the participants and volunteers, as well as changing the delivery of instructions to be more visual and verbal. The pandemic has also created a unique opportunity to create new experiences that the volunteers can bring to the individuals, such as programs like guided meditation, coffee club, music, creative writing, and touring the world. Touring the world is a

program that allows individuals to select different geographical wonders and participate in virtual tours at some of the world's most exquisite museums. Raquel enthusiastically said, "you may never have a chance to go to the Louvre in your life, but now you can attend virtually!". Additionally, these experiences allow individuals to meet new people, whom they may not have otherwise met, which is extremely exciting. The volunteers are doing a fantastic job at creating cheerful, warm, and welcoming virtual environments. Raquel explained that the whole sense of isolation has been very hard for the individuals, but they are working on ways to minimize it and their virtual volunteer programs have been very helpful.

The feeling of isolation brought on by this pandemic has really challenged mental health for a lot of people. Volunteering can be a way to help you feel connected to your community and minimize that feeling of isolation. When asking Raquel about advice she could share for people who are looking to volunteer during this pandemic, she had very insightful guidance. Raquel suggested to research your organization of interest and make sure that their mission statement is in line with your values. It is important to know who the organization is and what they are doing. Talking to other people who have volunteered at your organization of interest is a great way to get a sense of the kind of activities and programs they run. As well, she advised to think about what you want to get out of volunteering. Are you doing it to give back, do you need it to apply for a specific program or experience, or to help give you ideas for a career? Importantly right

now, during the pandemic, you need to know what safety protocols are in place at your organization of interest. Furthermore, if you want to volunteer, however; you are unsure as to where, Raquel mentioned a list of organizations that not only list the volunteer opportunities in your area, but will also assist you in trying to find the right volunteer opportunity for you. These organizations include: Spark Ontario, Volunteer Toronto, Charity Village, YMCA, Indeed, and many more.

The pandemic has really highlighted the importance of in-person volunteering for individuals with developmental disabilities. The interactions and feeling that physical link with the community is difficult to re-create virtually, however; the staff and volunteers at Reena are doing their best to ensure the connection between the individuals and their community is strong, in order to lessen the sense of isolation. Raquel concluded the interview by mentioning how sometimes when volunteering, you end up getting more than what you are give. You get to learn about people and meet other individuals. Moreover, if you have any preconceived ideas about people with developmental disabilities, sometimes volunteering can help open our eyes to the potential that others have. Lastly, sometimes doing things that you are uncomfortable with or putting yourself in an uncomfortable situation can help you grow as a person.

Edited by Aryan Gharffarizadeh & Emily Mastragostino





THE RELATIONSHIP BETWEEN SLEEP, MENTAL HEALTH, AND COVID-19 DISRUPTIONS

AN INTERVIEW WITH DR. INDRA NARANG

AMY CHAN

In an interview for Elemental magazine, I had the chance to chat with Dr. Indra Narang on how COVID-19 has disrupted our sleep and mental health. Here, she presents the latest evidence in the field of sleep medicine and provides ways to mitigate the effects of the pandemic.

Can you give us an overview of your background and research specialty?

“I completed all my undergraduate training in the UK. I first trained as a paediatrician followed by subspecialty respirology training in the UK. In 2006, I completed further training in Sleep Medicine at the Children’s Hospital of Philadelphia. In 2007,

I was appointed as the Director of Sleep Medicine at the Hospital for Sick Children, Toronto. As well as my clinical role where I look after children with complex sleep disorders, my research foci include (1) advancing a personalized approach for the management of obstructive sleep apnea in children and (2) understanding the consequences of chronic sleep deprivation on the developing brain and neurocognition.”

Why is sleep important? What are the recommended hours of sleep?

“Sleep is one of the most fundamental necessities of life and inextricably linked to physical, psychosocial, mental health, and wellness. Lack

of sleep in adults is associated with increased risk of cardiovascular disease, diabetes, anxiety and depression. It also leads to falling asleep while driving and associated motor vehicle accidents; cravings for sweet, salty and starchy foods predisposing to weight gain; memory impairment and difficulties with concentration and dementia in older adults.

The National Sleep Foundation posted the latest recommendations for each age group. In adults, sleeping less than 6 hours a night is defined as short sleep duration.”

How has the COVID-19 pandemic affected sleep?

“COVID-19 has impacted individuals in many unique ways. We have observed different patterns, including difficulty in falling asleep and staying asleep; fragmented sleep and poor sleep quality due to multiple night awakenings, partially due to anxiety; delayed or disrupted circadian rhythm with later sleep times and later wake up times, and evidence for staying in bed longer and over-sleeping.

These changes can be attributed to many factors including a lack of regular routine or schedule; disrupted circadian rhythm due to reduced exposure to natural light and excess screen time; anxiety, stress and rumination, and increased sedentary behavior, food consumption and weight gain.

However, some people may experience improved sleep duration and quality due to greater flexibility of sleep schedule that enables a schedule more aligned to circadian rhythm and more sleep, for example, in night owls. Night owls have a tendency to sleep later and wake up later so factors such as not having to commute does in fact mean they have more time to sleep in the morning.”

Do these changes in sleep have an effect on mental health? If so, how?

“Yes, there is increasing evidence to suggest that altered sleep—specifically, chronic sleep deprivation which encompasses sleep restriction and impaired sleep quality, may have adverse effects on mental health, particularly anxiety and depression. In animal models, chronic sleep restriction for more than a week was shown to lead to alterations in the neurotransmitter receptor systems—such as the serotonin-1A receptor and corticotropin-releasing



hormone receptor system—and neuroendocrine stress systems—like the hypothalamic-pituitary-adrenal axis. These changes are similar to those reported for major depression and underscore the importance of good sleep for improving mental health.”

Are there any symptoms of disrupted sleep that we should be aware of?

“Key symptoms may include difficulty falling asleep and staying asleep, difficulty waking up in the morning, feeling unrefreshed on waking up, daytime fatigue and sleepiness, and the need for daytime naps. Other symptoms include irritability, lethargy, an inability to concentrate and emotional dysregulation. Some adults may also have obstructive sleep apnea which is associated with nighttime snoring, pauses in breathing and fragmented sleep which together can significantly impair daytime performance.”

What are some coping strategies to improving sleep during this pandemic?

“The National Sleep Foundation have some thoughtful recommendations. Some of the keys ones to share are:

1. Set Your Schedule and Routine

Establishing a routine can facilitate a sense of normalcy even in abnormal times. Health experts have recommended avoiding major variation in your daily sleep times.

Your daily schedule should include:

- **Wake-Up Time:** Set your alarm, bypass the snooze button, and have a fixed time to get every day started.
- **Wind-Down Time:** It can involve things like light reading, stretching, and meditating along with preparations for bed like

putting on pajamas and brushing your teeth.

- **Bedtime:** Pick a consistent time to turn out the lights and try to fall asleep.

