

BEHAVIORAL HEALTH IMPACTS OF COVID-19



Trends, Workforce Impacts, & Resources

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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**



**Developing healthy
teams and resilience in
the workplace**

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.

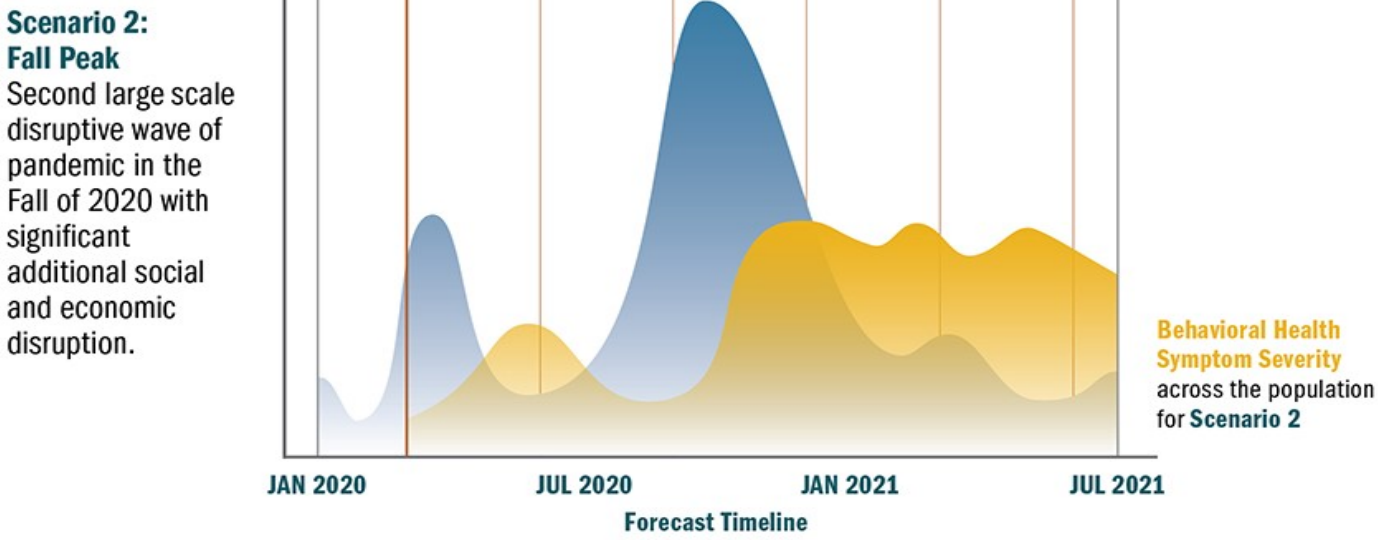
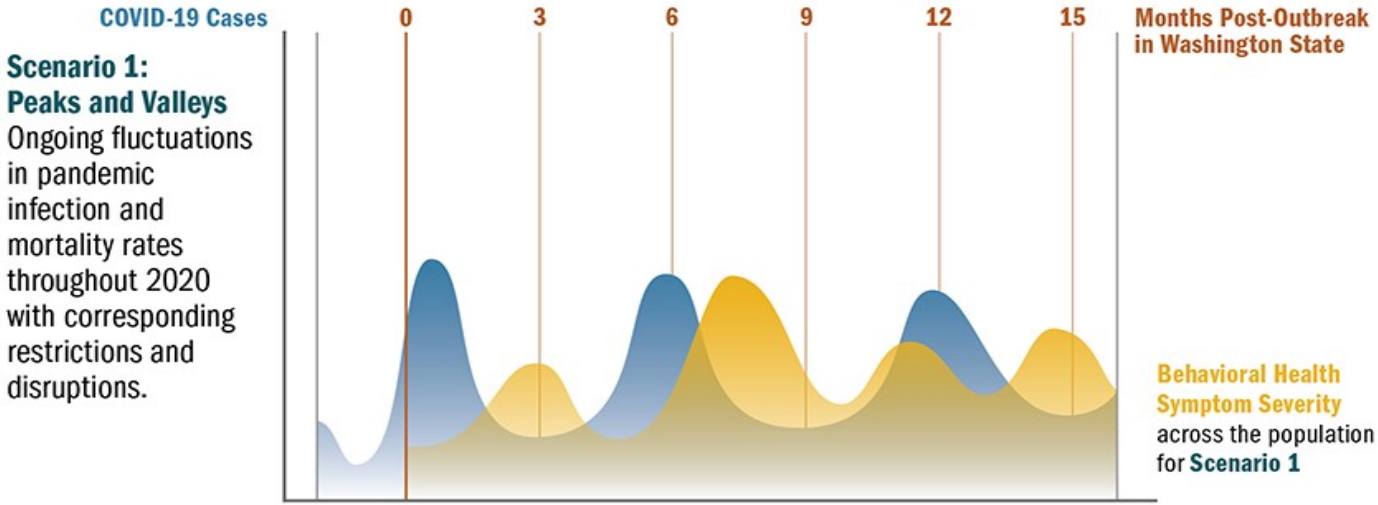
Resilience: The process – involving behaviors, thoughts, and actions – of adapting well in the face of adversity, trauma, tragedy, threats, or significant sources of stress. Can be developed by focusing on connection, purpose, and flexibility /adaptability.

