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COVID-19 Mindfulness Toolkit: A 4-Week Course for Adult Working Professionals

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Abstract

The COVID-19 pandemic is unprecedented in terms of size and scale, and has impacted virtually every facet of life across the world over the past two and a half years. For adult working professionals, it has presented enormous challenges including work-from-home mandates, video conferencing, homeschooling, unplanned childcare, financial instability, and prolonged uncertainty leading to increased fear, stress, anxiety, and loneliness. Other work on this topic reports that even a short program in mindfulness can help adult working professionals counteract the negative effects of chronic stress and trauma. This study argues that my proposed program with four specific mindfulness practices entitled *COVID-19 Mindfulness Toolkit: A 4-Week Course for Adult Working Professionals* can help adult working professional better self-regulate and care for themselves throughout the ongoing and prolonged phases of the pandemic. This program can be incorporated into corporate training curriculums and be offered either in person or remotely via video-conferencing technology.

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The coronavirus pandemic the world has been facing over the last two and a half years is unprecedented in terms of size and scale. Given the airborne nature of the virus and high rate of contagion, virtually every aspect of human life has been disrupted. COVID-19 strikes indiscriminately, with no preference for borders, sex, gender, race, ethnicity, or social class (Polizzi et al., 2020). According to the World Health Organization (WHO), as of June 17, 2022, COVID-19 had infected over 535 million individuals and claimed nearly 6.3 million lives worldwide, with the United States accounting for over 85 million cases and over 1 million deaths (WHO, 2022). Although the death rate is decreasing as the world transitions from a five-alarm pandemic towards the endemic phase, there are still many unknowns about the continued mutations of the virus and how well our collective immunity will hold up (Achenbach & Pietsch, 2022). The virus has left in its wake tremendous suffering, not only from disease and death, but also from economic instability, social isolation, depression, fear, and uncertainty. With schools closing, mask mandates, social distancing, remote work arrangements, and restricted human interactions, people are living with unparallel uncertainty, stress, and burnout.

As a working professional, I witnessed firsthand the impact of COVID-19 on companies and the workforce over the course of this pandemic. Abrupt shelter-in-place and work-from-home orders came in March 2020 where my co-workers and I scrambled to vacate our desks and pack up boxes of our files and belongings to take home. As companies began reporting a quick uptick in the number of positive cases weekly, my colleagues and I all grieved the passing of a beloved co-worker in April 2020. Offices became a ghost town with only minimum viable operations and personnel allowed to enter. Many parents scrambled to home-school their kids, cook, clean, and pivot to virtual meetings and online collaboration tools. Younger engineers

newer to the workforce were quarantined alone in their small studios, divorced from their social support networks at the office. Many thought this crisis would pass in a couple months, and never did anyone expect to be working in this capacity for over two years. Our offices just opened back up in April 2022 with flexible schedules to limit the population density and support social distancing. However, a continued spike in cases of the COVID-19 Omicron variant over the past month has slowed down our company-wide return to work initiative. One by one, colleagues in my department have tested positive for the virus and taken sick-leave for a week or two. Fortunately, we have not had any hospitalizations or deaths, but COVID-19 continues to spread throughout our workforce at an alarming rate. In addition, post-acute or long COVID has potentially affected up to 23 million Americans, pushing an estimated 1 million people out of work (U.S. Government Accountability Office, 2022). It is no wonder that companies and workers are still struggling to respond accordingly given the volatility of the current situation.

This thesis explores a history of the COVID-19 pandemic, its impacts of it on society, and in particular its impact on adult working professionals. It is based on the hypothesis that a 4-week mindfulness-based program for adult working professionals can help to provide self-regulation and self-care during such uncertain times. To this end, this paper highlights four specific mindfulness techniques that are integrated into the course and offered as a COVID-19 mindfulness toolkit. These include awareness of breath meditation (AOB), meditation to music, body scan, and *metta* or loving-kindness meditation. This program can be readily incorporated into existing corporate training curriculums and be offered either on-site, remotely via video-conferencing technology, or in a hybrid (on-site and remote) method. As the forthcoming literature supports, even a short course in mindfulness can benefit adult working professionals to navigate this continued and challenging COVID-19 environment.

Literature Review

It is helpful to retrace the inception of the COVID-19 virus to understand the various stages of containment and lock-down that countries, organizations, and individuals have had to navigate over the past two and a half years. This literature review will begin by examining the history of the virus, the continuous ambiguous environment it has created worldwide, and the effect on employers and adult working professionals.

