



BEHAVIORAL HEALTH IMPACTS OF COVID-19 Workplace Trends, Resources, and Strategies

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# Agenda



**Defining** key terms



What to expect from a behavioral health standpoint over the next few months



**Understanding** impacts to you and your teams

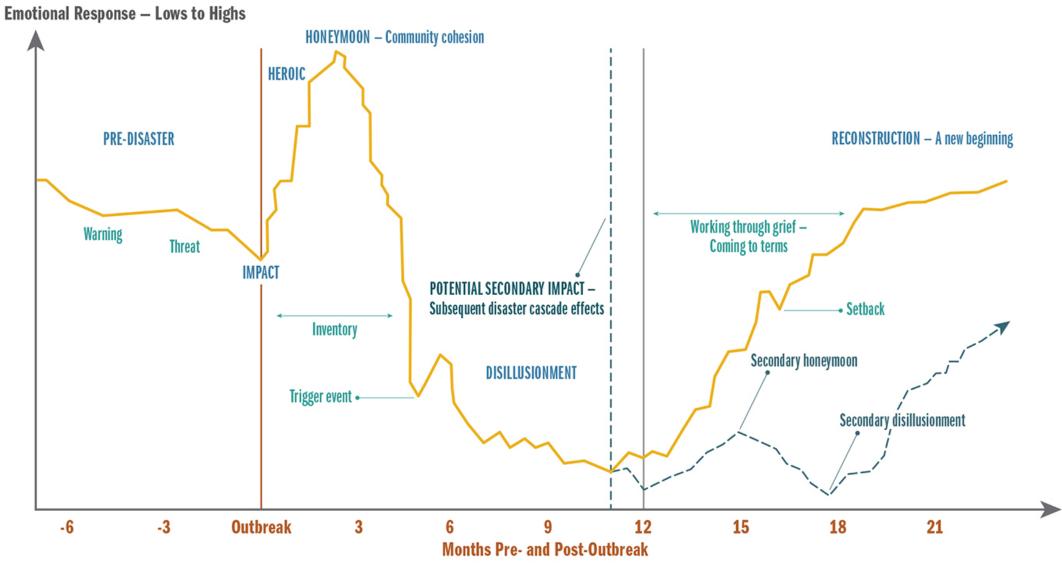


**Strategies for** increasing resilience

### **Definitions**

- Burnout: Exhaustion of body, mind, and motivation due to exposure to prolonged and unresolved work stress or frustration. Burnout is often a consequence of perceived disparity between the demands of the job and the resources that an employee has available to them.
- Compassion fatigue: Emotional and physical exhaustion leading to a diminished ability to empathize or feel compassion for others, also described as secondary traumatic stress.
- Moral injury: Strong feelings of guilt, shame, or anger due to not being able to provide the kind of care or service you want and expect to provide.
- Resilience: The process involving behaviors, thoughts, and actions of adapting well in the face of adversity, trauma, tragedy, threats, or significant sources of stress. Can be developed by focusing on connection, purpose, and flexibility/adaptability.
- Resilience factors: Conditions that help a person survive during and recover from a crisis or trauma- usually internal strengths and external resources.

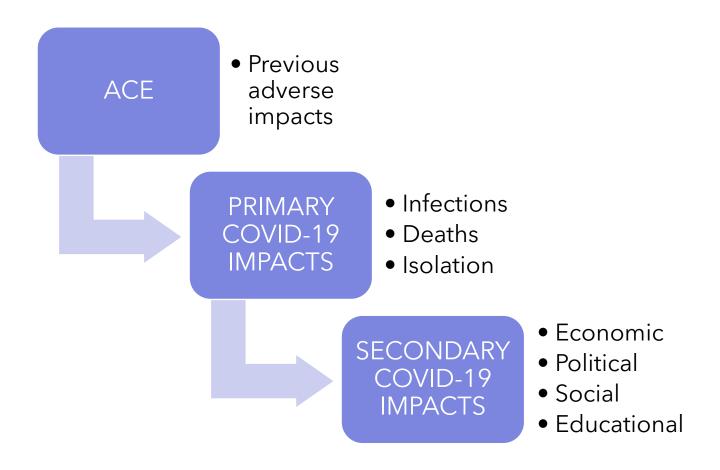
### **Reactions and Behavioral Health Symptoms in Disasters**

