

Reflective note: COVID-19 Pandemic
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Topic: During this time I reconnected with my psychology therapist via zoom and it has been very helpful even if far away, being from a different culture and having no actual community or network in Norway for support (a lot of my friends moved back to their home countries), this has been very positive for my mental health. I would like to expand on these two experiences in regard to mental health: the role of a community and healthcare through technologies.

Leaving my country wasn't easy. Staying there wasn't either. Maslow's widely accepted theory of the hierarchy of needs states that in order to attain self-actualization and true happiness one must first cover 4 steps that have a hierarchical order. Physiological needs are the most basic ones, water, food, shelter, sleep; followed by safety, personal security, employment, resources, property; love and belonging, friendship, family, sense of connection; and esteem, respect, status, recognition, freedom. But it turns out, all things considered, Maslow's hierarchy of needs and mine don't have the same order.

I graduated from medical school in December 2017, my country's healthcare system had been in crisis for three years. It was hard to learn in that environment. We didn't have the supplies needed to treat our patients as we were learning during lectures and discussions about recent research, but what made it exceptionally hard was watching patients passed away from something that a book easily explained how it could have been avoided or cured. Too many names that, sadly, I don't remember; too many faces that I do not forget.

Growing up in Venezuela was hard, but it made me resilient. I am used to a certain amount of chaos surrounding me, I can deal with stressful situations and I am quick to find solutions to unexpected problems. We have learned how to attain a goal without having the proper tools, we get creative and sort any issue out. If you have a problem, do not despair, there is a "tío" who has a shop that sells that, or a "prima" who knows how to use it, or an "amigo" who will come over and help you out, even if they don't know the answer either. Chances are, the problem would be fixed against all odds. We Venezuelans adapt.

I used to work with children in the slums of my city. It is a very fulfilling job, but demanding and consuming, both time wise and emotionally. After three years I realized I needed new tools to improve and advance in my area in order to generate a greater impact. I wanted to get the best education possible and live in my own flesh how that knowledge was applied and mixed with the inner workings of a society.

I applied and got accepted, but I didn't get the scholarship I needed. I couldn't in any way afford it. Just for the student visa and first year payment I had to have in hand

around 20.000 euros, even before setting a foot in Europe. I was advised to apply for a loan in an Norwegian institution called Lanekassen, but couldn't get much information since I needed some kind of Norwegian ID. Assured that at least the webpage indicated that loans for international students were an option once I got there, I asked my parents and grandparents for economic support to reach the first 20.000 threshold. With my family's help, I left my home and came to study Health Economics, Management and Policy in Europe.

Norway is almost the complete opposite from where I come from. Everything is organized, everything is certain, everything is cleaner. There are no houses half-made of mud without floors, or waterpipes, or shoeless six-year-olds running on the streets unsupervised. Things function correctly, most of the system is there to help you, if you need an official paper you don't have to bribe anyone to get it on time. You can freely change your currency at any bank, without filing any sort of paperwork to enter a lottery for a chance to get a fixed amount of USD per citizen or go to a different and exponentially higher rate in the black market. Food in the supermarket is never scarce; you can buy the number of products you want without any quantity restriction, and rest assured that all types of food will be restocked in a matter of days. People are reserved and respectful of others, strangers are not intrusive or will address you if they don't know you. If you seem troubled when you're sitting in a café, no one will ask you if you're ok. Even friendships are organized in categories that usually don't mix with each other. For instance, there's the football team friends, and the quiz-night friends, but you wouldn't mix both in the same social event; well, except maybe if you are planning a football themed quiz-night, but even then, it would be unusual. Picking up a random conversation with a stranger in the t-bana about their very cute dog is strange, and if you go on and talk about your own dog without being asked, well that is very weird and an instant "international/tourist" label starts to be written on your forehead.

It is safe to say moving here would at least be a cultural shock for any latino. That much I had anticipated. What caught me by surprise was that, once I got my D-number and was able to get more information from the Lanekassen web-page, it stated that only international students with at least 3 years of previous studies in Norway could opt for a student loan. Just like that, my odds of finishing my masters where slashed. I couldn't get a loan in any European bank because I'm not European. I could only get a loan in my national currency, which would amount to a total of 50-100 euros at most, due to hyperinflation and black-market exchange rate.