2. Reserve Your Bed For Sleep

It is important to create an association in your mind between your bed and sleep. It's recommended that sleep and sex be the only activities that take place in your bed. This means that working-from-home shouldn't be working-from-bed, and avoid bringing your laptop into bed to watch movies. If you're having a hard time falling asleep, don't spend more than 20 minutes tossing and turning. Instead, get out of bed and do something relaxing in very low light, before heading back to bed.

3. See the Light

Exposure to light plays a crucial role in helping our bodies regulate sleep in a healthy way. As you deal with disruptions to daily life, you may need to take steps so that light-based cues have a positive effect on your circadian rhythm.

- Spend some time outside in natural light. Even if there's little sun, natural light still has positive effects on circadian rhythm.
- Open windows and blinds to let light into your home during the day.
- Be mindful of screen time. The blue light produced by electronic devices have been found to interfere with the body's natural sleep-promoting processes. To help, there are device settings and special apps that reduce or filter blue light.

4. Be Careful with Naps

If you're home all day, you may be tempted to take more naps. While a short power nap early in the afternoon can be useful, it's best to avoid long naps or naps later in the day—it can hinder nighttime sleep.

5. Stay Active

Regular daily activity has numerous important benefits, including for sleep. If you can go for a walk while maintaining social distances, that's a great option. If not, there are many fitness live streams online during this pandemic.

6. Practice Kindness and Foster Connection

Kindness and connection can reduce stress and its harmful effects on mood and sleep. Try to find some positive stories, such as how people are supporting one another through the pandemic. You can use technology to stay in touch with friends and family to maintain social connections during the pandemic.

7. Utilize Relaxation Techniques

Deep breathing, stretching, yoga, mindfulness meditation, calming music, and quiet reading are just a few examples of relaxation techniques that you can build into your routines. Check out smartphone apps like Headspace and Calm that have programs designed for people new to meditation. Additionally, avoid becoming overwhelmed by coronavirus-related news. Some examples:

- Bookmarking one or two trusted news sites and visiting them only during a limited, pre-set amount of time each day.

- Cutting down the total time that you spend on social media. To help, a number of apps can monitor and even block your time on social media sites or apps each day.
- Scheduling phone or video calls with friends and family to focus on topics other than the coronavirus.

8. Watch What You Eat and Drink

Keeping a healthy diet can promote good sleep. Be cautious with alcohol and caffeine, especially later in the day, as both can disrupt the quantity and quality of your sleep.

9. Contact Your Doctor if Necessary

If you have severe or worsening sleep or other health problems, it is advisable to be in touch with your doctor."

It was a pleasure to be in touch with Dr. Indra Narang and we thank her for the important insights we can incorporate into our lives.

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LIFE THROUGH COVID-COLOURED GLASSES

STACEY J. BUTLER

When Canada first went into lockdown in March of 2020, there was a collective experience of fear and anxiety. Mundane tasks such as going to the grocery store suddenly felt risky. With the emergence of the novel coronavirus, we all felt vulnerable and isolated. However, confinement at home has also allowed us to realize that, prior to the pandemic, we took a lot of things for granted. Undoubtedly, the social isolation that came with COVID-19 has taken a toll on our mental health. Simple errands leave us questioning whether we were exposed to a virus, which unfortunately is a regular concern for those with a weakened immune system during the usual flu season. Visits with friends and family are now rare treasures, which

was not an unfamiliar feeling for those in long-term care or hospice before the pandemic. Both positive and negative, the yin and yang: the COVID-19 pandemic has given us a new perspective - it has allowed us to better understand the experience of those who may regularly be in isolation due to their health or age.

For someone with a weakened immune system, the typical cold and flu season brings fear and anxiety. However, now they have an additional concern since they are considered high-risk for worse outcomes should they contract COVID-19.¹ Lately, we can all relate to this feeling, which was normally reserved for those who were 'vulnerable' prior to the pandemic. We can now appreciate the concept

of 'risk' when visiting a family member or friend. Hand sanitizer has become a staple in our pockets and purses, much like it was for an immunocompromised individual before the pandemic. Choosing friends for our COVID bubble is a routine challenge for someone who is vulnerable and needs to limit their contact during cold and flu season. If the COVID-19 pandemic has had an upside, it is that we now have a greater understanding of the fear, anxiety, and worry that accompanies simple activities for at-risk populations. This first-hand experience allows us to empathize with people who are dealing with chronic illnesses on a daily basis, and we can now recognize and acknowledge the compassion they deserve.



The elderly are also considered a vulnerable population to COVID-19 and have subsequently been isolated from their loved ones, particularly those living in long-term care.¹ Even prior to COVID-19, older adults living in long-term care centres were more likely to experience loneliness than those living in the community.² Since March 2020, we have experienced social isolation that is comparable to what seniors in long-term care often lived through on a daily basis even prior to the pandemic. For many residents, visits with family or friends are a treasured rarity. A precious hour-long visit has the power to restore their mood and improve their quality of life. This is now relatable for all of us as we have come to recognize the importance of social interaction and truly cherish time spent with our loved ones.

The pandemic has only further isolated residents in long-term care and assisted living centres. These facilities had no choice but to restrict visitors, cancel group activities, and in some cases even cancel group mealtimes, essentially confining residents to their rooms in order to

prevent COVID-19 outbreaks.³ A recent survey of residents and their families in British Columbia revealed the harsh impact of these restrictions.⁴ The perspectives of residents in the survey suggested that many seniors fear loneliness more than they fear COVID-19. Restricting visitors may have been the only option at the start of the pandemic but it simply cannot continue due to the insurmountable harm to the quality of life of long-term care residents. With our new empathetic perspective, we can better understand this need for social interaction and the impact that it has on the residents' overall well-being. Similarly, hospices had to limit visitors at the beginning of the pandemic. In some cases, only one designated visitor was allowed per patient.⁵ Preventing someone who is dying from being with their loved ones seems, quite frankly, inhumane. People with life-limiting illnesses deserve to spend their final moments surrounded by family and friends. Not only is this important for the person who is ill, but it is essential for their loved ones to positively cope with the grieving process. Although there are necessary

precautions required to reduce the risk of a COVID-19 outbreak within healthcare centres, there is no doubt that restricting visitors in hospice is detrimental to the well-being and mental health of patients and their loved ones. The Canadian Hospice Palliative Care Association has requested a more compassionate approach.⁶ Implementing safety measures and COVID-19 screening at hospices, in order to allow more visitors, is a necessary solution to save families from irreparable heartache. While this new compassionate strategy may be more cumbersome than the current approach, our own pandemic experiences of social distancing and isolation should demonstrate its immense value.

We cannot deny that the government guidelines have been effective at flattening the curve and preventing a more dire situation. Yet these restrictions have had unintended consequences on our mental health and well-being. It may seem reassuring that we are all in this together, yet it is clear that the pandemic has impacted everyone in unique ways. No two experiences are alike. A popular post on twitter by writer Damian Barr exemplifies this concept:

"We are not all in the same boat.
We are all in the same storm.
Some are on super-yachts.
Some have just the one oar."