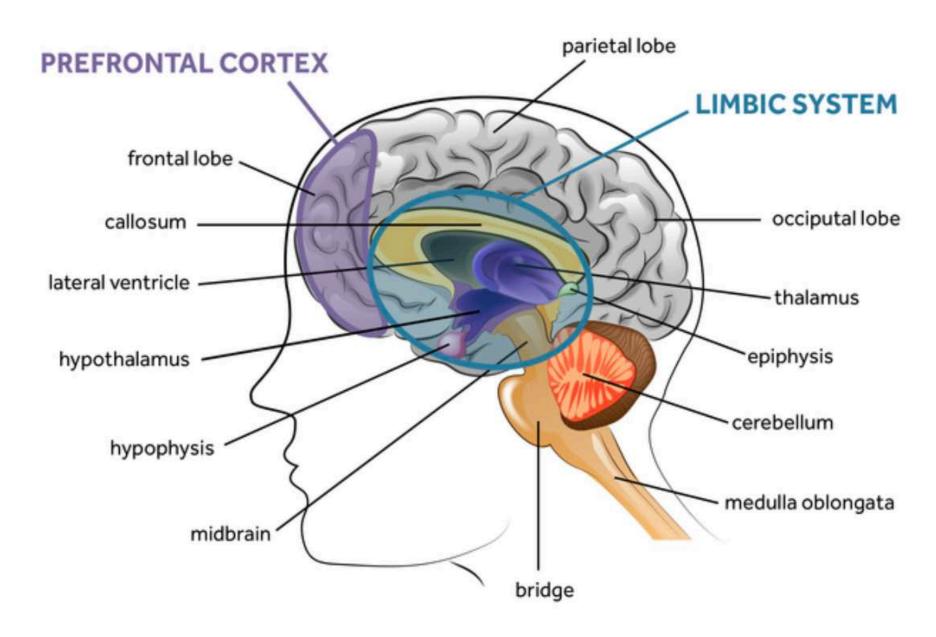


## Key Things to Know

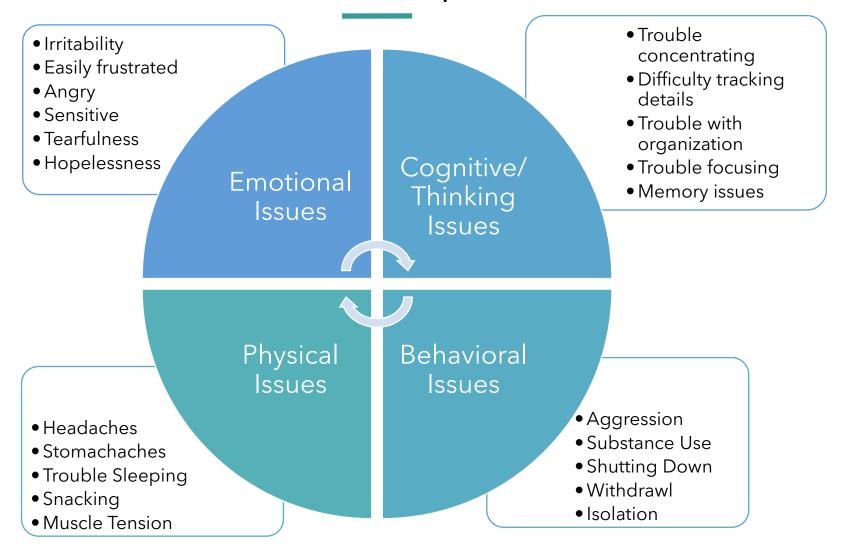
- Three to four million Washingtonians currently are or will likely experience *clinically significant* behavioral health symptoms within the next several months.
  - Depression, anxiety, and acute stress will likely be the most common.
  - Adolescents, teens, young adults, and older adults may need extra support.
- Substance use related challenges are expected to continue.
- Pandemic apathy will drive acting "out" and acting "in."
  - Acting "out": Pretending like the pandemic no longer applies, refusing to comply with regulations, trying to act in a 'business as usual' capacity.
  - Acting "in": Giving up on things getting back to normal, hopelessness and withdrawal, many symptoms consistent with major depressive disorder or depression generally.
- An eventual return to baseline levels of functioning for many people should occur around 14-18 months after the initial outbreak (May–July 2021), given the vaccine distribution timeline as an essential contributor to hope for many.