I wasn't ready to give up on my goal. "I can work, and I will, anywhere that they'll take me" – I told myself repeatedly for several weeks while I looked for a part-time job. As a highly qualified medical doctor with work experience that fluently speaks 4 languages, I started looking for jobs that would profit on this qualities. Soon I found that the immigrant status would be a tougher barrier than expected. I changed my expectations, but I didn't have time to wait for the right opportunity to appear. One extra day without a job, meant I had to expend my almost inexistent savings, which were actually the only money I had left to pay the second year of my master. I ended up being a highly qualified physician that did light house work and babysitting.

I was glad I found that job. The family was nice and I enjoy playing with children. It gave me just enough money to not use my savings if I limited going out to cafes, restaurants or the cinema. It was a good basic job, but I felt I could have been doing so much more. If only I could have found an organization that would have used my skills and experience in a paid 4-6 month internship, disregarding that I don't speak Norwegian. If only there was some sort of web-page where I could find those kinds of positions tailored to qualified international students, my talents would not have been wasted and both the organizations and I would have gained something in the process.

Still, I managed. I made a lot of international friends from my master courses. They weren't too reserved and were looking for a community away from home as well. Feeling safe with some income, making some social sacrifices, and organizing my study-leisure time with friends, the first semester went by fine, and some of the second semester as well.

Suddenly, COVID-19 started to be a topic of conversation, as it was spreading rapidly through Europe. I started to feel uneasy, as if I knew something was going to happen, my sleeping pattern and upper-back/neck pain were the first things affected. My first reflex, having experienced stressful life-altering situations before, was to strengthen my support system. My family and life-long friends were 6 time zones away from me and were preoccupied with all the extra complications that comprise living in Venezuela. So, feeling the tense ambiance, I resorted to my former psychologist. We have had a good one year therapy relationship before I left my home country, he had help me handle certain aspects of my anxiety and knew me, my culture, and my upbringing well. Those facts would surely allow for an easier deeper rapport, which is a crucial component for good therapy sessions. We discussed via text messages the possibility of having videocall sessions, talked over the pros and cons. The trade-off of not having his physical presence versus having local therapist wasn't a difficult decision. I would rather have on-line therapy with someone that can empathize with my background, than having to go through the process of, with or without waiting time taken into account, finding a therapist that I could feel comfortable with and holistically understood.

Then, in mid-march everything changed. The pandemic status was announced by the World Health Organization. Immediately, on-campus classes were cancelled, European countries started to call back their international students, borders were closed, flights were being cancelled, and uncertainty filled the air.

In a few days I realized that my anxiety was rooted in completely different reasons than those of my international friends. Their stress was related to courses and exams, how the rest of the semester would develop, maybe finding the shortest route to be close to their families. I, on the other hand, was in a different dilemma. I would have loved to go home and wait there until this pandemic was over. It would have saved me food and rent money, but I had to plan to possibly come back to Europe for the third and fourth semester. I would have had to spend around 800-1000 euros for the roundabout, an amount that I didn't have to spare; especially since I was out of work, because my

housework and babysitting wasn't needed anymore, and it was a health-hazard for the family.

Most of my friends were European and could easily and cheaply return to their countries. Their governments were being proactive and collaborative. Instead, Venezuela announced that it was closing down its borders, even to residents, leaving thousands of citizens stranded with nowhere to go.

In a matter of days, several of my international friends left the country or were planning to do so shortly. SiO had issued a statement that would allow students to terminate the lease without the two-month notice stated in the contract, and still get their deposit back, so there was no reason binding them to stay. Of course, the decision wasn't as simple and quick for me. I had to find somewhere to go where (1) a travel ban from Europe hadn't been issued, (2) I could enter without being a citizen or resident, (3) at least one person lived there that could support me, emotionally and/or economically, (4) the travel costs weren't too high if I needed to come back.

The 40 days from the 11th of March until the 21st of April were incredibly hard. I was having very stressful dreams, trouble falling asleep, problems concentrating on courses and mid-term exams. My back and neck hurt, my tongue was glued to the top of my palate, my temporomandibular joint snapped every time I opened my mouth wide, and my jaws and teeth hurt from clenching them all day and night. If it weren't for the weekly support of my psychologist and several group videocalls with other Venezuelan immigrants friends, it would have been unbearable.