Barr's full poem, published in *The Wall Street Journal*,⁷ emphasizes the importance of perspective during the pandemic. We have been given a brief insight into the daily challenges of those with a chronic illness, or the elderly living in long-term care centres. We now understand the positive impact social interactions have on our mental health. There

are many simple acts of kindness, such as a virtual visit with your immunocompromised friend, or running an errand for your elderly neighbour that could provide them with the support they need during isolation. Moving forward, we can choose to use this new perspective provided by the COVID-19 pandemic and live with more empathy and compassion for others.

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Edited by Emily Vecchiarelli & Emily Mastragostino



POLICING DURING A PANDEMIC

SHAMANTHA
JAHAN LORA

As we persist in a **dystopian** world, we continue to experience rising fear and uncertainty. The COVID-19 pandemic has posed novel ethical quandaries for the government and health officials. The Institute of Medicine iterates that the crisis standard of care should be based on the ethical principles of fairness, duty to care, transparency, consistency, proportionality and accountability.¹ While researchers around the world are striving to create a vaccine, public health experts look towards nonpharmaceutical interventions as a response for disease containment, urging countries to practice social distancing.

Although public health officials have identified social distancing as a method to combat the pandemic, many legislative bodies view it as an ineffective policy without the assistance of institutions such as the police to enforce strict guidelines. However, enforcing monetary punishments has been unfair and ineffective. People are more resistant to complying with these laws when it's apparent that institutions employ undemocratic and unjust methods of enforcement. Instead, legislative bodies that have adopted evidence-based pro-public health conduct combined with educational and social support have been successful in reducing transmission. Additionally, the intergenerational **egoism** that



exists within the police force coupled with institutional discriminatory enforcement has exacerbated the public health crisis for marginalized communities and has limited that communities' access to educational support programs.

In countries such as Italy, China and Canada, individuals have been charged for COVID-19 related violations.² An interactive mapping project, which shared and documented information across Canada on COVID-19-related police enforcement, counted a total of 4575 people fined within the month of April.³ These tickets were as high as \$2000 in Saskatchewan, \$1546 in Quebec, and \$880 in Ontario.³ This online platform drew attention to provinces such as British Columbia that have not initiated police enforcement and fining yet were the first to flatten the curve using proper educational messaging.

Within weeks, the evident shift from education to enforcement took place in Ottawa, Montreal and Toronto. Toronto's Mayor John Tory favoured strict enforcement for those

continuing to gather at parks and stated that fines ranging from \$750 to \$5000 would be issued as necessary.^{4,5} However, compliance with public health strategies and gaining public trust is derived from educational approaches rather than coercive fines. By using government resources to advise the public on potential risks, evidence-based practices and research that justifies public health officials' guidelines, such as social distancing, marginalized communities are then empowered to make informed decisions regarding their health.

To identify the balance between optimizing public health outcomes and protecting human rights and freedoms, it is crucial to consider the principles of reciprocity, and justice when assessing how law enforcement fits into this process. First, disciplinary actions can be morally justified by the principle of non-maleficence or 'do no harm'. In other words, public health authorities and policy makers claim to implement restrictive means and sanctions to prevent harm in the name of public health, yet trends of highly racialized, gendered and classed

enforcement continue to emerge in the context of COVID-19 disease control.

Consider the unequal community-based infection rates when combining demographic characteristics with socioeconomic conditions of recent immigrants, LGBTQ2S, older populations in long term care facilities, those in precarious housing who are forced to share temporary space, migrant farm workers and students living in crowded apartments. These marginalized communities are disproportionately composed of Black, Indigenous, and other racialized minorities who are in considerable need of public health support as opposed to law enforcement and fines.

Vulnerable populations that are disproportionately impacted by punitive enforcement measures also include individuals who are suffering from mental health challenges during COVID-19. The police-involved death of Ejaz Choudry, a 62-year-old schizophrenic individual shot by Ontario's police during a plea for assistance with a mental health crisis, exemplifies the ineffective approach of police intervention.⁶ Prejudiced enforcement, especially against marginalized communities, can be misused as a tool to instill fear in certain communities rather than as a means to protect public health.

In another case, eight homeless youth in Montreal were each fined \$1546 when found together as the resources which served to accommodate them were closed during the COVID-19 health emergency.⁷ In Toronto, homeless individuals were fined \$880 for sitting on public benches.³ A point that is often neglected is that ineffective methods of disease control, like unjust policing, can cause more

harm than the virus itself. What seems illogical is having consequences that can lead to increasing imprisonment in overcrowded jails, leaving prisoners at higher risk of exposure to a communicable disease. Pandemic police power can encourage discrimination towards marginalized and Indigenous communities, creating an atmosphere of mistrust, which only serves to drive people away from healthcare. This ultimately leads to a detrimental trend of underreporting COVID-19 cases, higher mortality rates among minority groups and racial disproportionality.

At a time where many questions remain unanswered, social distancing is a powerful precautionary tool in restricting spread of disease. However, policing can be a violent institution with systemic power that is not designed to handle public health crises.

The distinction between a public health recommendation and an enforcement needs to be made. A public health crisis is not a criminal justice problem, and we shouldn't approach it as such. Instead, legislative bodies should take a robust approach to tackle this public health crisis, by demonstrating a long-term commitment to education and pro-public support where the police can be perceived as an accessible institution for help rather than a threat.

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THE EVOLVING UNDERSTANDING OF SUBSTANCE USE DURING THE PANDEMIC

AN INTERVIEW WITH DR. TARA ELTON-MARSHALL

EARVIN TIO

Dr. Tara Elton-Marshall is an independent scientist with the Institute for Mental Health Policy Research at the Centre of Addiction and Mental Health (CAMH), an assistant professor in the Clinical Public Health Division at the Dalla Lana School of Public Health at the University of Toronto, and an adjunct associate professor in the Department of Epidemiology and Biostatistics at Western University. Her journey began at the University of Waterloo, where she completed not only an undergraduate degree in psychology, but a doctorate as well, focusing on tobacco control policies. Following her graduate education, Dr. Elton-Marshall worked with the School of Public Health and Health Systems at the University of Waterloo focusing on youth surveys (see the Canadian student alcohol, tobacco, and drugs survey¹) where she gained additional experience in survey design and administration, as well as policy evaluation.

Policy is defined by the Centers for Disease Control and Prevention (CDC) as “a law, regulation, procedure, administrative action, incentive or voluntary practice of governments and other institutions.”² Additionally, the CDC also states that “Policy evaluation uses a range of research methods to systematically investigate the effectiveness of policy interventions, implementation and processes, and to determine their merit, worth, or value in terms of improving the social and economic conditions of different stakeholders.”³ In essence, policy making and policy evaluation are people-focused. As Dr. Elton-Marshall puts it, the most rewarding part of her research is “getting out of the ivory tower” and working with people directly, especially those most impacted by her research outcomes.