COVID-19 History & Context

First reported in Wuhan, China on December 21, 2019, cases of the severe respiratory coronavirus exponentially spread across the globe and were deemed to be a pandemic on March 11, 2020 by the World Health Organization (Singhal, 2021; Ransing et al., 2020). COVID-19 is a multisystem condition that starts as an upper respiratory tract infection that subsequently affects the lungs and establishes, in the most severe cases, interstitial pneumonia, severe respiratory failure, systemic inflammatory response, and multi-organ dysfunction (Biancolella et al., 2022). When it began, COVID-19 led to changes across the world with one country after another coming under lockdown to bring the spread of the virus under control (Ransing et al., 2020). Many countries reported increased mortality and morbidity rates, huge economic losses, social disruption, physical distancing, and additionally the potential for a widespread increase in mental health issues (2020). Virtually every aspect of human life was disrupted across the world. Employees were sent home to work remotely, schools closed with classes transitioned online, and social spaces such as malls, parks, restaurants, beaches, and movie theaters shut down. The lack of available vaccinations worldwide and perceived mistrust and/or efficacy of them further exacerbated fear and stress in people's mind. Zhang et al. (2021) explain, "When basic trust is disrupted, people can become disoriented, limiting their typical ways of coping with stress" (p.

230). Even today, the number of variants that continue to manifest are a constant source of distress, even amongst those that are immunized.

Continued Uncertainty and Stress

It is important not to underestimate the impact of prolonged uncertainty and stress as society continues to grapple with one of the greatest challenges in modern history. Stressors associated with natural disasters or pandemics such as COVID-19 often last for a long time and may not fully resolve. These include loss of job and income, racism and the disproportionality of the infection, fear of contracting the virus and/or passing it onto loved ones, death of loved ones, etc. (Zhang et al., 2021).

Volatility, Uncertainty, Complexity, and Ambiguity (VUCA) is a term first used at the Army War College in 1987 that can be used to explain the continuing challenges COVID-19 presents worldwide (Singhal, 2021). Singhal (2021) illustrates the correlation between COVID-19 and VUCA (see table 1).

Table 1

COVID-19 in VUCA Environment

– HOW WELL CAN YOU PREDICT THE RESULTS OF YOUR ACTION +	Table 1: Coronavirus in VUCA Environment	
	Complexity	**Volatility**
	Coronavirus is a complex situation interconnected with lots of variables or inputs coming from multiple directions.	The challenges emerging from coronavirus are unexpected and unstable. Some information is available or can be predicted. The volume and nature of the data are too huge in size.
	The tentative solution is to develop and allocate adequate resources to minimize the impact of these inputs.	Countries are observing each other and trying to reduce and overcoming the impact of the coronavirus.
	Ambiguity	**Uncertainty**
	Coronavirus has no precedence; the cause and effect relationship is also not evident.	Coronavirus is at the stage of uncertainty, the primary cause and effects are known, change is possible, but the timeframe is not defined. There are fluctuations in the number of coronavirus patients, deaths, and recovery rate.
	The solution at this stage only comes through experiments based on certain assumptions.	The best approach in such a situation is to explore as much information as possible and draw inferences for effective decisions. The way forward is to collect information and data, analyze it and perform cross-country analysis to minimize the impact of coronavirus.
–	– HOW MUCH DO YOU KNOW ABOUT THE SITUATION +	

Source: Adapted and Modified from Bennett and Lemoine (2014)

When the pandemic first started fear, anxiety, and uncertainty were paramount. I remember being glued to the news, witnessing in shock as the COVID-19 virus exponentially spread from one country to the next and overtook the world in a matter of months. No one knew exactly what was going on so life as we knew it was halted as we all retreated inside, away from one another to shelter-in-place. Once bustling cities became ghost towns, hospitals filled up with COVID-positive/acute cases, and news of morbidity rates became daily reminders of the threat to our lives. Dr. Amishi Jha (2020) and her lab in Miami study people who regularly experience VUCA

conditions as part of their jobs—soldiers, firefighters, organizational leaders, etc. and explains how we are all living in VUCA conditions. She states:

> We experience uncertainty-related stress (How long will this go on?). We feel a threat, not only to our physical safety (to our health) but also our psychological safety, our norms, familiar routines, life as we knew it. And we struggle with poor mood, often heightened by a sense of isolation and loneliness. This pandemic has created the perfect circumstances for our attention to get easily, and constantly, hijacked. (paras. 11)

It is during this time of duress where I found my own mindfulness practice prove most fruitful. Leveraging different mindfulness techniques such as the body scan and metta practice, I found that I could "dial-down" the pervasive fear response and better manage the intensity of this unprecedented VUCA environment. Instead of being thrown into an impulsive fight or flight sympathetic nervous system reaction multiple times a day, I could employ a simple, yet effective awareness of breath meditation to better self-regulate and find equanimity.