### Trauma Cascade Potential





## Common Responses



## The Good News

Typical long-term response to disasters is resilience, rather than disorder. Resilience is something that can be intentionally taught, practiced, and developed for people across all groups.

### **Resilience** can be increased by:

- Focusing on developing social connections, big or small.
- Reorienting and developing a sense of purpose.
- Becoming adaptive and psychologically flexible.
- Focusing on hope.

## Active Listening

• Ask openended questions.

Clarify

Reflect

• Summarize what you think you heard.

• Listen with the intent to care, not problem solve.

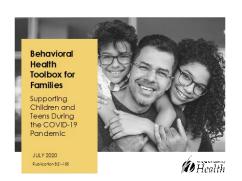
> Express Empathy

### Communication Issues

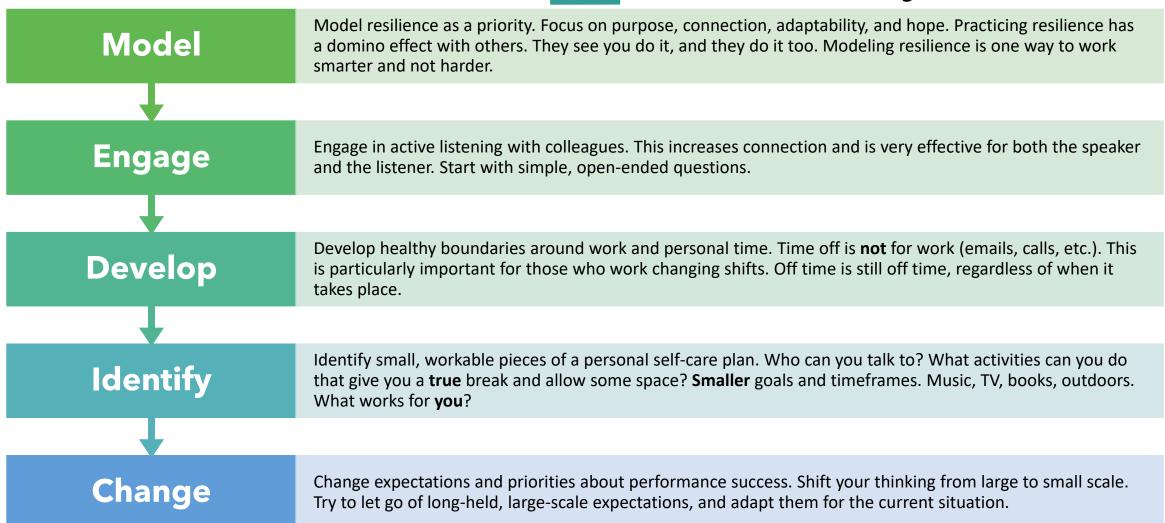
- Remember how our pre-frontal cortex is influenced by stress.
- No one can have a logical problem-solving oriented talk when they are flooded.
- Take extra time to talk.
- Get space from difficult conversations, rather than continuing to push the issue.
- Check in on levels of rest/tiredness before pursuing important conversations.