In advance of joining CAMH, Dr. Elton-Marshall and Dr. Scott Leatherdale at the University of

Waterloo received grant funding to examine the impact of the expansion of online gambling in Ontario. More recently, she is a nominated principal investigator (NPI) on a Canadian Institute of Health Research (CIHR) funded team grant investigating the impact of cannabis legalization in Ontario. In a broader view, Dr. Elton-Marshall’s research focuses on policies surrounding substance use and mental health. She is a co-principal investigator on the Ontario node of the Canadian Research Initiative in Substance Misuse (CRISM), otherwise known as the Ontario CRISM Node Team (OCRINT). Her work with OCRINT centers on engaging with key stakeholders such as community members with lived or living experience with drug use, healthcare and service providers that interface with the community, and other researchers who are working together to tackle issues in substance use seen in Ontario and Canada. One such issue that is a major focus for OCRINT priority projects is the opioid crisis seen in recent years⁴. Projects coordinated by the OCRINT team on this front involve investigating naloxone distribution, detoxification and withdrawal management, and opioid use in corrections populations. Dr. Elton Marshall also notes that she has observed an increase in overdoses during the COVID-19 pandemic. She speculates that this could be due to several reasons—people who use drugs may have a harder time accessing services and support, the drug supply chain may have been affected, and mandated self-isolation may contribute to higher chances of overdose due to increased isolation, for example.

With regards to the COVID-19 pandemic, Dr. Elton-Marshall and her colleagues at CRISM worked





Dr. Tara Elton-Marshall

to formulate COVID-19 national rapid guidance documents based on data collected early on in the pandemic. Dr. Elton-Marshall worked specifically on the guidance document outlining harm reduction worker safety, specifically in supervised consumption services. She believes that it is important to keep these sites operational during the pandemic to combat the rise in overdoses. However, she also understands that the safety of harm reduction workers and community members who use these sites is paramount. In compiling the guidance document, her team engaged in extensive research around recommendations to ensure the safety of both clients and harm reduction workers are protected. The resulting guidance documents are now available on the CRISM website and have helped service providers manage the substance use crisis in light of the COVID-19 pandemic. Knowledge translation documents have also been developed to ensure that the information is widely accessible.

Dr. Elton-Marshall's team has also been conducting qualitative interviews with people who use drugs across Canada. She is hoping to understand the difficulties they may be experiencing, particularly around accessing services, increased isolation, and the potentially toxic drug supply. Preliminary data collected from these interviews have identified broader issues during the pandemic, such as food insecurity. For example, access to food banks has become increasingly difficult and as a result, people are facing extreme hunger which can potentially lead to drug use. She is also working with Toronto-based market research firm Delvinia on a project investigating mental health among Canadians over several time points to understand the effects of the pandemic on mental health over time. As a believer in open science, Dr. Elton-Marshall shares that the data collected with Delvinia is readily available through Delvinia's website. Findings from this project are also presented on a regularly updated dashboard available on the CAMH website. One interesting result Dr. Elton-Marshall shares from this project is that women are now once again seemingly experiencing more anxiety than men, with an observed gender gap similar to the one seen earlier in the pandemic around the month of May. That is not to say that men do not experience mental health issues. However, Dr. Elton-Marshall states that there is no statistical significance in rates of depression between men and women. She also notes that the survey shows people with children are more likely to identify as depressed, anxious, and lonely than those who do not have children.

Dr. Elton-Marshall is excited to share further outcomes from both her work with Delvinia, as well as

her other ongoing projects, as the data becomes readily available. She also plans to continue her work with the Ontario Student Drug Use and Health Survey (OSDUHS) operating through CAMH as she believes youth and adolescents are an important population to study, especially during this pandemic. As for the future of research in this field, Dr. Elton-Marshall sees potential in machine learning and leveraging different data types helps to inform decision-making processes and draw better conclusions. She advises people interested in her field to get experience and to definitely look for opportunities—whether that be volunteering for a professor with interesting research topics, or simply exploring what a program offers.

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TIPS FOR SUCCESS IN A NEW LIVING ARRANGEMENT DURING COVID-19

MELBA LUI

The COVID-19 pandemic has changed every aspect of our lives, from the way we attend school and work, to the way we interact with our family and friends. This year, the pandemic has shone a light on the complexities of housing, complicating life for those who do not have a permanent home to stay in. I am certain that I am not the only one who had to rethink my living situation as a result of the pandemic.

Prior to the pandemic, I was living alone in my apartment, which meant that home was always a safe space and I could be as disorganized as I wanted without affecting anyone else. Naturally, this all changed when my partner and I decided to move in

together during the pandemic, as there are different rules when a space is shared. Whether you have or you are considering moving into a place with a new roommate (stranger or otherwise), here are two tips to help you cope with the transition into a new living arrangement:

1. Locate your safe space. Or, as one of my friends called it, locate your “cry space.” Unlike living alone, I can no longer cry or express myself whenever and wherever I wanted to. It may sound silly, but when you’re living in a small space with someone, tensions can escalate quickly if there is no plan to de-escalate the situation. I acknowledge that my headspace affects the people I live with, whether positively or

negatively. Therefore, it is important to identify a safe location, both for your sake-to alleviate the feeling of being trapped-and for your roommate’s sake. This should be a space that allows you to decompress without the potential judgement or worry of those around you.

Examples of safe spaces:

- Bedroom
- Closet or washroom (if you don’t mind smaller spaces)
- Car/vehicle, if available (this is my chosen safe space)
- A specific corner in your home
- The park
- By your favourite tree
- Anything else that works for you!





2. Communicate your needs as soon as possible.

This is directly related to Tip #1. For me, it is important to have a safety plan for both my emotional and physical safety, which includes identifying a safe space. You may choose to share more about yourself depending on the relationship you have with your roommate, but at the minimum, a conversation about safe spaces and how we'd like the other to respond to us would save a lot of future troubles. This conversation can be as simple as, "Some days, I might not be feeling too great, so I probably won't be responsive to you. It's best to give me some space when I retreat to _____ (insert safe space). Do you have any go-to places or habits for those off days?"

Communicating your needs also includes the little habits we all bring with us. When my partner and I first moved in together, we discovered that we dry our dishes differently—he would dry them right-side up and I would dry them upside down. Habits and preferences like these may seem microscopic on regular days, but they have the potential to be triggers on those not-so-great days. Talking about these preferences ahead of time not only mitigates future arguments, but it can also be a great icebreaker as well! Understanding why someone does something (or if it's just a habit they inherited from a parent or sibling) can help you and your roommate figure out if it's something one person will try to change or whether both people can simply acknowledge that it will remain different.

Examples of habits to discuss:

- Do you dry dishes right-side up, or upside down?
- Does the toilet paper roll hang over or under?
- Should the toilet seat be up or down? If it is down, is it all the way closed?

Everybody has different needs and wants when it comes to their living situations. To make the transition easier during COVID-19, I encourage you to identify your own needs and wants, and clearly communicate them with the people you live with for a stress-free start to a new living arrangement.

