

COVID-19-related stress responses: Have levels of COVID-19-related stress and anxiety decreased since the onset of the pandemic?





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Background

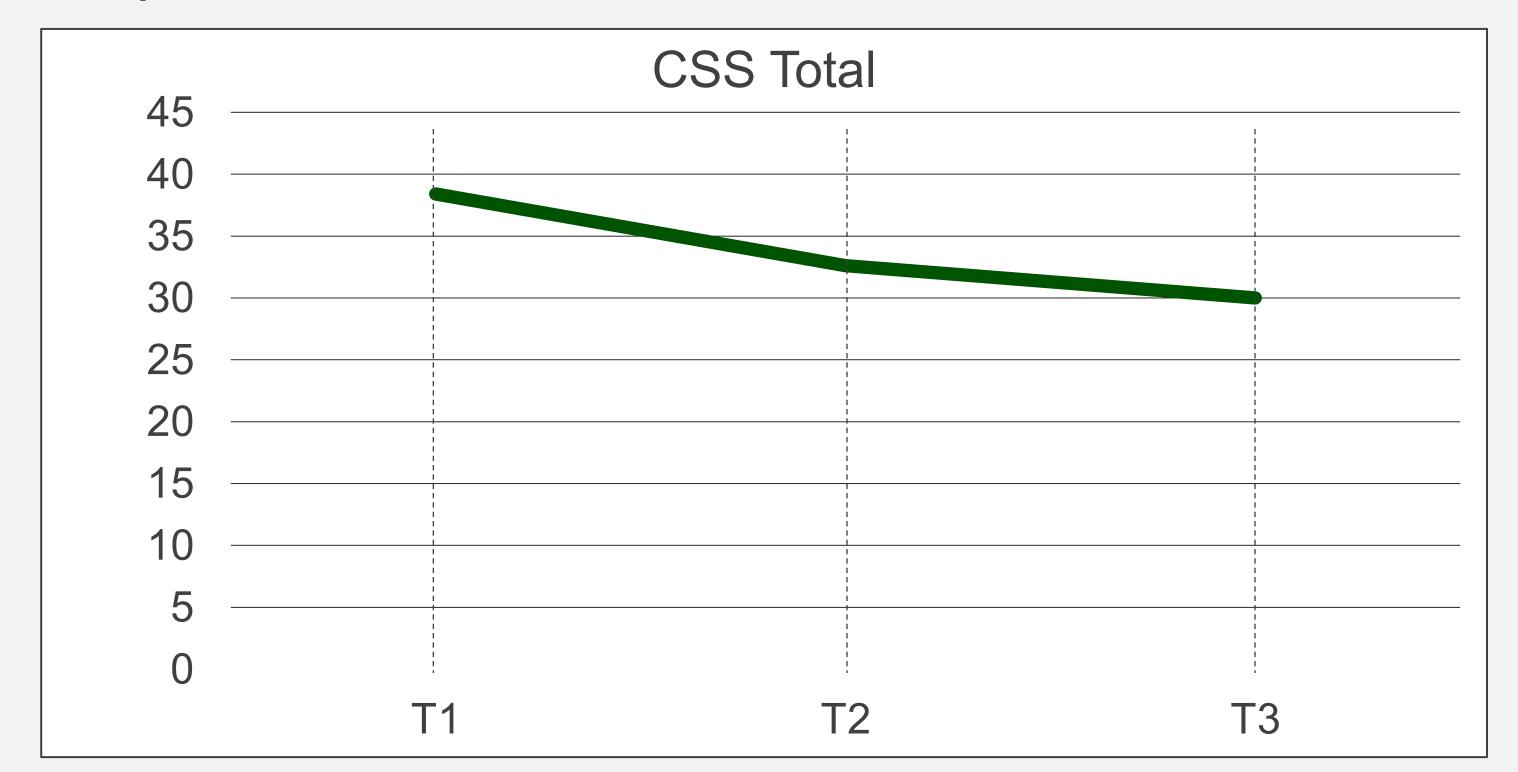
- Researchers have identified the 'COVID Stress Syndrome', comprised of 5 domains:¹
 - Fears about the dangerousness of COVID-19 and of contamination (**DAN**)
 - Worries about socioeconomic impacts of COVID-19 (SEC)
 - Xenophobic concerns (XEN)
 - Traumatic stress symptoms (TSS)
 - Compulsive checking/reassurance seeking symptoms (CHE)
- Recent research suggests that pandemics are dynamic in nature, and that there may be fluctuating levels of COVID-19 related stress^{2, 3}
- The purpose of the current analysis was to determine whether COVID-19-related stress levels have changed over the course of the pandemic