#### **Zones of Regulation**

Color	Level of Alertness	Feelings
Blue	Low state of alertness	Bored, tired, sad, disappointed, sick, depressed, shy
Green	Perfect state of alertness	Happy, positive, thankful, proud, calm, content, ready to learn
Yellow	Higher state of alertness	Excited, silly, annoyed, worried, embarrassed, confused, nervous
Red	Too much alertness	Upset, angry, aggressive, mad, too excited, terrified, out of control



# What can we **do** that doesn't add **more** work? **MEDIC Model** for Disaster Recovery



# Working with Anger and Hostility: **SAFE Model** for De-Escalation

Many people are expressing distress about the pandemic in an external way. This often manifests itself as anger. In order to de-escalate yourself and others, the **SAFE model** provides key concepts to keep in mind:

S: Self

A: Area Awareness

• F: Feelings

• E: Engagement

## SAFE: Self

- Tune in to yourself.
- Be aware of your own reactions, the tone of voice you use, your body language, and your choice of words.
- Monitor yourself in order to stay calm and to not take the situation personally, even if the words become personal.
- Larger non-verbal messages are particularly important, particularly in the case where PPE (face masks) can interfere with people's ability to pick up on nuances of communication.
- Be aware of the non-verbal things you are 'saying' to the other person.
  Posture and Position are important here.

## SAFE: Area Awareness

- Pay attention to your physical area.
- Notice the space and people around you.
- Your general physical area includes people, exits, (potential) weapons, available help, and other resources.
- Don't position or keep yourself between an angry person and their exit.

## SAFE: Feelings

- Employ active listening techniques to identify what the angry person is feeling <u>underneath</u> the anger.
- Remember that anger is often related to other emotions like fear or sadness. It is easier for most people to direct emotions outwardly than deal with them internally.
- By listening for feelings underneath anger, you can identify the cause of the emotions at the center of the issue.
- It is easier to empathize with someone who is angry when you understand what they may be afraid of or worried about.

## SAFE: Engagement

- If it is safe to do so, connect with the angry person by **engaging** to understand their story. Use active listening.
- Don't dismiss them or their concerns. Identify and engage resources or other people or information that may be able to address or help solve their problem or concern in some way.
- Engage support for yourself when you are in the position of dealing with an angry person or people.
- Don't keep a hostile interaction to yourself. Share it with others to get the support you need after dealing with a difficult person or situation.
- Engage your resources (friends, family, social networks) to increase your resilience.

## Resilience Development

#### Purpose

- What motivates you?
- What contributes to *compassion* rewards?
- What can you remind yourself of to help on a dayto-day basis (don't think too long term or big picture).

#### Connection

- How can you maintain existing connections with others?
- How can you develop new connections?
- Connection can be anything that prevents isolation.

#### **Flexibility and Adaptability**

- How can you be creative in physical distancing while leveraging connection?
- How can you adjust your physical space?
- How can you adapt your schedule to give yourself discreet and clear breaks and boundaries?

#### Hope

- What opportunities may exist where they didn't before?
- What are some surprise or hidden benefits that have come out of recent experiences?
- What examples do you have to shift your thinking from a 'threat' to a 'challenge'?

### Resources

#### **Training:**

- Health Support Team (including train-the-trainer)
- PsySTART-Responder (frontline healthcare only)

#### **Resources:**

- MEDIC, REST, and SAFE models
- Behavioral Health Group Impact Reference Guide
  - Healthcare and behavioral health providers, outreach teams, post critical care individuals, etc.
  - Unique challenges and considerations
  - Support strategies (organizational, supervisory, and personal)
- Children and families: <u>Behavioral Health Toolbox for Families: Supporting Children and Teens</u>
  <u>During the COVID-19 Pandemic</u>
- Emergency and healthcare workers: <u>Coping During COVID-19 for Emergency and Healthcare</u> <u>Professionals</u>
- Businesses and workers: <u>COVID-19 Guidance for Building Resilience in the Workplace</u>
  Washington State Department of Health | 19

## Resources (cont.)

#### Webpages:

DOH – Forecasts, situation reports, guidance, and other resources:

Behavioral Health Resources Webpage

State – General mental health resources and infographics:

- Mental and Emotional Well-being Resources
- Infographic Library

Looking for support? Call Washington Listens at 1-833-681-0211