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HAMONTWASHROOMS: STARTING THE CONVERSATION ABOUT PUBLIC WASHROOM ACCESS AND WELLBEING

CLAIRE HALLETT

AN INTERVIEW WITH FAIRUZ KARIM

You are walking home from work. Normally, you take the subway, but you have started to feel uneasy on public transit due to the surge in COVID-19 cases. Before you left the office, you felt like you might need to use the washroom. However, you foolishly decided to hold it. Now that you are halfway between work and home, you realize that you won't make it. You rush into a coffee shop, but they've closed their washrooms due to COVID. You try the gas station next door, but they, too, have closed their washrooms. You are so desperate that you even knock on a stranger's door, but there is no answer.

What are you going to do?

If you are lucky, you will never find yourself in the situation described above. Unfortunately, many people will be all too familiar with the panic of not being able to find a washroom. There has always been a lack of public washrooms in major Ontario cities, including Toronto, but only during the COVID-19 pandemic has the issue attracted public attention. Prior to the pandemic, most people relied on washrooms located in businesses, which may be referred to as publicly-accessible washrooms. Public washrooms, on the other hand, are washrooms established and maintained by local governments. Now that many publicly-accessible washrooms are closed, it has become

obvious that there is a serious lack of public washrooms.

HamOntWashrooms is a social media advocacy campaign that brings awareness to the lack of public washrooms, why it is a problem, and what we can do to fix it. Through Instagram (@hamontwashrooms) and Twitter (@hamontwashrooms), HamOntWashrooms makes public washroom research and policy accessible through infographics, data summaries, and links to relevant resources.

The initiative was started by McMaster University student, Fairuz Karim. Fairuz is pursuing a degree

in Psychology, Neuroscience, and Behaviour, with a double minor in Sociology and Sustainability. During her undergraduate career, she developed a passion for community advocacy, which led her to create HamOntWashrooms. Fairuz sat down with me to speak more about the initiative.

“The HamOntWashroom public washroom advocacy campaign came out of a class project I was doing this past summer in a course called SUSTAIN 2SS3: Advocating for Sustainability with Professor Sarah Precious . . . While taking this course and even before, I was having conversations with my parents and friends about how it’s become difficult to navigate the outdoors because there are no washrooms. You would think that it’s something that our cities would have. It seems like such a basic necessity.

In this course, we learned about how to tie in advocacy with sustainability to address real, pressing issues in the Hamilton community. We were presented with a couple of different issues and one of them was the lack of public washrooms in Hamilton. I knew instantly that I wanted to work on addressing this issue. The project was championed by Kate Whalan, Senior Director of the Academic Sustainability Programs Office, and Violetta Nikolskaya, Senior Analyst of Programs and Advocacy at the YWCA Hamilton. Working with a group of amazing peers coming from various academic backgrounds, Kate, and Violetta, we developed a social media campaign to talk about the lack of public washrooms in Hamilton. Our team was highly interdisciplinary, and I think that added to the strength of our campaign. The project didn’t end when the course finished. My group



Fairuz Karim, owner of [@hamontwashrooms](#) on Instagram

members had other responsibilities and could not continue with the project. However, I was very happy to keep pushing forward with our social media campaign. I worked with Kate and Violetta to refine the social media campaign and to write an op-ed on the issue of public washroom access.”

In the op-ed, published in the Hamilton Spectator, Fairuz outlines the problem of public washroom access and its effects on physical health, such as increased spread of COVID-19 and other infectious diseases. During our conversation, Fairuz also highlighted the mental health consequences that stem from the lack of public washrooms.

“Public washrooms are important for upholding dignity. The lack of these facilities is disproportionately affecting the most vulnerable in our communities, including those who are experiencing homelessness or housing insecurity. This issue is also a highly intersectional one. It greatly impacts those who menstruate, those

who are pregnant, those with small children, those with differing abilities, and those who need frequent access to washrooms.

For these populations, washroom access is fundamental to the reasonable use and enjoyment of public spaces. Now that COVID-19 restrictions have limited other options for recreation and leisure, public spaces are more important than ever for everyone’s mental health. However, without public washrooms, many individuals cannot use these spaces and thus face an additional and entirely preventable barrier to wellbeing.

“Being able to easily access or not having to think about difficulties when it comes to washroom access has a lot to do with ‘toilet privilege’. Not having access to public washrooms is really marginalizing and it has to be addressed more . . . For any individual who has had to plan their day around public washrooms, there’s a lot of stress and mental pressure if there isn’t any access to a safe, clean, and accessible

public washroom. In this way, this issue definitely has an intersection with your mental wellbeing when you think about the levels of stress and anxiety that might be around the inability to access washrooms.”

Given the demonstrable negative effects of the lack of public washrooms, it seems strange that municipalities do not prioritize public washrooms. I asked Fairuz for her thoughts on this.

“There’s a lot of stigma associated with public washrooms. But they are so important for the health of our cities. We need public washrooms for a more sustainable future. As Leslie Lowe says, who is the author of ‘No Place to Go: How Public Toilets Fail Our Private Needs’, public washrooms are pieces of city infrastructure that are

just as important as road lights or street benches. Public washrooms might not be a priority because of how heavily stigmatized the topic is. We have to work together on destigmatizing, addressing, and planning next steps to create actual solutions that place the needs of people and communities at their core. We need a different way of thinking, which starts off with doing better in listening and collaborating.

That’s where the social media campaign comes in, right? Putting this uncomfortable, important topic into normal everyday conversation . . . We really need to bring this to the forefront of our conversations to get municipalities to put it on their agendas.”

For those who are interested in

addressing the lack of public washrooms in their own communities, Fairuz has some advice.

“Right now, they could be vocal about their opinions, whether that’s on social media or contacting their local MPs or councilors. It’s especially important to emphasize how much of an impact this has been having on homeless individuals during COVID. If you are able, be active in letting your concerns be known.”

For more information and to stay updated with HamOntWashrooms, be sure to follow the initiative on Instagram ([@hamontwashrooms](https://www.instagram.com/hamontwashrooms)) and Twitter ([@hamontwashrooms](https://twitter.com/hamontwashrooms)).