The 21st of April the University of Oslo announced it was preparing for online courses during the fall, and a few days later, my master coordinator told me he would be surprised if my mandatory exchange semester in Bologna wouldn't be online as well. This thread of certainty allowed me to make a decision that has proven to be beneficial for my mental health. I decided to move immediately to Mexico with my girlfriend, knowing that if I couldn't save enough money to go back to Europe, I could still continue my courses.

Unfortunately, SiO retracted their pandemic policy, allowing only those who terminated the contract two weeks after the worldwide pandemic was announced. I contacted them to explain my case, told them that I didn't have the privilege to make a fast decision, but, even after I spoke to the student union, they didn't take any empathetic measure for the particular vulnerable situation that I was in. In the end, I was forced to pay for the two months that the room hasn't been used, after I had announced that I moved out and gave back the room keys.

Looking back at all that has happened, there are three topics that I would like to point out and reflect on. The first one, I will only state, but not discuss on. I felt a huge lack of support for international students in a regular scenario, especially low- and middle-income countries whom are a more vulnerable population than European or North American students. The support for this special group of students was completely

absent during the pandemic. This group needs attention, their population is less able to cope with regular uncertainty, let alone life-altering events. For us, there is no room for errors and stakes are very high.

There are two experiences that I have been reflecting on after I was able to switch off my survival mode. How well did social media technologies functioned as a tool for mental health services, and what is the role of a network or community in mental health?

I must admit that, when I reconnected with my therapist, I accepted the virtual sessions out of urgency. I was wary of the effects and thought the rapport would be diminished, and my money might be going to waste. I'm pleased to say, I was pleasantly surprised.

There are few downsides of a virtual session. Physical presence, though not required, is preferred, even if most younger generations, including all of those born after 1980 feel comfortable using phones to maintain contact with each other, and older generations are able to adapt as well. People that suffered an emigration crisis have vast experience in this subject. Family birthday celebrations via videocalls, live recording friend's weddings and graduation events, sharing all sorts of profound feelings over the phone, are all circumstances that any Venezuelans can relate to. It describes many social meetings in the last three or four years of my life. It is exactly that same expertise that allows me to say that there is something about having your interlocutor, in this case a therapist, within arm's reach, even if you're not going to have or expect any physical contact (hugs, pad on the back, or any other form of physical emotional support), the comfort of company can't be fully replaced by a screen interaction. I personally like to read people's body language, to see if they understand me, empathize with what I'm saying, or even if they are paying attention. Having this type of non-verbal communication via phone call, even if it is a videocall, is somewhat problematic.

In addition, some tech issues may interfere with the session. Low battery on either your or your therapist device might cut a session short, unstable internet connection or signal might affect the quality and fluidity of the sessions. Several times it occurred that I had to hang up and call again or repeat myself due to signal interruptions. Depending on my mood, these annoyances would completely frustrate me or not, but either way they are disturbances that would rather be avoided.

Distractions and privacy were one of the biggest disadvantages of all. Being in a completely different space, dedicated and design for therapy sessions, helps keep both, the patient and the therapists, focused on the discussions. Most disturbing outside noises are minimized, usually your cellphone would be on silent mode and/or inside your bag, people you share living spaces with would not be able to interrupt you or your therapist. In regards of privacy issues, the discussion doesn't really revolve around recording material without authorization, which is against any moral or professional ethic that a healthcare worker might have regardless of the country they work in, but rather in the situation were the patient or the therapist are not living alone or conducting the session in a private soundproof room. In my case, it sometimes bothered me to talk

about sensitive issues knowing that my roommate was just on the other side of the walls and it was easy to hear each other talk on the phone. Having a dedicated safe space to conduct a therapy session is ideal.

Lastly, but certainly not least, is the lack of connections and understandings of the local innerworkings of the Norwegian society that my therapist, as well as me, had. Even though it wasn't a great limitation in my case, I can definitely see this factor being an issue in other scenarios and problems. It is definitely a related challenge for international therapist to adapt and synchronize with local health professionals and system, for example, if a referral, medication or emergency treatment are needed.

However, the advantages of online therapy outnumber and outweigh the drawbacks. First of all, online sessions might increase the availability of mental health practitioners. This would have a positive effect decreasing the waiting lists, which have become a huge problem in the delivery of this very important service, specifically in the public system. Mental health has been historically neglected from health policy worldwide, often set in a lower priority than other areas of health. On top of that, patients usually seek for help in this domain when their mental state is critical. At this point one or more months of waiting time could conclude with a very bad outcome. An increase in accessibility to mental health professionals could have a positive influence on a wider range of the population than international students.