Although the world may be now entering into the endemic phase of COVID-19, VUCA still is prevalent and is even exacerbated by other crises we are witnessing presently such as war, gun violence, political instability, and climate change. Dealing with such global crises further impairs our ability to self-regulate. It is understandable why our attention is stressed, and our usual coping mechanisms are not as effective.

For organizations, COVID-19 has created a particular challenging environment for resource management. Carnevale and Hatak (2020) elucidate "… managers [are] having to quickly venture into the 'unknown unknowns' as they strive to help their workforce adapt to and cope with radical changes occurring in the work and social environment" (p. 183). In the past two and a half years the workforce has been altered in physical, technical, emotional, and socio-psychological ways not seen before.

Fight or Flight

One of the most primal and instinctual emotions for human beings is fear, especially when a threat such as a worldwide pandemic like COVID-19 is prolonged. As Dr. Richard Hanson (2009) explains in *Buddha's Brain*, once we see something potentially harmful, the hippocampus identifies the object as dangerous (if it is dangerous) and sends a high-priority alert to the amygdala to signal the fight or flight neural and hormonal systems (p. 34). The brainstem, what some call the "reptilian brain," works with the limbic areas and cortex to assess safety or danger (Siegel, 2010). When threatened the sympathetic nervous system is activated and we experience the fight or flight response. Adrenaline pours into our bloodstream, the stress hormone cortisol is released, the digestive system shuts down, and panic courses through the body. In understanding how the brain functions, we can better apprehend how it creates impulsive constraints so that we tend to see ourselves as separate from one another and *others* as a potential threat. In this reflexive and immediate identification with the body and the brain's capacity to register the fact that this body will die, the desire for survival is at the root of human conditioning.

Fast forward to today and we can see that in the case of COVID-19, anxiety and stress are again at the forefront of existence since it is inextricably tied to feelings of helplessness and the loss of a fundamental sense of safety, security, financial stability, health, and well-being. The sense of fear is dominant more than ever in the world since the sole focus of the planet is on self-preservation and any close contact with people either vaccinated or not may jeopardize one's health and safety. Never in the 21st century have we as human beings had to deal with every other individual as a potential threat and this shift in perceived *other* has exacerbated our flight or fight response. Polizzi et al. (2020) state:

> Fear of infection in the presence of others, of contact with contaminated surfaces, and of passing too close to another human being evokes an increasingly familiar feeling of mistrust of others, avoidance, and withdrawal from everyday activities, thereby shrinking our world. (p. 59)

As we can see, fear is an animal defense mechanism that is fundamental for survival and involves several biological processes in response to potentially threatening events. However, when it is chronic or disproportionate, it becomes harmful and can be a key component in the development of various psychological maladies (Ornell et al., 2020). In a prolonged pandemic, fear increases anxiety and stress levels in healthy individuals, and in the case of COVID-19, it impacts everyone in every walk of life. Studies show that chronic stress can alter the brain, damaging cells, destroying synapses, and ultimately shrinking the brain (2021). More than 40% of Americans reported symptoms of anxiety and depression during the winter of 2020, double the rate of the prior year (Smith, 2021). In addition to an increase in mental health diagnosable symptoms, many are reporting what is now known as "pandemic brain fog" which includes forgetfulness, difficulty concentrating, and general fuzziness (2021). Damage to our brains affects people not only cognitively but emotionally as well.

Unfortunately, segregation and isolation are being further exacerbated by the COVID-19 crisis. Masks, shelter in place, and social distancing are unique during this pandemic and place a unique strain on the ability for people to connect and support one another, which is an essential component of resiliency and recovery in the aftermath of crisis (Polizzi et al., 2020). When we objectify one another as a threat, we can project our own fears, doubts, and worries onto others and even further jeopardize our connections and support networks. Although wearing masks has been critical in preventing the contagion, facial cues and our facial communication with one another have severely deteriorated (Barrick et al., 2021). The social fabric is changing due to

reduced physical interaction, lack of face-to-face communication and inter-personal networking, and even social exclusion (Carnevale & Hatak, 2020). For those living alone during the pandemic, social isolation has led to increased loneliness, anxiety, and depression. Loneliness has been linked to reduced volume in the hippocampus and amygdala, as well as decreased connectivity in the prefrontal cortex (Smith, 2021).