Edited by Amy Chan & Emily Mastragostino



Infographics taken from the HamOntWashrooms Instagram

HOW DOES SOCIAL MEDIA AFFECT YOU? – PERSPECTIVES FROM NETFLIX'S 'THE SOCIAL DILEMMA'

AMY CHAN

'The Social Dilemma' is a Netflix Original documentary that interviews former employees of leading Silicon Valley companies on the pitfalls of social media use. It features ex-senior members of Facebook, Pinterest, Twitter, and Google and details how these companies are tracking and utilizing data to create addictive platforms that prompt society to spend hours-on-end scrolling, liking, and sharing. Simultaneously, it follows a fictional storyline of a typical family who falls victim to the negative impacts of social media use. Here are the biggest take-aways from this documentary:

"Persuasive technology is—just sort of—design intentionally applied to the extreme, where we really want to modify someone's behavior." – Tristan Harris, former Google design ethicist

"How much of your life can we get you to give to us?" quoted Tim Kendall, former executive of Facebook and former President of Pinterest. How often do you find yourself scrolling, and having 20 minutes go by in the blink of an eye? Or, not being able to get out of bed because you're on social media? Every click, like, and share is monitored and used intentionally to suggest more content with which we will want to engage. Social

media platforms thrive through this incessant attention and use—so much so that "growth hacking" is an entirely separate discipline that targets human behaviour for company growth. Similarly, our newsfeeds are tailored to our views and positively reinforces our beliefs. This film suggests that social media constantly validates our beliefs and makes it difficult to consider others' views. This contributes to societal polarization. Shoshana Zuboff, Professor Emeritus at Harvard School of Business, states that, *"we now know we can affect real-world behavior and emotions without ever triggering the user's awareness."* Social media makes it difficult for many of us to go a few minutes, an hour, let alone a day, without checking our phones. For some, it increases the potential for social media addiction.

"A whole generation is more anxious, more fragile, more depressed." – Jonathan Haidt, Social Psychologist

Jonathan Haidt, a social psychologist interviewed for this documentary, states that the prevalence of depression and anxiety in American teenagers dramatically increased between 2011 and 2013. The number of hospitalizations due to self-harm have increased by 62% for older teen girls and 189% for pre-teen girls.

Similar patterns are seen with suicide. Dr. Haidt suggests that Generation Z—individuals born after 1996—is the only population in history to be introduced to social media in middle school, and represented a more anxious, fragile and depressed population. Our constant exposure to filters and technology-altered physiques create unrealistic standards of beauty that change our self-perception. Tristin Harris comments that, *"these technology products were not designed by child psychologists who are trying to protect and nurture children... Especially social media, [it] starts to dig deeper and deeper down into the brain stem and take over kids' sense of self-worth and identity."* This should prompt a reflection on how social media affects our body image, self-worth, and mental health.

How can we reduce the effects of persuasive technology?

Although the use of social media is not slowing down, these experts suggest many ways to reduce the effects of persuasive technology, such as:

1. Uninstalling apps that do not enhance your life.
2. Turning off all notifications.
3. Making sure you are exposed to different types of information, even if you do not agree with them.
4. Maintaining a schedule for device use; this means negotiating a fixed time to put down your phone.

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Edited by Andrea Diaz & Curtis D'Hollander



WHEN THE WORLD MOURNS YOUR HERO: NAVIGATING PUBLIC GRIEF PERSONALLY

MOBOLU COKER

In 2020, many events took place that marked the year with a somber tone. The tragic passings of high-profile celebrities, while not as widespread as other tragedies, are included as some of those events. The natural response after hearing of someone's death is sadness, but how does that sadness differ if the late public figure is also your hero?

According to the Oxford Dictionary, a hero is defined as “a person who is admired or idealized for courage, outstanding achievements, or noble qualities.”¹ Heroes can be those we know personally (e.g., a parent or family member), or they can be distant, discovered through their prominence on a stage or screen. A fan, though having never met their hero in person, may interact with their hero in many ways, such as through television, movies, books, articles, interviews, and social media. Over time, these interactions can accumulate, resulting in a perceived proximity where we feel we know them and become invested in their actions and wellbeing. Researchers have called this “parasocial interaction” and have studied it mostly in the context of stars in the entertainment and sports industries, however, it can also apply to anyone with an online presence. Even though these interactions are often one-sided, they can feel as real and meaningful as in-person relationships.

Many people hold celebrities in high esteem; some even rely on their voices to speak on matters and issues that affect them most such as social

injustice and political events. In a year where nothing went as planned, many of us looked to public figures to bring levity and entertainment; for example, tuning into their livestreams at record numbers. What happens when the object of these interactions passes away? If they are well-known, the internet will likely be flooded with heartfelt tributes from the time of announcement until days or weeks after, making the news hard to escape. While this would anyone person sympathetic and even sad, it might have a greater effect on those that have developed a personal affinity for this figure: the loss and grief may feel personal because of their parasocial interactions over time. Since 2020, in general, was filled with tragedies, the unexpected loss of a hero may be even more difficult to overcome.

While there are many ways to grieve, sadness is common, which can affect

us personally. Even without personally knowing your hero, they could have been extremely influential to you through their words and actions. It may be difficult to accept that there will be no more new projects, games, videos, interviews, or any other media to consume. In her 1969 book, *On Death and Dying*, Elizabeth Kübler-Ross highlights that grief and loss occurs in five stages: denial & isolation, anger, bargaining, depression, and acceptance.² Other feelings that may be accompanied with grief include hopelessness, anxiety, and lethargy. (Please note: These are merely guidelines and that each person experiences grief differently)

The time of year may also affect how grief is experienced. If the loss takes place during the winter months, which have shorter days and frigid weather, feelings of grief may be exacerbated by seasonal affective disorder



(SAD). Symptoms of SAD include low energy, oversleeping, appetite changes and feelings of hopelessness, worthlessness, and guilt.³ In more serious cases, frequent thoughts of death and suicide can be experienced as a SAD symptom, which are also common when processing a death. Some strategies for coping with SAD and grief include going outside despite the cold weather, natural light, journaling, talking to someone you trust, and seeking professional help.⁴

A celebrity death that was particularly difficult for me to process was Chadwick Boseman, otherwise known as “The Black Panther.” The movie had a profound effect on me as it did for countless others, particularly because of the layers of representation it provided. As a child of African immigrants, it gave me a sense of pride to see Africa displayed with grandeur and excellence. Admittedly, this could be credited to the film’s writers and directors, but Chadwick’s character was the nucleus on which the film rested. Not only was his performance in Black Panther stellar, but we also discovered that he delivered it, as well as several other movies, while battling colon cancer. Beyond his talent and his strength, I regarded Chadwick as a good-natured, humble, and hardworking person, a description many tributes have since confirmed. His impact on the film industry, while short lived, will not be forgotten.

Our society finds it easy to put celebrities on a pedestal. We often assume that their on-screen talent deems them worthy of unfettered attention and praise, which can sometimes be to our own detriment. While celebrity culture can be toxic, I would say there can be a lot of good in seeing someone thrive publicly in their profession. Their story can be a



source of motivation and inspiration, particularly to those who lack any real-life role models. Moreover, they may draw our attention to issues and causes that we may have otherwise overlooked.

Losing someone special, regardless of the degree of interaction, is never easy. Although rarely discussed, celebrity deaths can have a real, lasting impact on our emotional state. Through the myriad of emotions that one experiences in the grieving process, I like to remember these words: “Death gives life meaning.” Chances are, if you consider them a hero, theirs was a life well lived, and you can still be inspired by the legacy they have left behind.

