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CABIN FEVER

Surviving Lockdown in the
Coronavirus Pandemic

**Paul Crawford &
Jamie Orion Crawford**



CABIN FEVER

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INVESTOR IN PEOPLE

To all who experienced the greatest confinement in history

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CONTENTS

<i>About the Authors</i>	<i>xi</i>
<i>Acknowledgements</i>	<i>xiii</i>
1. The Greatest Confinement in History	1
Social Isolation	7
Mental Health	8
Solitary Confinement	12
Diverse Lockdown	16
Altered Soundscapes	19
Lockdown Benefits	23
Cabin Fever Rising	24
2. A Brief History of Cabin Fever	29
Origins	29
Definitions	39
3. Cabin Fever Cases	43
On Land	43
At Sea	60
In the Air	72
In Space	77
4. Antidotes to Cabin Fever	89
Green or Nature-Based Remedies	92
Accepting the New Normal	94
Social Connectedness	95
Goal Setting and Purpose	95
Sanctuary versus Prison	97

Looking after the Body	98
Creative Survival	101
5. Conclusion	109
<i>References</i>	<i>111</i>
<i>Index</i>	<i>149</i>

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THE GREATEST CONFINEMENT IN HISTORY

This short book discusses the origins, definitions, social and cross-cultural history of the popularly framed condition of cabin fever in relation to what became the greatest confinement in history resulting from the coronavirus pandemic in 2020 (henceforth simply referred to as ‘the pandemic’) as governments imposed lockdown measures – e.g. quarantines, stay-at-home orders, shelter-in-place orders, shutdowns and curfews – to slow the spread of the virus. Indeed, it is estimated that around 4.2 billion, 54% of the global population, were subject to complete or partial lockdowns at the height of the pandemic (IEA, 2020). The book also examines creative individual and community responses to mass enforced isolation in its various forms. In the former, engagement and relationships may be limited, or at best, achieved only in virtual contexts such as through social media. For groups or communities, direct, physical connection presents a different challenge, not least achieving distance from others or wanting a break from them.

The notion of cabin fever and related terms, such as going stir-crazy (derived from the use of *stir* to mean ‘prison’), has

emerged in media representation and raises the very real question of how strongly this features in the current pandemic (Henley, 2020; Kanthor, 2020; Sims, 2020). In an anecdotal report on early lockdown measures, British tourist Peter Grantham commented:

We were also worried about people's mental health. People had been there for a month. And it was a bit of like, kind of, cabin fever I could see happening to a few individuals on site.

(Grantham, 2020)

Are people losing their minds during the great confinement? Are they suffering from cabin fever, going stir-crazy and, if so, how is that evident? How are people managing in the confines of their homes, however large or small, whether in apartments or houses with gardens for weeks, if not months, at a time? Which is worse, to be left on your own at this time or subject to close quarters with other cohabittees, whether members of family, friends or even strangers? These and many other questions need considering if we are to begin to determine how far the concept of cabin fever applies in this case.

During the writing of this book the first author remained in lockdown in a detached urban house with access to a garden in the United Kingdom, with his two younger children staying with their mother and his wife stranded in Taiwan. His son, the second author, took to a remote cottage along the Ottawa River in Canada with his partner who captured their isolation in a painting. In the image, the cloned, replicated images of themselves appear to form a community against a wintry desolation (Fig. 1.1).

Families around the world found themselves within a single dwelling or living separately in different accommodation. The lived circumstances for individuals, families and non-family groups in this period has been diverse, but all those subject



Fig. 1.1. 'On Ice' by Andrea Wilkin.

to the great confinement, being told stay at home and follow social distancing rules, would have likely experienced a tension between indoor and outdoor life, making difficult decisions based on their work and the need to shop for food, exercise or support others to leave the perceived safety of their homes. In normal circumstances, except perhaps in war zones or areas of high crime, people would have passed back and forth across the threshold of their dwellings without a second thought. In the

ravages of the pandemic, each domestic threshold became a borderland of decisions and risk. The outside, social world of the rampaging virus became a palpable and very real threat. Many would have experienced the kind of hesitancy between entrapment and escape conjured up in Holly St. John Bergon's poem *Cabin Fever* (2009). In her poem, she captures the tension between a call to leave and desire to stay, between the threat of both interior and exterior spaces (Fig. 1.2).

In cabin fever dreams, I've lost my way.

The wind sighs, Leave, and opens wide the door.

Although I want to go, I think I'll stay.

Never before in human history have so many people been confined to their homes as they have been with the outbreak and spread of the pandemic in 2020, all experiencing the uncomfortable threshold palpable between the inside and



Source: Kwh1050 / CC BY-SA (<https://creativecommons.org/licenses/by-sa/4.0/>); https://upload.wikimedia.org/wikipedia/commons/3/35/Piccadilly_Circus_station_during_London_COVID-19_lockdown._Sign.jpg.

Fig. 1.2. Stay at Home: Piccadilly Circus Station during London COVID-19 Lockdown.

outside in Bergson's poem. In this bicentenary year of one of the greatest contributors to public health, Florence Nightingale, billions of people faced an unprecedented scourge that left them self-isolating in their homes through either personal choice or the mandates of state governments globally (Sandford, 2020).