For those that contracted COVID-19, the persistence of fatigue, headache, insomnia, the onset of anxiety, and a depressive state are symptoms that are included in what is now commonly referred to as post-acute or long COVID-19 (Biancolella et al., 2022). Given the varied nature of the symptoms and frequency of long COVID-19, understanding and treating it represents a major challenge both for healthcare professionals and patients alike.

Impact on Working Professionals

The COVID-19 pandemic has created a particularly challenging environment for adult working professionals. For example, employees who formerly spent all or most of their time working inside of their company's physical office spaces had to quickly adjust to remote working conditions (Carnevale & Hatak, 2020). Over the past two and a half years, mass home-confinement directives forced employees to work from home, thus blurring the distinction between work, family, and personal time. Furthermore, the closures of schools and childcare services increased parental demands in adapting to homeschooling, implementing video-conferencing technology, dealing with financial uncertainty, and managing emotional and mental uncertainty. Carnevale and Hatak (2020) add:

> While these work-family interconnections seem particularly demanding for employees with children, single and childless workers are not immune to the negative consequences of such altered working conditions, as they may be at greatest risk of loneliness, a felt lack of purpose, and associated negative effects on well-being. (p. 183)

In a survey with 10,107 participants from companies including Apple, Intel, Facebook, Capital One, Salesforce, and Linkedin, 52.9% answered yes to increased loneliness during work from home and 56.4% reported increased feelings of anxiety (Robinson, 2020). Even for those in the office, the fight or flight response is continuously activated since directives promoting health and safety require 6 feet of social distancing, constant handwashing, and the use of masks. Such pandemic-related stressors and the prolonged VUCA environment may contribute to widespread emotional distress and psychiatric illness in the future and need to be addressed by companies and health-care providers (Pfefferbaum & North, 2020).

While extensive literature on employee wellness programs exists, there are few published studies of programs addressing the COVID-19 pandemic stressors (Rene et al., 2021). One study in 2021 by Rene et al. analyzed the results of a 17-week JeffBeWell (JBW) program at Jefferson University and Health system in Pennsylvania and New Jersey. Three hundred and eighty-eight 30-minute sessions were held from March 2020 through July 2020 on a variety of pandemic-related topics such as working remotely, parenting, sleep, nutrition, grief, anxiety, and yoga and relaxation. Out of 1,324 participants, 213 responded to the survey. Ninety one percent of respondents felt that the sessions met their expectations, 92% felt the session helped them, and 92% planned to attend future sessions (2021). Although the percentage of survey responders was low, feedback on the program showed a positive trend and illustrates the need for more wellness programs specifically tailored to COVID-19 stressors.

Organizations need to pivot quickly and provide mental health and well-being programs to employees to support the continued and prolonged effects of the COVID-19 pandemic. Mindfulness-based wellness programs may be another avenue for companies to provide self-regulation tools and techniques that are so necessary during these uncertain times. A 4-week program such as this one can be incorporated into a corporate weekly training curriculum and be

offered either in-person, remotely via video-conferencing technology, or a hybrid (on-site and remote) approach.

Mindfulness

Mindfulness programs have proliferated exponentially throughout the West over the past two decades. Rooted in ancient contemplative and Buddhist practices, mindfulness is now in the mainstream and may be leveraged by organizations in an integrated way to offer self-regulation and wellness techniques to employees navigating the ever-changing COVID-19 landscape. Although not a panacea, mindfulness practices have showed to reduce stress and anxiety, improve sleep, and promote equanimity. The following sections of the literature review explore the origins of mindfulness, highlight various studies and benefits, and focus in on four specific mindfulness interventions that are easily accessible to adult working professionals that have no prior experience in mindfulness practice.