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UNIVERSITY OF TORONTO COVID-19 RESPONSE

A Q & A WITH THE MD
STUDENT FOUNDERS OF
THE COVID-19 WOMEN'S
INITIATIVE

ANGLIN DENT

As this issue is released, the COVID-19 pandemic continues to create a global public health disaster. This has resulted in many pre-existing inequities beyond just the health sector being amplified. Encouragingly, the University of Toronto has had many COVID-19-related community initiatives emerge in response to these challenges. We caught up with COVID-19 Women's Initiative (CWI) co-founders, Karlee Searle and Aman Dhaliwal, to discuss the CWI mission, the initiative's accomplishments, and their insights on how to establish a student-lead initiative.

What is the COVID-19 Women's Initiative (CWI)? Who makes up your team?

CWI is a non-profit, student-led organization comprised of students, physicians, and community members in Canada. CWI was founded by medical students at the University of Toronto but has progressed to other Canadian cities. Currently, we have approximately 250 volunteers located in the Greater Toronto Area (GTA), London, Ottawa, Hamilton, Vancouver, and Calgary. The initiatives



COVID-19 Women's Initiative co-founders Karlee Searle and Aman Dhaliwal

in each of these cities are spearheaded by Kush Joshi (London), Katherine Gray (Vancouver), Christina Blagojevic (Toronto), Ashnar Parbhakar (Ottawa), Alice Tan and Claire Fine (Hamilton), and Serena Tejpar and Imaan Kherani (Calgary). They are overseen by CWI co-founders Aman Dhaliwal and Karlee Searle.

What led you to start the CWI? What gaps do you hope to address?

CWI was started to help combat gender inequity throughout the COVID-19 pandemic. The two of us initially started hearing about the increase in the incidence of domestic violence as the COVID-19 pandemic progressed; not only here in Canada, but globally. We also learned that women's shelters were becoming overwhelmed as well as underfunded. There was also a concern that women who needed help were being turned away and potentially bound to the same home as their abuser. Additionally, it became clear that the pandemic had led to more barriers to accessing sexual and reproductive health services. As medical students, we knew that we could not be involved on the front lines

but felt a strong desire to help out in our community to address the gender disparities being exacerbated by the pandemic. We recognize that the effects of the COVID-19 pandemic will have long-standing negative consequences for women unless individuals make an effort to intervene early. CWI was started to advocate for gender equity, and to mitigate some of these consequences for women.

What would you say are some of the accomplishments of CWI that have had the biggest impact?

In particular, we think that our item donation drives and fundraising initiatives have had the biggest impact on women in our communities. CWI's item drives led to the collection of over 2,200 items for women's shelters in Canada including feminine hygiene products, personal protective equipment, diapers, baby items, and non-perishable food items. Our fundraising initiatives also raised over \$30,000, which has been distributed among women's shelters as well. These accomplishments would not have been possible without the tremendous help of our team of CWI volunteers, our

community partners, and our partner organizations.

Do you have any general advice for students looking to start an initiative?

From our experience, starting an initiative requires the identification of a specific unmet need in the community, and the means by which your organization can help address that need. It is important to think about tangible ways that this goal can be reached, and to establish your mandate as an organization early on. Once you have this outlined, you can reach out to individuals you know to gauge interest in supporting your cause. If there is enough interest, you can assemble a team where each member has a specific role and begin working towards achieving your organization's goals. We also found that establishing collaborative relationships with other individuals and organizations was important for us. They helped guide us on where to focus our time and efforts to have the most significant impact.

With what appears to be the much dreaded "second wave" among us, do you have any new plans in mind for the initiative?

CWI has been a volunteer driven organization, and with many of our volunteers returning for the school year, we have actually been in the process of finalizing projects for the last couple months. CWI will be officially finishing at the end of 2020! We are privileged to have the opportunity to work with amazing partner organizations that have continued working on projects that matter to us, including CoverContraceptiON in Ontario and the Community Womxn's Initiative in British Columbia.

Are there other COVID/Women's Health related initiatives at the moment that you plan on collaborating with?

CWI has collaborated with various other women's health and COVID-19 initiatives. Currently, we are collaborating with the

CoverContraceptiON campaign. The focus of this campaign is to urge the Ontario government to implement no-cost contraception, in order to eliminate financial barriers to accessing contraception. We are helping them spread the word about the campaign to collect signatures for the open letter. Their campaign can be accessed on Twitter at [@ContraceptiON](https://twitter.com/ContraceptiON). Over the course of the pandemic, we have also collaborated with wonderful organizations which share a similar vision to ours. Some of these organizations include the Federation of Medical Women of Canada, the University of Toronto OB/GYN Resident Advocacy Team, the Centre for Addiction and Mental Health Women's Inpatient Unit, and Conquer COVID-19, among others. We find it empowering to work with other individuals who share our vision to advocate for the women in our community who need it most.

Edited by Maverick Smith & Curtis D'Hollander





TECHNOLOGY TO IMPROVE WELLNESS AND PRODUCTIVITY DURING THE PANDEMIC

ASHLYN JAMES

Technology has been an important component of 2020. People have relocated to remote work in the comfort of their home which has compelled us to select technology to improve our wellness and productivity. This list will provide you some technology ideas to help you improve your wellness and productivity as a student.

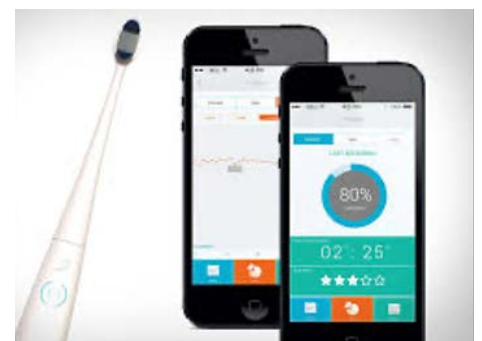
1. EQUA water bottle



This Bluetooth water bottle glows every time you need a sip of water, keeping you on track with your optimal daily water intake. With the EQUA app, you can make individual plans, track your water intake, and look back at your past trends. This will help you with energy, hydration, and glowing skin. You can either tap the water bottle to see how you are progressing throughout the day or look at the app!

2. Kolibree Smart Toothbrush

This vibrating toothbrush uses artificial intelligence and 3D sensors to map out the areas of your mouth you are not brushing. It provides a visual map of clean and dirty mouth



surfaces right to your cellphone app. In addition, it will track the duration and frequency of your brushes.

3. Dreamegg White Noise Machine

This is a must for a good night's sleep; drowning out roommates in a noisy home, and ensuring privacy while taking a work call. Dreamegg white



noise machine has seven types of white noise options. This includes fan sounds, and relaxing natural sounds such as birds, sea waves, lullabies, music boxes, crickets, campfires, rain, and trains.

4. Apple Watch

From practicing mindfulness to reaching your fitness goals, these watches will improve your wellness. They track your daily active calories, passive calories, how much you exercise, and how long you stand. While sitting at your desk, it will give you reminders to stand up or breathe deeply for a minute. This watch will complete the basics such as tracking your steps or tracking your workouts, and also allows you to explore your history and identify improvement.



