Rachael Goren

Hope you are doing well amidst this chaos! Thank you for the opportunity to reflect on the experience and share.

I refer to my life right now as "hyper-multi-tele-tasking." As a single divorced mother of a preschooler and 1st grader, trying to work full-time from home (including both psychotherapy and psych/neuropsych testing), on a technology learning curve that includes learning new testing materials, protocols, insurance reimbursement and codes, as well as learning what are the new boundaries of the profession when we are in our homes—it is quite a whirlwind. Two months ago, I questioned the validity, utility, and ethical practices of teletesting. Within two weeks of schools closing, I was researching alternate testing options, screen sharing and remote access, and configuring my iPads and laptop to be able to test from my dining room table.

It is kind of an executive functioning nightmare- managing all of my meetings, my 1st grader's meetings, and even my preschooler's "zoom show-and-tell." Indeed, I now have a show and tell teleconference zoom meeting three times a week- and let me just say that preschoolers on zoom sounds more entertaining than in reality. Figuring out the weekly "distance learning plan" from the school and making sure I have the supplies to make a volcano for the preschooler. My seven year old now has his own email address in order to log him into a chromebook- a computer I paid zero attention to as an apple snob, but was quickly researching the best option for my budget and needs because I couldn't keep sharing my work computer.

Clinically, I have to cram all my "face-to-face" therapy and testing clients into the 2.5 work days each week when my kids are at their other mother's home. During my custody hours, I schedule meetings that "could" be interrupted (supervision, clinical case meetings, etc.). This means that sometimes I am making a pom pom bunny while doing supervision, or braiding Moana's hair during a staff meeting, or trying to get my 1st grader on his zoom meeting at the same time as one of mine.

This is the experience of right now-- nothing gets my full attention, even when I want to, and even when I finally have a moment where that could be feasible. Because that is when all the anxious thoughts unleash with vengeance at the uncertainty of life right now. I, with my clients, have passed through many iterations of panic, anxiety, uncertainty, depression, helplessness, hopelessness, escape fantasies, and acceptance. The theme of the past week or two has been acceptance-- and figuring out how to structure and settle into this new normal that likely is going to occur for the long-term.

Prior to social distancing, I worked 4/5 of my time for Learning Solutions doing psych and neuropsych testing (three full batteries a week) and supervising practicum students, and 1/5 for my psychotherapy private practice (5-7 sessions per week). I am now doing all of this on telehealth. I actually enjoy doing teletesting, more than I expected. It makes me lean more on the data and less on intuition- which is interesting for professional growth. I had to learn new tests that could be administered via screen sharing and granting remote access to the client to my computer. I had to learn troubleshooting technological glitches, because they can happen at any moment and there isn't a tech person to do it for me. However, I do miss getting to see people in "real life," and experiencing the connection that usually occurs. We are only testing certain

populations (over 13 y.o., not a question of Autism or significant risk of suicidality, access to computer, access to privacy etc.). Basically everyone looks like they have ADHD, anxiety and depression right now, which does make accurate diagnosis difficult. Regarding my psychotherapy private practice, I am fascinated by the way the therapy is different- in some ways clients share more personal stories than they would in person because there is an inherent distance on a screen. In other ways, the connection is less tangible. One client asked me, "Are you even real?" I have been introduced to family members, pets, and roommates. They have seen my cat, my walls, my kids' art, and even the random typewriter that was behind me one day.

Conducting therapy from home is not something I was trained to do. I don't know how to support someone in a pandemic, even with my pre-psychology degree in public health. There is so much unknown, and I can't offer false reassurance. It is also a more exhausting level of attention and focus compared to in-person- perhaps this will get easier over time. How do I handle the doorbell ringing mid-session? Or the frequent cat-bombs as my cat walks across the computer screen. Or when the client is clearly sitting on a toilet. (Yes, that did happen). During one session, my cat saw a cat outside and screeched, which made me scream, and then my client as well. Actually, there is a lot of laughter during sessions- sometimes they share memes or videos, since we are sitting on computers. So much of this is just ridiculous.

The other major theme is loss. Perhaps this is the theme of life in general anyways, and a global crisis brings it to the forefront in ways we can't ignore. There are the little losses, still important, and often difficult to let ourselves feel when they feel trivial in comparison to thousands dying without their loved ones to say goodbye, without funerals or the rituals we have in place to mourn and make meaning from a life experience of which we inherently can't make sense. There is the loss of not having the graduations, the final semester, the last sports game, the goodbyes, and the lack of recognition for the big transitions. There is the devastating financial impact on people already struggling, and how this will widen the socio-economic gap even further between the "haves" and the "have-nots." The impact of social isolation on pre-existing mental health concerns, not to mention the global fear and national insecurity experienced. I have one client who *just* graduated college and reminds me that she started preschool the day after 9/11. Her entire education sandwiched between the reality that at any moment, everything can be lost and nothing is secure and certain.

I experience some moments where it feels like the foundation falls out. Where I sob and, like my clients, say "I can't do this anymore." But what other choice do I/we have? I am reminded of being in labor when I told my midwife, "I don't want to do this anymore." She looked me in the eye and said "you don't have to want to." It is true- we don't have to want to do this, but here we are. And as that moment passes, I enjoy more because the slower pace makes it easier to be in the moment. I am even more keenly aware of my privilege, in even being able to appreciate these moments and feel secure financially, with a comfortable home, and access to food. There are different connections being formed in social distancing- my kids FaceTime almost daily with their grandparents. As siblings, they are forming an even closer relationship spending 24/7 together. In our small "circle of exposure," we are a close-knit family with one other family with children and deepening relationships. We walk around the neighborhood multiple times per week, seeing neighbors from afar, and noticing the daily changes of spring.

I have found the most useful ways to manage this experience is to get outside every day, even if only for 15 minutes. Laugh everyday. Regulating systems- sleep, eating, exercise. Orienting to time- there is very little difference between weekday and weekend. Figuring out new coping mechanisms to address stress, because many of our previous ones are not accessible at the moment. In many ways, it is basic and simple-- but definitely not easy. And for those of us that are used to over-achieving and perfectionistic- it is letting go of doing this "perfectly" or even well. Sometimes, it is just about getting through the day. Good enough is good enough.

Best, Rachael Goren

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