A Case for Mindfulness

Founder and creator of Mindfulness Based Stress Reduction (MBSR) Jon Kabat-Zinn pioneered and brought *mindfulness* into the mainstream. Kabat-Zinn (2005) says, “Mindfulness can be thought of as moment-to-moment, non-judgmental awareness, cultivated by paying attention in a specific way, that is, in the present moment, and as non-reactively, as non-judgmentally, and as openheartedly as possible” (p.108). In his book *Full Catastrophe Living*, Kabat-Zinn (1990/2013) further explains, “It is cultivated by purposefully paying attention to things we ordinarily never give a moment’s thought to” (p. xlix). It is based “on our inner capacity for paying attention and on the awareness, insight, and compassion that naturally arise from paying attention in specific ways” (p. xlix). The practice of mindfulness can help a person not to worry about the past or the future as well as move out of reactive maladaptive behaviors

(Lesiuk, 2015). Studies and research on Mindfulness-Based Interventions (MBI) over the last 30 years have increased exponentially, showing benefits including increased focus, cognitive performance, self-regulation, attention, working memory, and improved sleep (Lesiuk, 2015; Gard et al., 2012). Changes in mindfulness have been shown to highly correlate with increased psychological well-being and decreased stress and anxiety and therefore have great potential to foster resiliency (Gard et al., 2012). Awareness in the present moment allows us to slow down and change our behavior. It provides a pause in the midst of being triggered where one has the opportunity to *respond* rather than react.

In 2020, Weis et al., conducted a study with 32 undergraduate students at a midwestern university to see if a 4-week mindfulness program could help students cope with COVID-19-related stress and anxiety. The curriculum consisted of a) diaphragmatic breathing and body scan meditation; b) walking meditation; c) guided imagery and acceptance of negative thoughts; and d) mindful eating and acceptance of negative feelings (Weis et al., 2020). Although the study was small in scale and short in duration, participants reported greater mindfulness and self-compassion and less stress, anxiety, and sleep problems than controls (2020). It corroborates the hypothesis that even a brief program of mindfulness intervention is useful; however, most gains are maintained over a longer period of time.

Similarly, a 4-week program in mindfulness may aid adult working professionals cope with COVID-19-related stress in a number of ways. First, mindfulness cultivates non-judgmental attention rather than attention that is reactively triggered by rapidly changing circumstances (Weis et al., 2021). By allowing this space in attention, employees may be able to better self-regulate and manage the impulsive fight or flight sympathetic nervous system response. Mindfulness also encourages acceptance of a situation and allows employees to see the pandemic as a common crisis that unites humanity rather than as an isolated threatened individual (Weis et

al., 2021). Lastly, mindfulness fosters acceptance of the self even through conflicting and negative feelings and self-judgment.

Four Mindfulness Interventions

There are many mindfulness techniques that have been leveraged in mindfulness programs across the globe. In the traditional MBSR program, Kabat-Zinn introduced a variety of techniques such as Awareness of Breath (AOB) meditation, body scan, mindful eating, and yoga to participants in the 8-week program. Other techniques include sitting meditation, standing meditation, mindful walking, visual meditation, mantra-based meditation, metta or loving-kindness meditation, contemplative writing, gratitude practice, etc. (Santorelli et al., 2017). For adult working professionals, the following four techniques will be incorporated into my proposed 4-week mindfulness course to help employees deal with the continued impacts of COVID-19. These are AOB meditation, meditation to music, body scan, and metta practice.

Awareness of Breath Meditation

The cornerstone of any mindfulness practice is the Awareness of Breath (AOB) meditation. It involves being fully aware of what is occurring with the breath in each moment by paying attention in a specific way, without overanalyzing, evaluating, or judging the content of one's thoughts or experiences (Lesiuk, 2015). AOB helps to focus and concentrate attention, which is required for any meditation practice. When the mind wanders to thoughts, one can gently direct attention back to the breath, back to the present moment. Kabat-Zinn (1990/2013) explains:

> In meditation, the breath can serve as a reliable and ever-present anchor for our attention. Tuning to the sensations of breathing anywhere we can feel them in the body allows us to

> drop below the surface agitations of the mind into relaxation, calmness, and stability, without having to change anything at all. (p. 45)

Since our breath is with us every moment of our lives, we can leverage it at any time to check in, be mindful, and have a moment of meditative awareness.

There are many forms of mindful breathing techniques, such as diaphragmatic breathing, awareness of the breath at the tip of the nostrils or within the chest, and even pranayama or controlled breathing. The simplicity of the AOB technique is that it provides the foundation for all other breathing techniques and can be utilized at any time by anyone in any location. The benefit of the AOB technique is that it can be employed both formally during a period set aside for mindful meditation, or more informally throughout the day. Several hundred patients that had been out of the MBSR program for years were surveyed and asked what was the single most important thing they received. The majority said, "The breathing" (Kabat-Zinn, 1990/2013).