Methods

- Participants (*n*=2,076) completed a longitudinal online survey at three time points during the pandemic between March and August of 2020 (T1=Mar-Apr; T2=May; T3=Jul-Aug)
 - North American Adults (50.1% Canada; 49.9% United States)
 - Mean age = **53.8** years (SD = 14.1)
 - **59.6%** Male
- Participants self-reported levels of COVID-19 related stress, as measured by the COVID Stress Scales (CSS), including DAN, SEC, XEN, TSS, CHE¹
- One-way ANOVAs and post-hoc pairwise comparisons were conducted to compare CSS responses across three time points, using p < .0027 to determine statistical significance

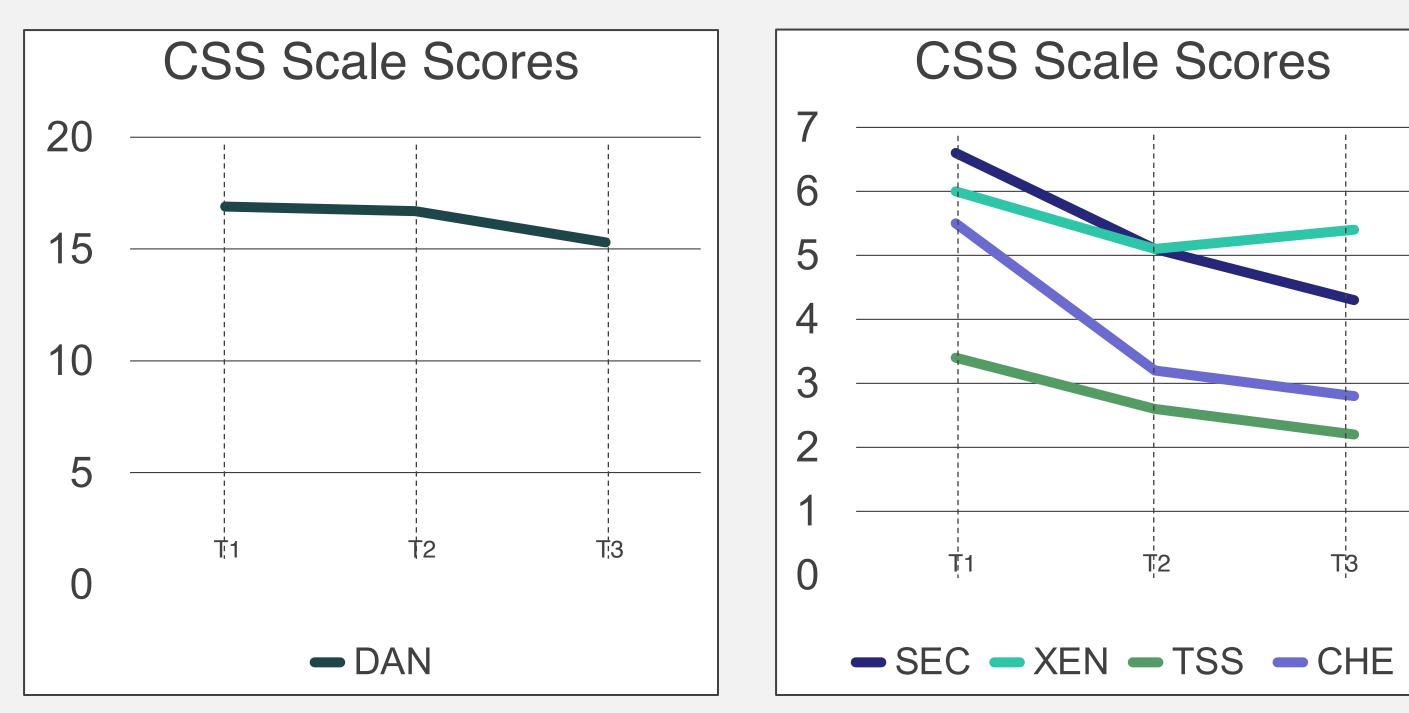
Results

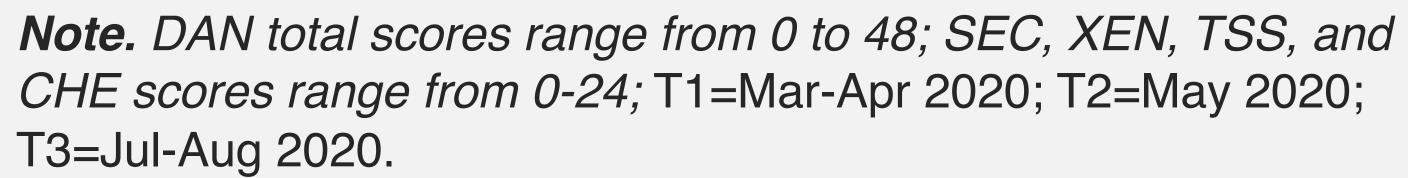
Graph 1. CSS Total Scores



Note. COVID Stress Scales (CSS) total scores range from 0 to 144; T1=Mar-Apr 2020; T2=May 2020; T3=Jul-Aug 2020

Graphs 2 & 3. CSS Scale Scores





Mean	CSS-Total	CSS-DAN	CSS-SEC	CSS-XEN	CSS-TSS	CSS-CHE
T1	38.4	16.9	6.6	6.0	3.4	5.5
T2	32.6	16.7	5.1	5.1	2.6	3.2
T3	30.0	15.3	4.3	5.4	2.2	2.8

Results

- *CSS Total* scores decreased from T1 to T2 and T3 (ps<.001); d=0.27
- CSS subscale scores on **SEC and CHE** decreased from T1 to T2 and T3, as well as T2 to T3 (*ps*<.001, *d*=.0.32; and *ps*<.002, *d*=0.54, respectively).
- Scores on *DAN* decreased from T1 to T3 (*p*< 001), and T2 to T3 (*p*=.001; *d*=0.13)