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



Possible Pandemic Wave Scenarios for COVID-19 and Forecasted Behavioral Health Symptoms



Key Things to Know

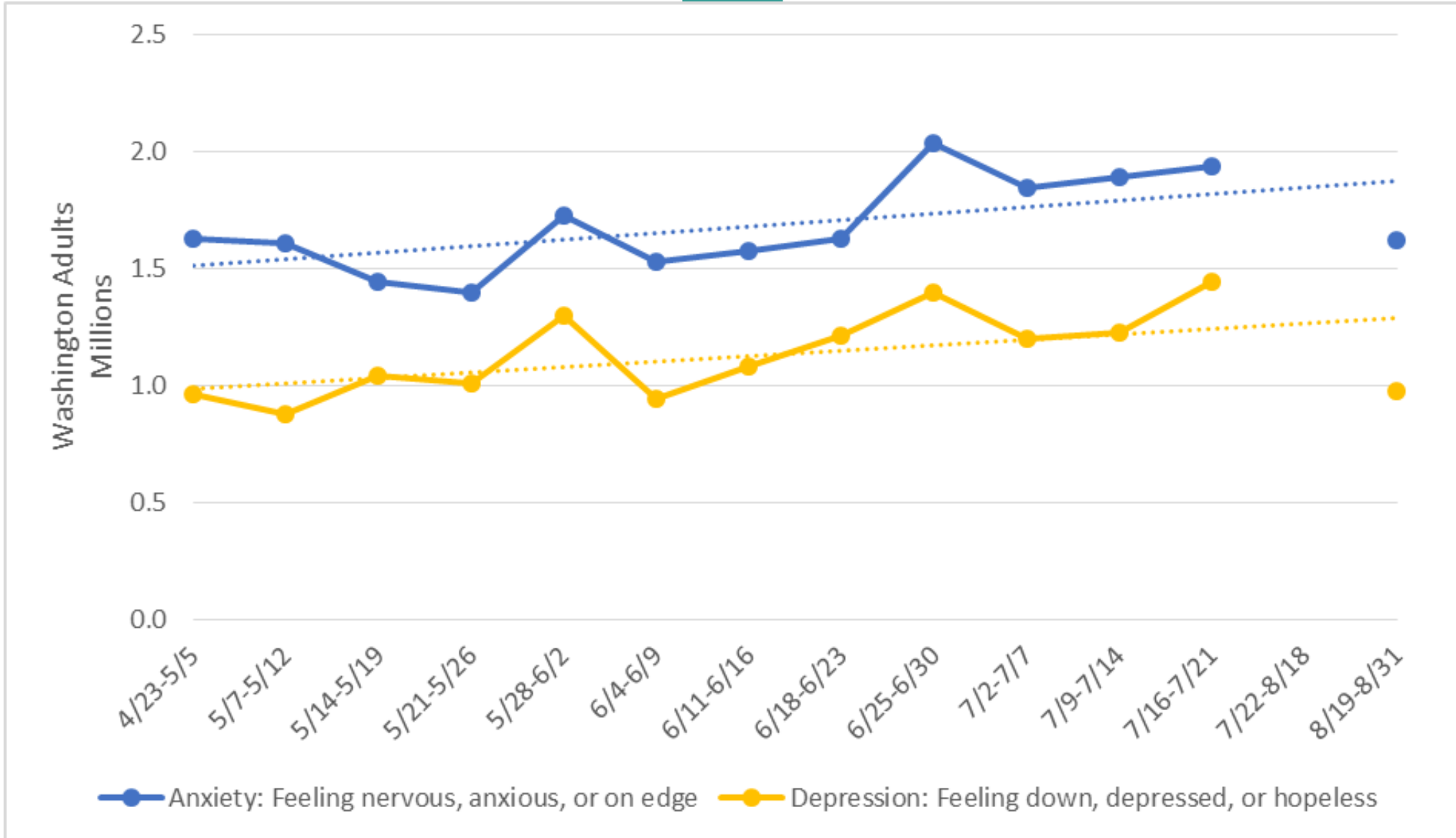
Upwards of **three million** Washingtonians will likely experience *clinically significant* behavioral health symptoms within the next 2-5 months.

