

## **APS Festival of Psychology 2025**

### **Psychological Impacts and Interventions for People Living with Long Covid Workshop By Dr Kerrie Clarke**

#### **Case Scenario: Aisha's Long COVID Journey**

Aisha is a 45-year-old woman of South Asian background, married with two children aged 9 and 12. She lives in a multicultural suburb of a major Australian city. Aisha worked full-time as a financial consultant at a large investment firm. Her job was well-paid, intense, and required high cognitive load, long hours, and client management across different time zones. She was deeply respected in her community and often supported extended family, balancing her demanding career with family and cultural responsibilities.

In March 2022, Aisha contracted COVID-19. She experienced fever, chest tightness, headaches, muscle pain, and persistent fatigue. Although her illness was managed at home, her recovery was not smooth. Weeks after testing negative, Aisha continued to feel overwhelmingly tired, struggled with memory lapses, breathlessness, and joint pain. Simple tasks like cooking or helping her children with homework became difficult.

As months passed, Aisha sought answers. She visited her GP, a respiratory specialist, a neurologist, and a cardiologist. She also worked with an exercise physiologist. While some health professionals were supportive, others seemed to dismiss her complaints or attributed them to stress. Aisha often felt unheard, and in some cases, culturally misunderstood. One specialist questioned whether she was “just tired from looking after a family,” a comment that deeply frustrated her.

Culturally, illness carried a quiet stigma in Aisha's extended family. While her immediate family was supportive, she sensed judgment from relatives who expected her to “push through” or suggested she was exaggerating. Her role as a provider, mother, and community mentor felt undercut by her condition. She grieved not just her energy and clarity, but her role and standing in both her professional and cultural spheres.

Psychologically, Aisha felt lost. Her mental health declined with growing feelings of depression, guilt, and anxiety. She missed religious gatherings, social visits, and felt isolated from the vibrant community that once energized her. She became tearful easily and described feeling like a “shadow” of herself. Her husband tried to support her, but the shift in family roles and added stress created tension in their relationship. Aisha was referred by her GP for psychological intervention to ‘treat’ her long COVID as medical interventions did not seem to be helping.