It will monitor your heart rate and is completely waterproof as an added benefit. If you need a little boost of productivity to get you going, there is an option to compete with your friend. A must to get you back on track!

5. A Power Bank

A power bank was a necessity even before the pandemic. Power banks can come packed with hours of charge,



USB ports, micro USB ports, travel pouches, and a welcome guide. Have you ever visited a coffee shop just to find there is no seat near an outlet? Avoid this situation with a power bank! You will thank us when you are in a situation that demands it.

6. Laptop Stand

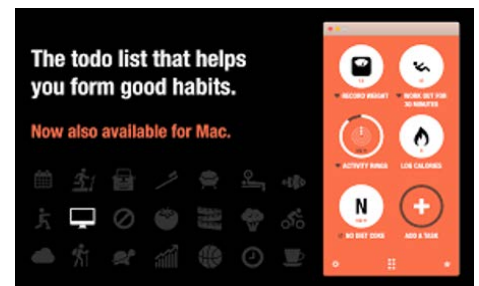
Investing in a laptop stand during the pandemic is a smart investment for your back, neck, and shoulders. Laptop stands will place your laptop at eye level to avoid the inevitable hunching that comes with being at a desk all day. If your laptop is privy to overheating, then this will help prevent this inconvenience.



Bonus App recommendations

Headspace is a great app for mindfulness and meditation which I am sure most of you have heard of. There is **My Fitness Pal** to track your food intake, water, and calories consumed, or **All Trails** to discover some great biking and running trails in your neighborhood; Your quarantine body will thank you! Lastly, an app that will help you begin positive habits and put an end to persistent negative habits.

7. 'Streaks' app



In 2020, did you set your sights on a goal and then the pandemic hit which put your goals on the backburner? The Streaks app is here to help you break a bad



habit or make a new habit such as working out, walking your dog, or working on a passion project for 30 minutes a day. Could this app get any better? Yes! This app will send you automatic reminders to complete a task and track your progress.

Hopefully you will be able to incorporate some of these ideas into your life as we continue to navigate the pandemic.

Edited by Reebea Khan & Curtis D'Hollander



social distancing, gym and fitness club closures, and current work-from-home protocols for many businesses. Spending time in nature may be a beneficial way to incorporate physical activity while maintaining social distancing. Evidence suggests that nature experiences can help reduce anxiety and stress.³ Additionally, it has been linked to improved health outcomes following surgery in patients with cancer and cardiovascular diseases.³ Researchers have also found that nature exposures can enhance social connections and decrease feelings of loneliness.³ Incorporate easy routines such as daily walks in the park, hikes on the weekends, or a bike ride around the block to enjoy nature. In the post-pandemic era, incorporate these by walking to the gym instead of driving, and using outdoor paths to get to work!

GOOD HABITS TO MAINTAIN DURING THE PANDEMIC AND BEYOND

AMY CHAN

The COVID-19 pandemic has prompted many of us to reflect on our lifestyles, and adjust to the safety regulations and restrictions in place. This article will discuss the habits that many of us should consider implementing, if not already done so, and how we can translate them into our routines in the post-pandemic era.

Cook More at Home

A recent food study survey by the Hunter PR firm found that over 50% of respondents have cooked more since the pandemic started.¹ Additionally, 51% of respondents indicated that they will continue to do so beyond the pandemic restrictions.¹ Eating home cooked meals is associated with greater fruit and vegetable intake, and

greater vitamin C levels.² We are able to adjust our ingredients according to our dietary needs, and control what we put in our bodies! On top of that, cooking and having at-home meals have become the new normal, and reinforced the importance of spending time with our immediate family and partners. In the post-pandemic era, try to find a balance between eating out and eating in. Schedule days to cook with your loved ones and enjoy a meal in the comfort of your own home.

Physical Activities Centered Around Nature

Physical activity is important for mental health, physical health, and sleep! It is now particularly difficult to fit in physical activities due to

Cleanliness and Decluttering

Practicing hygiene has been a focal topic since the COVID-19 outbreak. It's important to ensure that we continue to clean our spaces regularly, and maintain personal hygiene routines! This may include washing our hands when coming home, taking daily showers, and wiping down frequently used items and spaces. Additionally, many of us have started to use this extra time to tidy our space. Decluttering has the added benefit of improving our mental health. Evidence suggests that increased clutter—whether physical or digital—is associated with increased cortisol levels.⁴ Decluttering our homes is shown to alleviate this stress, increase feelings of self-efficacy and improve sleep.⁴ During this pandemic, and after, find time—whether it be 20 minutes or an hour—to tidy up your space and continue to practice good personal hygiene.

Modest Spending

Statistics from RBC Economics and RBC Data and Analytics have shown a significant decrease in overall spending since the lockdown measures in March 2020.⁵ The most significantly affected areas included apparel, gifts and jewelry, travel, parking and transit, and dining.⁵ Stay-at-home measures have allowed us to reflect on our needs and wants, and prompted for less spending on dining, apparel, gifts and jewelry. Incorporate this reflection into your post-pandemic routine—maybe the additional savings can be put towards a greater need or want in the future!

Do-it-yourself (DIY) Projects

Applications like Pinterest have reportedly seen record level user activity since the COVID-19 lockdowns, with over 367 million monthly users.⁶ With the new-found extra time, many individuals are exploring new hobbies and crafts—some of whom have even used it to start new projects and businesses. During this pandemic and beyond, look towards discovering your personal interests or starting a

new DIY project, and how you can turn it into a tool for innovation or connecting with others.

Practice Self-care

Self-care is especially important during this pandemic. Practice self-care by taking a nice bath during the chilly season, swap your morning coffee for tea, take a break from social media and the news, and enjoying a nice dessert once in a while.

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JOURNAL PROMPTS TO COMBAT ANXIETY ABOUT THE FUTURE

MOBOLU COKER

2020 was a stressful and difficult year for many of us. It is natural to feel a loss of control in the present and worry about how that will translate into the future. Journaling is a great way to manage stress and anxiety because writing out our worst fears on paper tends to make them look less scary. Below are some prompts to help you get started.

Writing them down:

1. What are the things I am worried/ concerned/ afraid will happen? What do I fear will happen next? How might this affect me or my life?
2. How likely is it that my biggest concerns will happen? How do I know?

Rethinking them:

3. How can I think about my fears differently?
4. How could the worst thing that happens to me become the best thing that happens to me?
5. What would need to be true for my fears happening to become a neutral or even positive experience for me?

Considering the past:

6. When was the last time I overcame a difficult challenge? What did I learn about myself? How can I apply what I learnt to this potential scenario?
7. When was the last time I felt a loss of control? How did I cope? What was the result?

Preparing for them:

8. Let's say my biggest fear happened. What would I do?
9. How can I better prepare myself to handle that situation if it does happen?

Self-reflection:

10. How are my anxieties about the future affecting my present life?
11. In what small ways am I demonstrating strength and resilience in the present?
12. Who would I be without this anxiety?

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