- Depression, anxiety, and acute stress will likely be the most common
- PTSD less common, but concern among some populations (post-vent critical care, exposure to traumatic events)
- Significant decrease in depression and anxiety from July, trend likely short-term

Substance use related challenges are expected to significantly increase:

- Roughly 50% of individuals who experience behavioral health diagnoses develop a substance-related disorder, and vice versa
- Most, but not all, are an exacerbation of pre-existing problematic behavior
- 34% increase in abuse cases in first 6 months of 2020, youth aged 13-17 (poison control)

Anxiety, Depression (Census Bureau)



Disillusionment Phase

Can be **uncomfortable and challenging** for individuals and communities:

- Confronted with limitations of disaster assistance and support
- As gap between needs and resources widens, people may feel abandoned
- Also a gap between expectations and reality (eg: schooling, working from home)

Symptoms are like to trend more towards:

- Depression, sadness, grief, or loss as the most common experiences
- **Emotional burnout** likely to be socially disruptive due to length and scope of the pandemic
 - Increased by economic pressures and divisions among people and groups
- **Exception:** Severe disease activity, trauma cascade would likely shift behavioral health symptoms

The Disaster / Trauma Cascade

“... a situation in which parts of the disaster recovery cycle can be repeated or prolonged, during which people may have reduced ability to emotionally recover...”

Including: Wildfires, community outbreaks, social/civil unrest, individual’s life events, and more

What is the potential impact?

- Restarting the disaster cycle, but at a lower baseline
- Prolonged Disillusionment Phase
- Reduced emotional capacity, ability to recover
- Behavioral health symptoms: moderate to severe symptoms of acute stress which has the potential to result in PTSD and/or major depressive disorder

Recovery vs Return to Baseline

An eventual return to baseline levels of functioning for many people should occur around 14 months after the initial outbreak

- Assuming rates of infection do not significantly increase, and
- A sense of a “new normal” is underway

-OR-

If COVID-19 cases dramatically increase in the fall months, **one of the major outcomes will likely be a trauma cascade**

- Disaster recovery cycle can either be repeated or prolonged
- Reduced ability to emotionally recover due to additional/ongoing impacts
- Other impacts (economic, social) will also play a role

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 age groups.