Meditation to Music

For many people new to mindfulness practice, sitting in silence and using the breath as a focal point to abide non-judgmentally to awareness in the present moment can be challenging. As such, sound and music can be incorporated into mindfulness meditation and may be an ideal source of focus for mindfulness practice (Hernandez-Ruiz & Dvorak, 2021; Lesiuk, 2015). Mindfulness-based music therapy (MBMT) or meditation to music can foster and support one's mindfulness practice. In 2021, Hernandez-Ruiz and Dvorak conducted a study on the impact of music-stimuli on mindfulness meditation. Dvorak identified three functions of music in mindfulness meditation: (a) music as a support for mindfulness meditation, (b) music as a focus for mindful listening, and (c) music as a focus for mindful active engagement. In a multi-site study of 57 musicians and 57 non-musicians, both groups supported the hypothesis that music was effective for mindfulness meditation (2021).

Another study on the effects of MBMT on attention and mood was conducted with 15 women receiving chemotherapy for breast cancer (Lesiuk, 2015). The results determined that MBMT significantly reduced negative mood states and improved attention over time. A participant's homework journal illustrates the study's findings, "This week, the music was extremely relaxing and beautiful. … My mood, thoughts, and feelings changed. I was apprehensive, nervous, etc. Now, I feel acceptance, relaxed, ready for the approaching surgery—totally with a positive attitude" (p.281)!

Some drawbacks of these studies are that they are small in scale. Although research in this area is limited, studies do show that mindfulness meditation to music can be an effective practice for working professionals to help enhance attention and focus. Especially during the COVID-19 pandemic, music can be leveraged to improve mood and reduce negative thought streams.

Body Scan Meditation

Another key mindfulness practice used in MBSR to reestablish contact with the body and promote relaxation is known as the body scan. It is an effective method for developing both concentration and the flexibility of attention (Kabat-Zinn, 1990/2013). The body scan is most commonly practiced lying down and involves slowly focusing and becoming aware (nonjudgmentally) of each region of the body, such as the toes, the calves, the knees, etc. until the scan is completed all the way up the body. Kabat-Zinn (1990/2013) elaborates:

> It is in the body scan that our patients first learn to keep their attention focused over an extended period of time. It is the first practice they engage in systematically that nurtures and develops greater stability of mind (concentration), calmness, and mindfulness. (p. 79)

Many people have negative associations with their bodies judging *them* to be "too fat" or "too ugly" or struggle with their bodies in terms of aging, sickness, or pain. By using the body scan to

cultivate moment-to-moment non-judgmental awareness, people can develop the capacity for more acceptance and self-love. For many MBSR participants, the body scan provides the first positive experience of their body that they have had for many years (1990/2013).

For those struggling with pain, the body scan can transform the capacity to face, embrace, and work with pain with a new perspective. Instead of fighting with and avoiding feeling physical pain, practitioners of mindfulness practice discover a more wholistic sense of acceptance of their emotions and body. Kabat-Zinn (1990/2013) explains, "Healing always involves an attitudinal and emotional transformation. Sometimes, but not always, it is also accompanied by a major reduction in physical symptoms and by improvement in a person's physical condition" (p. 193). Phil, a trucker in the MBSR program struggling with back pain from a lifting accident had a breakthrough while doing the body scan practice:

> After about twenty minutes, he started feeling his breathing "all over his body," and he found himself completely focused on that extraordinary feeling of his body breathing. He said to himself, "Wow, this is great!" Then he realized something else: he wasn't feeling any pain at all. (p. 194)

The body scan also has the potential for individuals to feel less bound by the body and more unified and interconnected with life overall. In 2019, Dambrun et al. conducted a study to investigate if body scan meditation elicits happiness via an alteration of the sense of self. Eighty-nine participants were included in the study and were randomly assigned to the three groups: body scan, relaxing music control, and active listening audio book control. As predicted, the increase in happiness was greater in the body scan meditation than the two control groups (2019). A sense of selflessness induced by the mindfulness practice of the body scan elicited happiness via a disruption in the identification of self as the body. There was also a greater sense of a unified self in the body scan cohort as compared to the control groups. Dabrum et al. (2019)

confirm, “Thus, body scan meditation provides an opportunity to experience the discontinuity of sensations. Then, the sense of self can be experienced as an event rather than a static entity” (p. 1532). When individuals experience the timeless spaciousness that mindfulness fosters, they are less self-absorbed and more connected to the wholeness of existence.

