



# Quarantine: Let's Not Let It Be a State of Mind — SELF-CARE BLOG POST

By [nicespeechlady.com](https://nicespeechlady.com) / August 16, 2020

“The COVID-19 Effect” is upon us, where we see people being directly affected by the virus directly through manifestation, and also — we have seen how every physical, social, relationship or other problem/obstacle/challenge/struggle exponentially grows in intensity because of lack of access to resources.

We are all impacted by COVID, even if we never contract the virus.

People with new diagnoses are having to wait longer for their first specialist appointment, folks who struggled financially before COVID now are facing a new set of challenges as access to job opportunities shift because of COVID, students are having trouble getting enrolled into college for the first time because some universities do not have enough phone lines open, people who are homebound and rely on food box deliveries for retrieval now face access issues because programs are dwindling, etc. — the list goes on and on.

We are in survival mode.

And what do we do when we are in survival mode? We focus on the basics. Food. Water. Shelter. Getting basic necessities met.

As speech pathologists, we are seeing this with our patients. Some patients are focusing their time and attention more on surviving, so we need to understand that. It is important for us to adjust and consider that framework as we consider home programs and recommendations. We need to consider that patients and families are in “basic-needs” mode and that what we ask of them, more than ever, needs to be directly tied to function and linked to positive outcomes in improving independence.

The first and second bottom levels of “Maslow’s Hierarchy of Needs” that are for physiological needs (air, water, food, shelter, sleep, clothing), and safety needs (personal security, employment, resources, health, property) are the primary needs that first must be tended to.

These have to be addressed before the upward needs of love and belonging (friendship, intimacy, family, sense of connection), esteem (respect, self-esteem, status, recognition, strength, freedom), and self-actualization (desire to be the most that one can be).

I would purport to say that the two bottom rungs are “quarantine needs” because in this time of the pandemic, we are all operating, for the most part, in addressing primary needs. In times of crisis, we have to go there to survive.

We, as well our patients and people in the community, have to think about the necessities — grocery bills, paying the rent/mortgage, etc. We need to be in survival mode to survive, and our patients are there.

And, we don’t have to stay there.



As providers, and as people in relationships with our own family members and loved ones, it is important that we recognize that many of us are in “quarantine,” emotionally, from the pandemic, and we need to do what we can to recruit meeting the needs of the higher rungs. Sometimes, this “focus of the physiological” state of mind can lead us to tending to neglect connecting with others, not checking-in on emotional needs, not validating when there are relationship necessities for overall health of the individual. Sometimes, we cannot have awareness that we are doing this, and relationships suffer, and we lose out on the opportunity to foster others to move up in meeting their own needs. We have an opportunity to set the stage for encouraging others along the way when they are stuck in quarantine mode themselves.

Keeping this in mind, these are some options on suggestions that might be helpful, as we approach our patients, our loved ones and our own needs, from bottom to to the top of “Maslow’s Hierarchy of Needs”:

- Check-in, with the quarantine rungs, and see what needs are not being met and address them as best as possible. Ask for help from others if needed.
- Let others know that you are proud of how they have handled the COVID-19 pandemic and that they are doing all they can in the midst of it, and that you are there for them if they ever need to talk about needs they have, in order to problem-solve.
- Assess if time for connecting with friends or family is being set aside, and if not, ask how that can be facilitated, if the person is open to talking about it.
- Validate when others take time for social needs to be met. Encourage more opportunities for activities that encourage a sense of belonging with a support system.
- Ask if social groups that were a part of a person’s life before COVID are currently being accessed, and if not — problem-solve ways to make possible a level of connection, even if just remotely.
- Check-in on an individual’s primary relationships, their “person” — how is the relationship developing in the midst of the pandemic. Offer a listening ear if there are struggles or conflict.
- Facilitate opportunities for there to be time in order to connect with others. Provide resources, ideas, suggestions, if there is an openness.
- Be intentional in our own lives in our own relationships, be it our significant other, our children or friends — and set time aside to foster relationships in this time of emotional quarantine and see how everyone is holding up and how you can meet their needs.
- Validate others whenever possible in who they are and in any steps they take to meet their needs. Encourage the pursuit of finding meaning in life, and in developing a positive relationship with self.
- Ask if you can obtain permission to ask a personal question: “how do you feel about yourself, in this time of covid?” If there is receptiveness to explore challenges that have arisen, provide a listening ear.
- Ask if it is all right to ask if a person is satisfied with their current status in life, and if not, would they like to talk about it, and find possible solutions or avenues of where to go from here to improve their feelings.
- Praise people for what they are doing to further their current status, no matter how little the step. Encouragement of any step toward progress for self-improvement is helpful.
- Recruit others into the person’s life that can be validating.
- Ask if it feels like they have choices in their current life, and if not, would they like assistance in finding ways to facilitate that. Bring resources that open doors.
- Ask others if they feel they are making strides toward their life goals, and how you can help.
- Validate attempts at individuals finding their purpose, even when they are not fruitful right now; encourage the person that what they are doing to self-improve is seen and it matters.



Yes, we have been in quarantine-mode, we have been there out of necessity.

We can be operating in quarantine modes in our interactions with others, and we can be operating in quarantine modes in our own lives.

And, we don't have to stay there as providers, family members, friends or loved ones. We can recognize that we have needs beyond the bottom two quarantine rungs and we can evolve past that, and as individuals ourselves. And we can recognize that in our relationships, and try to encourage leaning into further hierarchical steps with those whom we interact.

Quarantine needs are physical.

And, we can choose to not let it be our forever state of mind.



[Wilson Nice, M.A., CCC-SLP](#), is the owner of [nicespeechlady.com](#). Nice created a platform for medical SLPs to have free access to practical clinical resources on [Nice Speech Lady](#); she also enjoys relaying news on medical SLP issues. She works full-time in home health.



*Nice Speech Lady*



- **Live courses throughout 2021**
- **New hands-on, online course available this Fall**
- **2-hr online course available NOW!**

WALT FRITZ, PT  
**FOUNDATIONS**  
IN MANUAL THERAPY:

Voice and Swallowing  
Disorders

*10% off live courses with code NiceSpeechLady*

**WaltFritz.com**