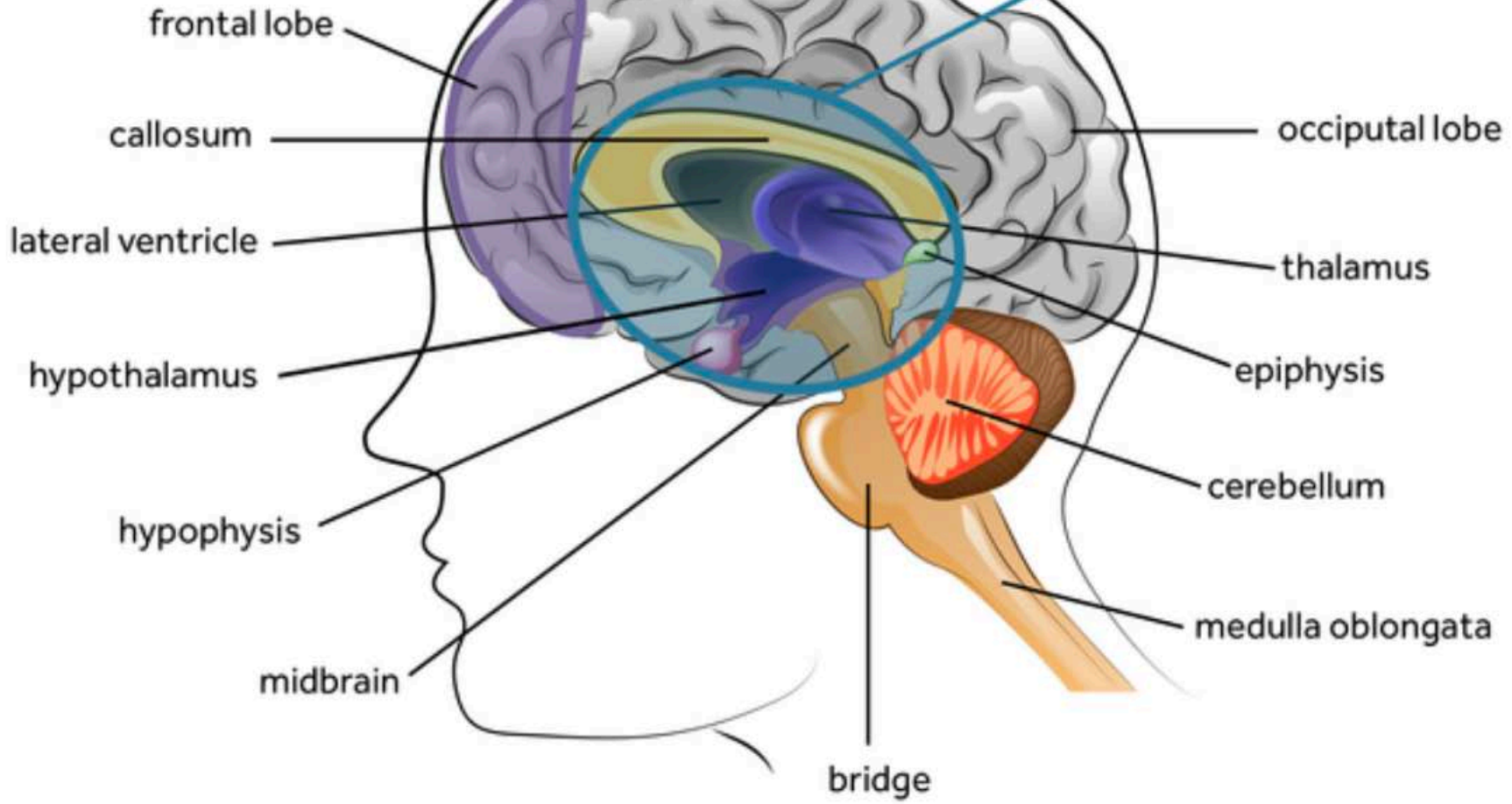
Resilience can be increased by:

