

PHI: *Are there polio-related issues during the shelter-in-place orders? What can you say about polio in the time of COVID-19?*

Response from Rhoda Olkin, PhD:

Staying at home? What could be easier? Then I had to take out the garbage (three cans—landfill, recycling, organic materials), and empty the dishwasher, and do the laundry—today, tomorrow, and the next day and the day after that. Without my usual assistance, or even the ability to ask someone to come over to help. I found myself on my own, trying to figure out how to get groceries, cook, maintain the household, and keep sanity.

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After a week at home I divided chores into two categories: things I hate to do, and things that hurt to do. Almost everything in the kitchen is in the first category, and I do those. But laundry, garbage, changing sheets, vacuuming, these I try not to do unless absolutely necessary.

There are trade-offs: would I rather wake up on dirty sheets with cat hair in my mouth, or bend to put sheets into and out of the dryer and then be in pain? Is yoghurt and blueberries a well-rounded dinner? If I eat vegetables one day does that count towards the next day? Is that spill on the carpet going to be any easier to get out if I sit down and do it now, or can it wait?

I have anxieties specific to being a disabled person. The first is whether, as a polio survivor who spent a brief period in an iron lung as an infant, I was more vulnerable to complications from COVID-19. According to my doctor the answer was maybe, because polio is both a physical and a neurological disorder, but not a lot more at risk, not like asthma or diabetes or heart conditions.

Second, if I showed up at an emergency room with breathing problems and they were rationing ventilators would they decide my life was less worthwhile than that of someone without a disability? (Is this just me? Have you had that thought?)

These are anxious times. Some elements may re-trigger us to previous traumas. But I know this. I will get through this, you will get through this, and we are survivors.

Response from Stephanie T. Machell, PsyD:

In the realm of memory, like calls to like. Because we remember by making connections and associations between similar events, the current COVID-19 pandemic may stimulate memories of your polio experiences. Along with the new fears we are all experiencing to some degree and fears specifically related to your own current risk status for developing severe disease, old fears may be revived.

Living through a global pandemic is a potentially traumatic experience. The



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stresses involved can cause high levels of anxiety, intrusive thoughts or memories, irritability, difficulty concentrating, vivid or unusual dreams, disturbed sleep, or feelings of unreality or disconnection from themselves or others. For most people, these symptoms will be transient and manageable.

But for those who have or have had Post-Traumatic Stress Disorder (PTSD), including for those whose PTSD is related to their polio experiences, this is a challenging time. Symptoms may return or worsen. New memories may surface, or old ones may take on a new life. Fears from the past of being in an iron lung may layer on current fears of being put on a ventilator—or being deprived of one due to disability.

If any of this is happening to you, know that regardless of social distancing you're not alone. Don't suffer in silence. Silence reinforces trauma. For mild transient symptoms, talking to supportive friends and family via phone or your preferred videochat platform may be enough.

Research has shown that journaling about stressful experiences helps. Practicing good self-care, creating and following routines, and limiting exposure to news and social media are all helpful.

The above are helpful for those with more severe symptoms as well. But if your symptoms feel overwhelming or unmanageable, you may need more. If you're not currently in therapy, you may want to return to treatment or seek out a trauma-trained therapist. Most insurers, including Medicare, have relaxed rules about telehealth. It might feel awkward to start therapy this way, but the extra support will help.

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As I noted, many polio survivors are remembering their experiences. For example, for one of my clients social distancing triggered memories of the loneliness of recovering from polio and later surgeries. While this is easily recognizable as memory, often memories of early life experiences can arise as emotions, sensations or images detached from context. This can also happen when a memory is especially intense or threatening.

Practicing good self-care, creating and following routines, and limiting exposure to news and social media are all helpful.

As uncomfortable as it can be, remembering can be healing. Keeping a memory out of awareness drains psychological energy, something no polio survivor can afford. If what you are remembering feels too overwhelming and painful to cope with on your own, remember that help is available. And there is nothing weak about asking for it, especially right now.

Be kind to yourselves and stay safe. ■

