"Home alone"... a psychological approach.

According to the World Health Organisation, a pandemic is a new disease which spreads around the world and which most people do not have immunity to. The coronavirus disease (COVID-19) is considered as such.

One of the steps to prevent and deal with the spread of the disease is home isolation. What the government has asked us is to stay home, avoid all sorts of gatherings and in case of mild flu symptoms – as long as the patient does not belong to a high-risk group –isolate oneself at home. However, quite often the media mentions the word "quarantine", which –so far- hasn't been implemented as a measure in our country. A quarantine is a non-pharmaceutical intervention in order to limit the spread of a disease through obligatory by the state home confinement (Smith, Waterer, Cheng, Middleton, & Thompson, 2019).

While everybody's interest focuses on the disease and its spread, one important fact that should not be underestimated is the state of isolation everyone finds themselves in.

Most surveys show that in case of a pandemic, the self-isolation either forced, in the form of quarantine, or voluntary is on the one hand a necessary measure to reduce the spread of the disease, but on the other hand affects negatively the mental state of the people. That is to say, people may experience post-traumatic stress, confusion and anger. The duration of the self-isolation, the fear of contamination, the frustration, the boredom, the lack of supplies, the lack of information, the financial losses and the fear of stigmatization are factors which may further burden people's mental state (Brooks, et al., 2020). When the measures of self-isolation or/and quarantine end, people find it hard to return to their old routine (Cava, Fay, Beanlands, McCay, &Wignall, 2005), which is made even harder by the financial hardship that has been broughtabout due to the self-isolation and the stigma on the citizens and the employees of the health system.

The scientific staff of the organization "The Smile of the Child" suggests these three steps in order to prevent the difficulties that will appear when the isolation measures cease to exist:

1. Get informed responsibly about the virus and the disease (Brooks, et al., 2020)

The measures will end, but the feelings they brought will remain. One main feeling is fear; fear to get sick or fear to contaminate your family and your loved ones. Visit the websites of the authorities in charge to learn more about the disease. Some are:

- The Ministry of Health (https://www.moh.gov.gr)
- National Public Health Organisation (https://eody.gov.gr)
- World Health Organisation (http://www.who.int)

The Health Department of the Organisation "The Smile of the Child" staffed with general doctors, pediatricians and nurses will make sure you are responsibly informed.

2. Avoid getting bored at home (Brooks, et al., 2020)

Our daily lives have changed and as a result each family's routine. Given the new circumstances, try creating a new family routine which will involve personal hygiene, reading, walking, cycling, board games, computer games, films-series and discussion.

Discussion and communication are key factors to avoid boredom in conditions of self-isolation. Exploit the benefits of technology. Social media websites and applications are at your disposal so as to keep in touch with your family and friends. In addition, they offer a unique chance to show your children the right way to use technology.

At the same time, you could do new activities with your family. You can find useful ideas here

3. Develop the sense of altruism (Brooks, et al., 2020)

All in all, the feeling that one's behaviour can affect another person positively helps a lot when dealing with hardship. "What I do will help grandma and grandpa, as well as all my loved ones" is a thought that will enable children to act accordingly and will boost their self-esteem.

For further information or clarifications, you can call the "National Helpline for Children SOS 1056", which is reinforced with specialized scientific staff (social workers and psychologists), in order to come up effectively to the queries of children and adults, offering psychosocial support on issues that may arise and the daily changing facts.

The helpline functions 24/7 and is free of charge for both landline and mobile phones.

References

Brooks, S. K., Webster, R., Smith, L. E., Woodland, L., Wessely, S., Greenberg, N., & Rubin, G. (2020, March 14). The psychological impact of quarantine and how to reduce it: review of the evidence. The Lancet. 912-920. rapid 395(10227). Cava, M. A., Fay, K. E., Beanlands, H., McCay, E., & Wignall, R. (2005). The experience of quarantine for individuals affected by SARS in Toronto. Public Health Nurs(22), 398-406. Smith, S. M., Waterer, G., Cheng, A., Middleton, P., & Thompson, P. (2019). Home Quarantine experience. European Respiratory Journal(54). World Health Organization. (2010, February 24). What is a pandemic? World Health Organization:

https://www.who.int/csr/disease/swineflu/frequently_asked_questions/pandemic/en/