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

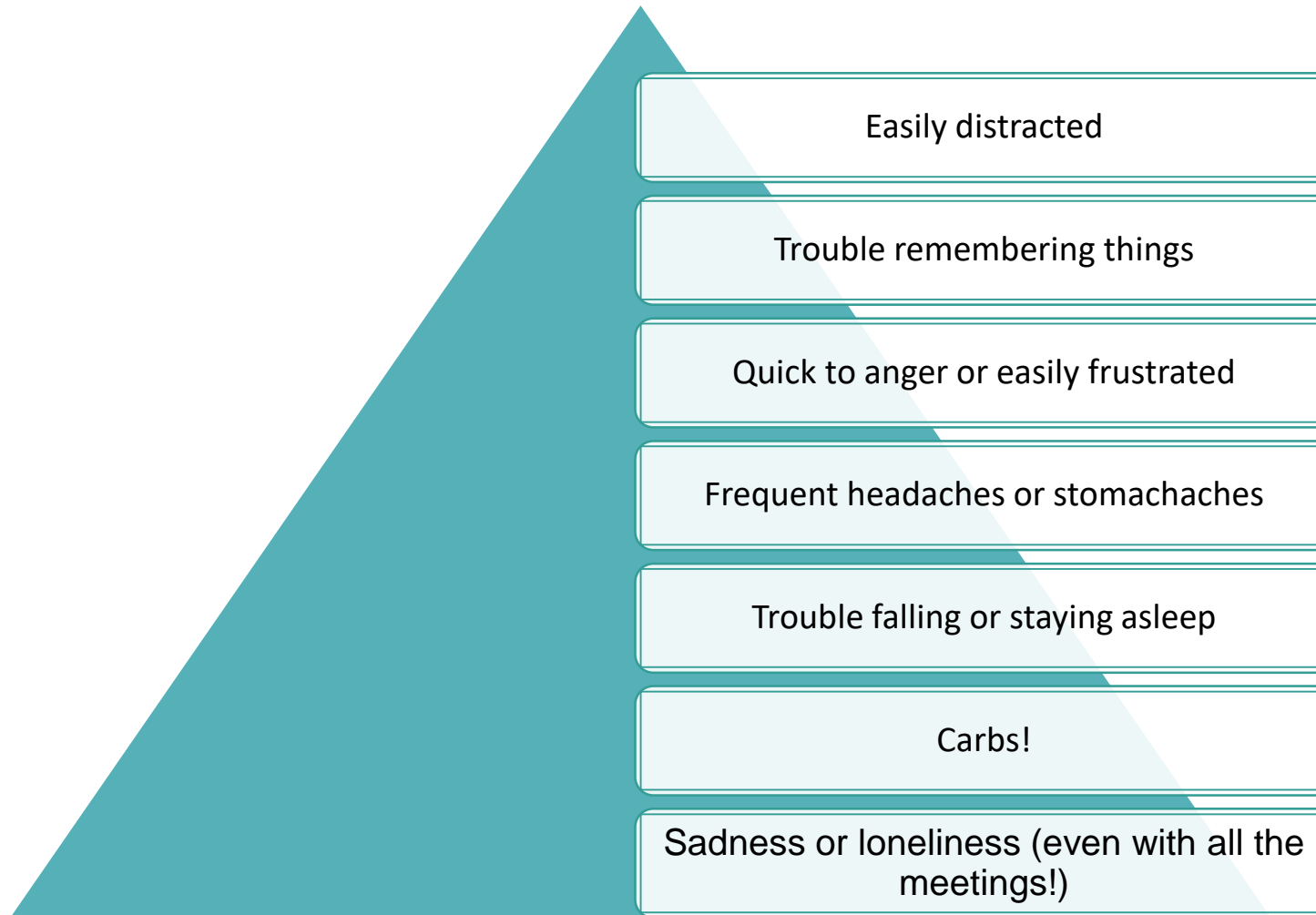
PREFRONTAL CORTEX

parietal lobe

LIMBIC SYSTEM



Common Experiences in the Disillusionment Phase:



Information that normalizes the shared experience helps people develop resilience.

