

BEHAVIORAL HEALTH IMPACTS OF COVID-19



## **Trends, Workforce Impacts, & Resources**

**Behavioral Health Strike Team**

# Agenda

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**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

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**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.

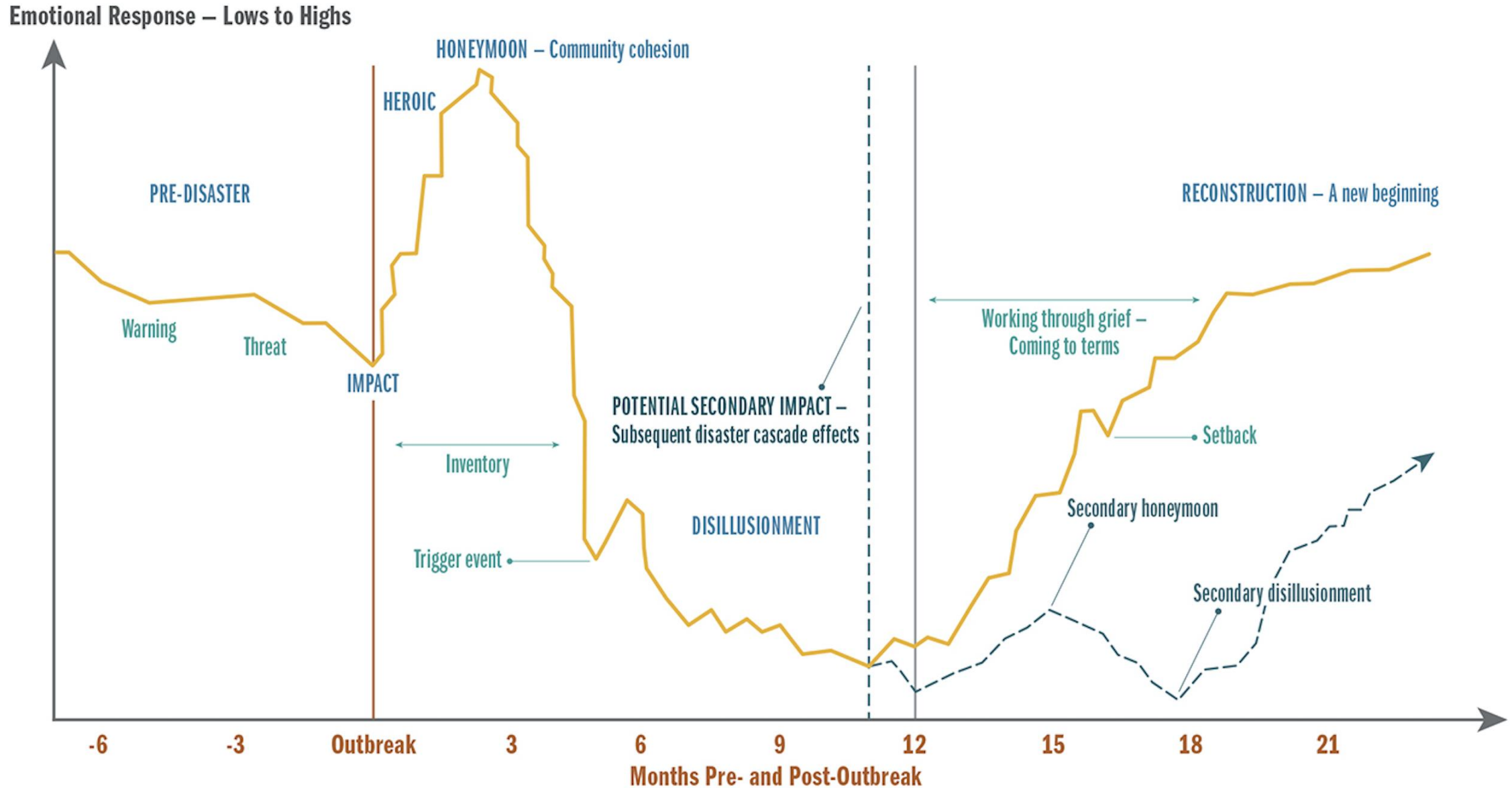
**Compassion fatigue:** Emotional and physical exhaustion leading to a diminished ability to empathize or feel compassion for others, also described as secondary traumatic stress.