Preventing contagion at home and in hospitals, alongside championing public sanitation and the use of statistics to track disease and mortality, had been at the heart of Nightingale's work. She also suffered prolonged periods of seclusion at home for much of the rest of her life after contracting brucellosis from infected milk while attending to wounded soldiers from the Crimean War (1854–1856). That said, the greatest part of Nightingale's scholarly and epistolary efforts to improve public health were achieved while housebound, as an invalid working from her bed (Crawford, Greenwood, Bates, & Memel, 2020). Her productivity over many years was remarkable despite the confinement that many in lockdown have experienced. She did not find being a prisoner at home at all easy despite the luxury of receiving financial support from her wealthy father. In a draft letter to the crown princess of Prussia in 1861, she writes:

*I have passed the last four years between four walls,
only varied to other four walls once a year; and
I believe there is no prospect but of my health
becoming ever worse and worse till the hour of my
release.*

(McDonald, 2011, p. 621)

Two hundred years after Nightingale's birth in 1820, governments around the world are revisiting her substantial public health efforts, not least in advocating hand-washing and ventilating accommodation to reduce contagion, in their own response to the current pandemic. Voluntary and

involuntary sequestering in people's homes, alone or with family members, friends or even strangers, to halt the spread of the virus and the impact on limited health services has provoked anticipation across all major organisations and bodies, not least the World Health Organization (WHO, 2020), as to the mental health challenges of this radical social change. As Holmes et al. (2020) note, social isolation and loneliness are 'strongly associated with anxiety, depression, self-harm, and suicide attempts across the life-span'. Furthermore, the authors point out that isolation is exacerbated by the 'entrapment' brought by the social distancing initiatives to deal with the pandemic. For those confined to apartments this seclusion was particularly challenging. Some relief could be found on balconies as in the following image from Belgrade, Serbia (Fig. 1.3).



Source: Contemporary photography: "COVID19 on Belgrade streets" by SaraRistic is licensed under CC BY-NC-SA 2.0. <https://search.creativecommons.org/photos/a7f5466a-01dc-4715-a7cc-dbafcd90aa9b>.

Fig. 1.3. Lockdown.

SOCIAL ISOLATION

Social isolation can be defined as ‘a deprivation of social connectedness’ or ‘the inadequate quality and quantity of social relations with other people at the different levels where human interaction takes place (individual, group, community and the larger social environment)’ (Zavaleta, Samuel, & Mills, 2014, p. 5). Such isolation can be considered to provoke or lead to the distressing emotional state of loneliness (see Hawkley & Cacioppo, 2009). There have been a number of scholars down the years who have examined multiple aspects of social isolation and loneliness. David Riesman in his book *The Lonely Crowd* (1950) marked a weakening of autonomy in American society as people became more other-directed or obsessed, with popular culture replicating the ‘crowd’ and offering a way to escape the ‘terror of loneliness’ (p. 170). In a further critique of the individualism and isolationism of American society in his book *The Pursuit of Loneliness* (1970), Philip Slater flagged up the dangers succinctly in a short ‘cabin fever’ story as a preface which starts:

Once upon a time there was a man who sought escape from the prattle of his neighbors and went to live alone in a hut he had found in the forest. At first he was content, but a bitter winter led him to cut down the trees around his hut for firewood. The next summer he was hot and uncomfortable because his hut had no shade, and he complained of the harshness of the elements.

(p. 21)

His isolation brings increasing losses, not least in social perspective. He ends up shooting at intruders and blows off his own foot while sleeping with his gun. In *Bowling Alone*

(2000), Robert D. Putnam extends this concern for the dangers of individualism over community bonds and, more recently, Sherry Turkle interrogates in *Alone Together* (2011) the risk of technologically mediated social interaction, its illusory companionship, and paradoxical heightened connectivity at the same time as increased solitude and loneliness. In the pandemic, the parameters and, indeed, balance between the individual and community, togetherness and loneliness, and online and offline contact are being revisited. Individual isolation or even the softer realm of solitude is being placed under a durative stress test.

According to Wang et al. (2017) social isolation can be determined and measured in terms of the quantity, structure and quality of an individual's social networks and by appraisal of their relationships from emotional and resource perspectives. We may think of resources in terms of individual or ecological social capital or the assets or supports people have access to in themselves or out there in 'society'. A lack of these can damage mental health, not least in depression and suicide. Whereas access to such assets can support or enhance psychological well-being.

MENTAL HEALTH

The burden of mental distress has been endemic to humans long before the emergence of the pandemic. Mental distress, or illness, accounts for the second biggest threat to our financial and social stability behind cardiovascular disease (Centre for Mental Health, 2010; WHO, 2005; Wittchen et al., 2011). In the United Kingdom, mental health has been advanced as pivotal to health overall with the slogan 'no health without mental health' (Department of Health, 2011). For many years now social isolation and social exclusion in societies worldwide have been a cause for concern. Many people feel they no longer