Stressed Brains in the Workplace

- Potential for increased emotional responses:
 - Anger
 - Fear
 - Frustration
 - Less higher-level thinking capacity

Compassion Fatigue and Job Burnout

Burnout can lead to many harmful consequences, including changes in the way people view themselves, their world, their meaning or purpose, and the future.

Even the most resilient and well-balanced people can suffer emotionally and physically when they fail to take care of their own needs.

Compassion Fatigue And Job Burnout

1. Burnout can lead to many harmful consequences, including changes in the way people view:
 - a. Themselves
 - b. Their environment
 - c. Their world
 - d. Their meaning or purpose and
 - e. The future
2. Other workplace factors that contribute to burnout include:
 - a. When people don't (or aren't able to) process the emotional rewards from their work.
 - b. Work where there may be few *compassion rewards* (The work regularly feels more challenging or draining than rewarding).
 - c. Too few resources and too much personal demand to meet perceived needs or asks.

Opportunities for Supervisors & Managers

- **Walk the Walk:** What is DONE is what matters, not what people are told to do.
- Be honest and open in the communication process.
 - If you don't know, tell your team you don't know.
- **Active Listening** is something that all team members can benefit from learning and practicing.
 - Listen with the intention of understanding and caring, NOT to problem solve.

What can we do to reduce burnout generally?



Develop Resilience: Connection, Purpose, Flexibility / Adaptability and Hope.



Reminding yourself of things that motivate you to increase your sense of purpose and redefine that as you need to when things change, as well as the successes you are having.



Maintaining and enhancing interpersonal boundaries: Know your limits. Say no to tasks that will take away from your work-life balance. Ask others to help when reaching limits.



Connect with people outside of work or socially within work.

Resilience



Internal Strengths

- Cooperation and communication
- Problem solving
- Self-awareness
- Empathy
- Self-efficacy
- Goals and aspirations



External Resources

- What has worked well for you in the past?
- Why did that work well?
- What resources are still needed?

Resilience Development

Purpose



- What motivates you?
- What contributes to *compassion rewards*?
- What can you remind yourself of to help on a day-to-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.**

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?

Operationalizing Resilience

What ideas come to mind for helping your team members (or yourself) develop the characteristics of resilience?