Metta Practice

Metta, or loving-kindness, is one of the most important Buddhist practices, complementing mindfulness practice (Fronsdal, 2008), and often mindfulness is taught hand in hand with loving-kindness practice. Whereas mindfulness is a more personal, inward-directed practice, loving-kindness is a practice more relevant to the interconnected realm of human relationships. This teaching is so applicable now since fear and mistrust are paramount during the COVID-19 pandemic. The fight or flight response during COVID-19 is still prevalent since people across the globe continue to struggle with their livelihood in terms of basic levels of safety, health, and well-being. Metta practice can provide a remedy for the anxiety and stress that we’re all facing during these unprecedented times and provide the connection and support we need from one-another.

The practice begins by first offering loving-kindness to oneself. While seated, one may begin by focusing gently on the breath and concentrating gently on the heart region of the chest. Then, one can mentally repeat the following four similar phrases slowly and steadily: May I be happy, may I be well, may I be safe, may I be peaceful and at ease (Fronsdal, 2008). Instead of repeating the phrases robotically as a mantra or affirmation, it is important rather to *feel* the intention behind the words and to receive them as fully as possible. Next, the feeling of loving-kindness is extended outwards to a friend, benefactor, or other loved one. Again, the four phrases are repeated silently with compassion: May you be happy, may you be well, may you be safe, may you be peaceful and at ease. Remaining rooted in the intention of wishing well-being and

happiness, one can continue to extend loving kindness even more broadly to a wider circle that includes everyone: colleagues, acquaintances, strangers, and ultimately all sentient beings. In this way, loving kindness can be a balm to soothe and heal both ourselves and those around us. Polizzi et al. (2020) further explain, "In times of stress, like we are enduring today [with COVID-19], it can be comforting to appreciate that we are all in this together and to direct compassion and loving feelings toward ourselves and others" (p. 61). Studies reveal that loving-kindness practices as short as seven minutes have bolstered feelings of social connection and positivity towards other people (2020). Gard et al. (2012) go on to elucidate:

> Self-compassion has been described 'as being open to and moved by one's own suffering, experiencing feelings of caring and kindness toward oneself, taking an understanding, non-judgmental attitude toward one's inadequacies and failures, and recognizing that one's own experience is part of the common human experience.' (p. 166)

Furthermore, compassion has been shown to predict subjective well-being, and improved mental and physical health (Gard et al., 2012). By first extending loving kindness to ourselves, then to our close relations, and ultimately to the world at large, we can develop the capacity for self-love and empathy. Metta practice can indeed provide a remedy for the anxiety and stress that we're all facing during these unprecedented times. Salzberg (1995) elaborates, "We do not need to fear anything. We are whole: our deepest happiness is intrinsic to the nature of our minds, and it is not damaged through uncertainty and change" (p. 22). Loving-kindness gives us the ability to touch that which is deeper in ourselves, a wellness of being that cannot be infected by any virus. In more advanced stages of metta practice, one can learn to widen the practice to include a perceived opponent or enemy. This is the mark of true peace, equanimity, and forgiveness when one deeply understands that they can't be happy, unless others are happy. All human beings

experience fear, sorrow, pain, and suffering; likewise, all human beings desire to be happy and free of suffering.

From my own experience, learning and practicing metta meditation over the past two years has been incredibly beneficial to counteract the onset of pandemic-related anxiety and stress. I have used loving-kindness practice as part of my own mindfulness toolkit in a number of situations. During the initial days of the lockdown, shopping at the grocery store felt like a battle-zone experience. After 30 minutes of waiting in a long line of masked and gloved people, I was finally let into the store to shop for basic groceries and supplies. The toilet paper, canned food, and cleaning product aisles were crowded with people scrambling to take what was available. I could feel my heartrate increase and my breathing become shallow and stressed as I desperately tried to navigate around the single-filed, one-way rows. Overwhelmed, I stopped for a moment to center myself and began to silently practice metta recitations. Instead of rushing around in panic, I made a conscious effort to slow down and make eye contact with other shoppers repeating silently, “May you be happy, may you be well, may you be safe, may you be peaceful and at ease.” In a short amount of time, the fight or flight reaction I was feeling surprisingly transformed to one of genuine empathy and compassion. My breathing felt more regulated, and I could feel a quality of patience and understanding take over.