- XEN scores decreased from T1 to T2 (p<.001; d=0.11)
- **TSS** scores decreased from T1 to T2 (p < .001), and T1 to T3 (p < .001; d = 0.22)
- Effect size estimates were <u>small to medium</u>, 0.11 to 0.54

Discussion

- On average, CSS total and scale scores, except XEN, decreased from March to August of 2020
- COVID-19 related stress responses may reflect acute psychological response to that gradually decreases over time without intervention; whether this applies to the general population as well as with pre-existing anxiety- or mood-related disorders remains to be determined
- Further research is needed to determine whether COVID-19 related stress fluctuations correspond with levels of perceived threat at a given time

References

- 1. Taylor, S., Landry, C. A., Paluszek, M. M., Fergus, T. A., McKay, D., & Asmundson, G. J. G. (2020). COVID stress syndrome: Concept, structure, and correlates. *Depression and Anxiety*, *37*(8), 706–714.
- 2. Asmundson, G. J. G., & Taylor, S. (2020). Coronaphobia revisited: A state-of-the-art on pandemic-related fear, anxiety, and stress. Journal of Anxiety Disorders, 76, 102326.
- Angus Reid Institute (2020, July 15). COVID-19: Canadian concern over falling ill on the rise again. http://angusreid.org/covid-concern-rising/print