The possibility of having a session anywhere that you please, without needing to walk, commute or drive to a specific destination saves transportation and time costs. Again, this point increases the accessibility of the service to more vulnerable groups by decreasing the overall cost of consultation. In the same scope, it might allow for patients to find a therapist that speaks their native language. In all areas of health, but especially in mental health, language is an extraordinary barrier that deters patients to seek help. Even when I am communicating in Spanish, it is hard to find the words to describe my exact feelings and thoughts. Just the thought of having to say everything that I talk about in my sessions in English exhausts me. Having a therapist that has the same native language than you, reduces the chances of getting lost in translation and avoids an extra obstacle for creating a good rapport. Extrapolating to other groups, it would allow immigrants and refugees to have mental health attention at their disposal, two vulnerable groups that are in need of emotional and mental support to digest their probably traumatic past and adapt to their new different reality.

The biggest advantage for me was having my sessions with a psychologist that shared my own culture and background. He knew where I was coming from, how and why I had been raised the way I was, how that weigh on my shoulders and decisions. He understood my economic distress and my broken heart because of Venezuela's crisis and being apart from my family and friends. He had experienced the same crisis, something that alone would require at least two hours to explain thoroughly, and could empathize easily. Most importantly, I would feel that he could empathize with me. This ultimately was the decisive factor that made me choose and online service rather than those offered by the Norwegian national system.

Retrospectively, I can see the value of having these weekly meetings with my therapist. He offered a space where I could process the turmoil that was happening all around me. I could cry, be positive, or silent. I could be anything that I needed in order to drain and doing it through the screen of my phone didn't matter. Nevertheless, in and of itself, online therapy was insufficient to keep me calm. This is where the support of a community has a stellar role, that can't fully and consistently be substituted by online communities with technologic tools.

In the midst of the pandemic chaos I saw how all around me communities at different scales started to close ranks. Countries closed borders, provinces cut interstate transportation, families called back even their grown children from abroad and from the same city. I felt alone and afloat. Yet, the interesting analysis lays on the urge I had to go back home.

I purposely spent almost two pages of this note trying to explain briefly a small glimpse of the reality that my country is currently immerse in. I wanted to explain that Venezuela's health, food, and transportation system, water and electricity services, and economy are collapsed; how insecurity, corruption and violence are frequent and unpunished; how free press and transparency is scarce; how recently the whole country experienced a nationwide shortage of gasoline and people spent more than 24 hours in queue to try to fill their tanks. My intention is to express how irrational my urge to go back home was, especially in the middle of a pandemic.

Of course, as you know by now, I didn't fulfill this irrational urge that I got the last weeks of March, but it wasn't my choice. I would have bought a plane ticket and flown back to my parents' house, except one of the governments (yes, because there is also a political crisis: we have two presidents, two supreme courts and two national legislative assemblies, and depending on your political views you acknowledge one or the other) closed down all international incoming flights and, ultimately, all borders. So even if very deep inside I wanted to go back, I couldn't.

Here is where I disagree with Maslow, the theory may not translate to immigrants' realities. This worldwide chaos showed me that I was willing to go back to a place where some of my physiological and safety needs, the two most basic levels according to his pyramid, could be in jeopardy. All in exchange of being close to my family and friends, which are a part of the third level of the theory's hierarchy.

I realized that having at my disposal constant flow of food, water and/or electricity, wasn't as important, as being surrounded with my community. That their support would make this uncertain and scary times more bearable than having resources or a stable employment. That connection to a community may be more important than other needs, but we might only see it that way when we are under a lot of stress, as usually refugees and immigrants, students or not, from low- and middle- income countries are.

My personal experience is an example of this. I am still in economic distress; I will need to find some sort of work during the summer to pay for the upcoming expenses in order to finish my masters, or else I would have thrown my family's savings down the drain. I moved where the pandemic is at its peak, which means I have been socially distancing since mid-March nonstop. Yet, I am calmer than I was in those 40 days. For I'm having weekly sessions with my psychologist aided by technology and, most importantly, I have a close and personal emotional support system (i.e. my partner) that relaxes me as we reassure each other that everything will be fine, and whatever comes our way we will surpass it, even if we are still immigrants in a different country. After all, we are Venezuelans, we adapt.