Last month, I also leveraged metta practice while in meetings at the office. After working remotely for over two years, my co-workers and I began working on-site a few days a week in support of our company’s return-to-work initiative. Although excited, returning to work was not quite the return to normalcy since masks and social distancing were mandatory for those working onsite. Upon entering a meeting with more than 30 individuals, it struck me that I hadn’t been in such a populated room since the beginning of the pandemic. Anxiety began to set in, and my breathing became rapid and shallow. To counteract the stress, I began to send loving-kindness to

each of my co-workers. By pausing and employing the metta recitations, I was able to be more mindful of the moment and also counteract the sympathetic nervous system reaction. This silent practice can indeed be leveraged at any time and in any situation to better self-regulate and also connect with others. As has often been said throughout the course of this pandemic, “We’re all in this together.”

Discussion and Limitations

It is important to note that the COVID-19 landscape is rapidly changing, and the pandemic continues to go through multiple stages. Thus, many of the studies presented in this paper are referenced from a historic perspective. Although only a year or two old, they do provide valid testimony of the initial stages of the pandemic and how humanity has had to grapple with such a global crisis. Although we do have vaccines and anti-viral medication available now and the mutations of the virus are less deadly than in 2020, the prolonged effects of this pandemic are undeniable and will continue to pose a challenge for society at large, organizations, and working professionals in the foreseeable future.

Another limitation to note pertains to the research available on adult working professionals. Most studies have focused on the industries and employees most impacted by the COVID-19 pandemic, namely hospitals, doctors, nurses, and other healthcare providers that have been on the frontlines. The stress, trauma, and burnout hospital workers have faced over the past two and a half years is unparalleled leading to depression, fatigue, and post-traumatic stress disorder (Pfefferbaum & North, 2020). Studies I’ve referenced in this paper pertain to white-collar workers and companies that pivoted during COVID-19 to implement social distancing and work from home mandates. In conducting my research, I became acutely aware of the gap in studies on adult working professionals in lower income and blue-collar jobs such as cleaners,

janitors, fast-food workers, garbage collectors, grocery clerks, and even small business owners. These populations did not have the option to work from home. Working to keep minimum service operations going for society to function, they faced even greater pressure and anxiety caused by various stressors including increased exposure to the virus, financial hardship, and inadequate medical care.

Despite the limitations noted above, the research presented in this paper corroborates my hypothesis that a mindfulness program specifically tailored to adult working professionals would be of benefit during the prolonged pandemic. Corporations are lacking wellness programs specifically tailored to address the stressors of the pandemic on the workforce. My proposed 4-week mindfulness program will include the following themes covered above in this literature review: 1) history of COVID-19 and its impact on working professionals, 2) continued VUCA climate and impact on our sympathetic nervous system, 3) benefits of mindfulness practice and 4) COVID-19 Mindfulness Toolkit: four specific mindfulness techniques for self-regulation and self-care. This course is designed to be an introduction to mindfulness and requires no prior experience. Although mindfulness programs have proven to be beneficial across many populations, the program I am proposing is designed to support one specific population—adult working professionals that face continued or intermittent work from home mandates. As such, it can be delivered onsite, remotely via video-conferencing technology, or in a hybrid fashion that can be incorporated into a weekly corporate training curriculum.

Conclusion

Since 2019, COVID-19 continues to impact the world in an unprecedented fashion. Although we may be transitioning to an endemic phase, adult working professionals continue to face enormous challenges. These include working from home, childcare support, homeschooling,

financial instability, and navigating emotional and mental stress both for themselves, their co-workers, and their families. Never before in modern history have we had to perceive *every* other human being as a potential threat to our own health and well-being. The fight or flight response is still prevalent since the cases of the Omicron variant are on the rise and work from home orders are instigated at a moment's notice. Prolonged respiratory, musculoskeletal, cardiovascular, and neurological symptoms involved in long COVID-19 also pose significant difficulties for both patients and doctors alike (Biancolella et al., 2022). Companies need to incorporate wellness programs that address the impacts of the pandemic to better support their workforce. A 4-week course in mindfulness can be of great support to adult working professionals to learn simple yet effective mindfulness techniques that can help them self-regulate during these continued challenging times. As the literature supports, even a brief program with four select mindfulness techniques such as AOB meditation, body scan, meditation to music, and metta practice can aid in one's ability to be mindful and navigate this continued VUCA climate.

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