- Purpose
- Connection
- Flexibility / Adaptability
- Hope

- Break out rooms

Practice the **REST** Model

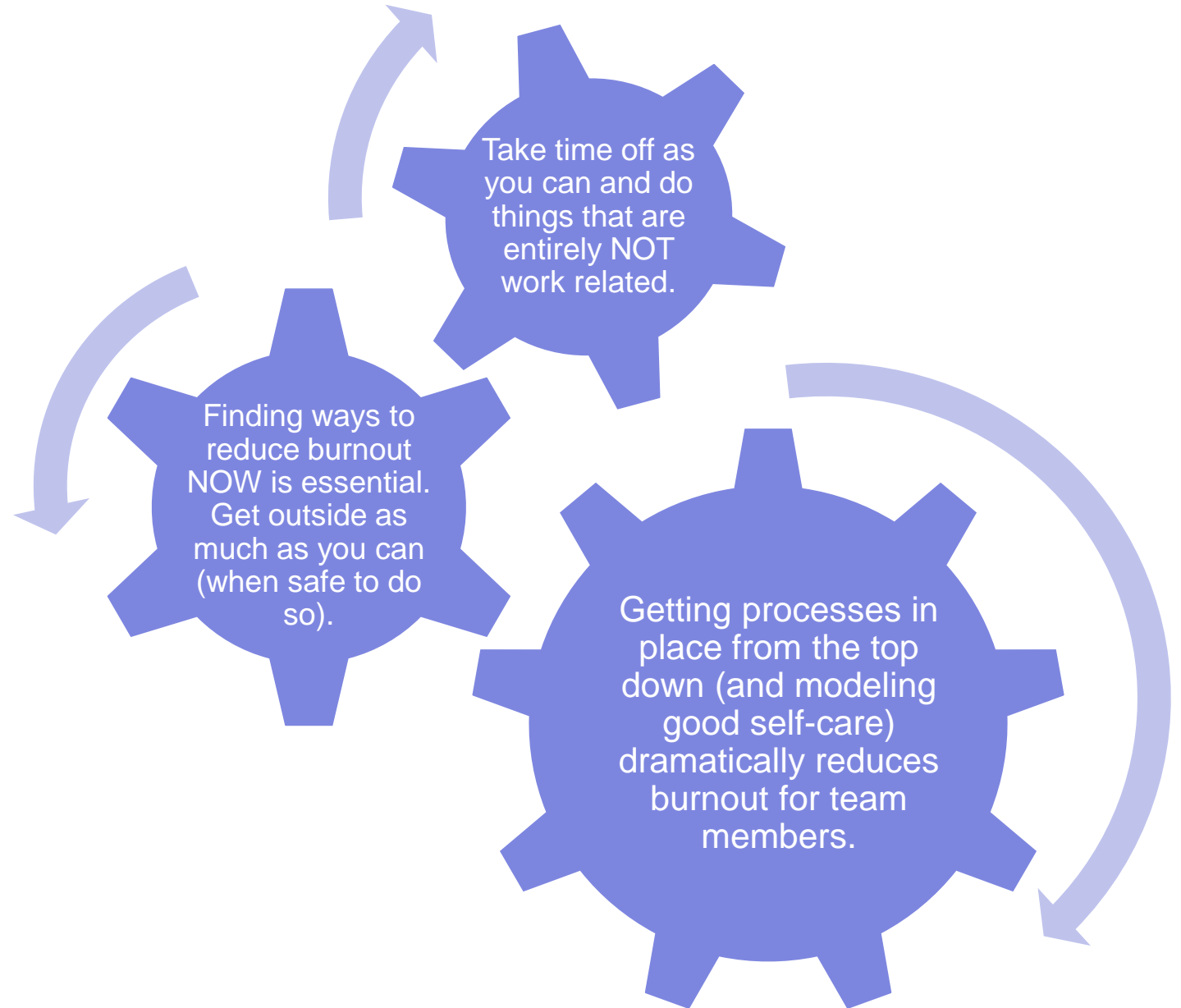
Reward: Reward yourself for a job well done. Build reinforcements into your work. Help pay attention to this aspect for maintaining resilience.

Establish: Establish healthy boundaries. When you are off duty, stick to that boundary.

Share: Share your feelings, concerns, and stories. Participate in support and consultation groups. Make time for connections and activities in your life.

Trust: Trust your support network and reach out as needed. Refer people elsewhere if you are too tired or compromised emotionally to be able to offer support.

**Taking care of yourself
takes care of the team and
the organization.**



Resources

Training:

Health Support Team (including train-the-trainer)

PsySTART-Responder (frontline healthcare only)

Specific Resources:

[Behavioral Health Group Impact Reference Guide](#)

- Healthcare, behavioral health, outreach teams, post-vent
- Unique challenges/considerations
- Support strategies (organizational, supervisory, personal)

Family toolbox:

[Supporting Children and Teens During the COVID-19 Pandemic](#)

Emergency and healthcare workers:

[Coping During COVID-19 for Emergency and Healthcare Professionals](#)

Businesses and workers:

[COVID-19 Guidance for building resilience in the workplace](#)

Resources:

DOH - Forecast and situation reports, guidance, and resources:

<https://www.doh.wa.gov/Emergencies/NovelCoronavirusOutbreak2020COVID19/HealthcareProviders/BehavioralHealthResources>

State – General mental health resources:

<https://coronavirus.wa.gov/information-for/you-and-your-family/mental-and-emotional-well-being>

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