**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

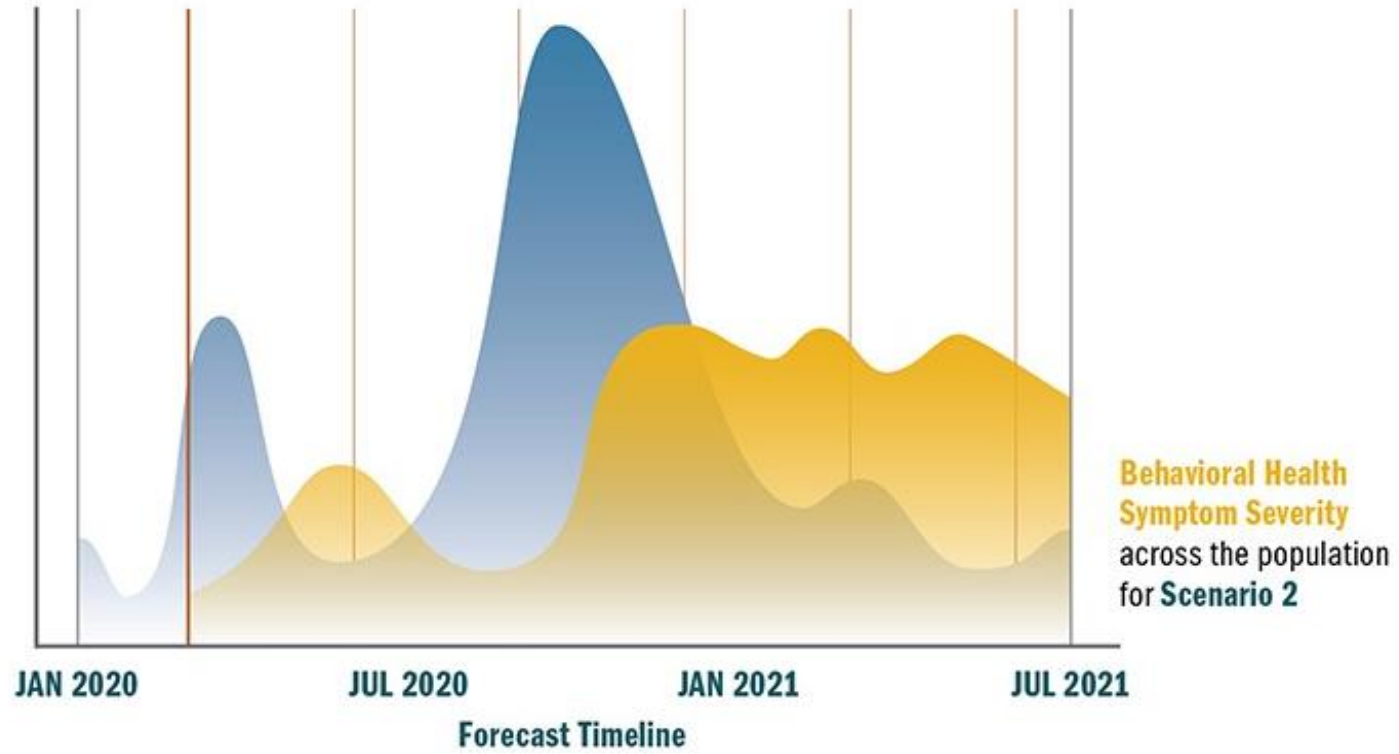
**Resilience:** The process – involving behaviors, thoughts, and actions – of adapting well in the face of adversity, trauma, tragedy, threats, or significant sources of stress. Can be developed by focusing on connection, purpose, and flexibility /adaptability.

**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



**Scenario 2:  
Fall Peak**  
Second large scale  
disruptive wave of  
pandemic in the  
Fall of 2020 with  
significant  
additional social  
and economic  
disruption.



## 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
- This number may increase dramatically depending on disease spread
- Overlay of stressors: COVID, flu, holidays, Seasonal Affective Disorder, elections, etc.

### **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 for youth aged 13-17
- Increases in medication errors and accidental misuse for adults over 60

# Key Things to Know

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## **Violence and aggression will likely increase** due to pandemic impacts

- Extreme and/or chronic stressors can leave individuals feeling powerless/loss of control
- “Acting-in” or “Acting-out” will subsequently increase, including both self-harm and interpersonal violence
- Increase in domestic violence compared to 2019, child abuse also likely increasing

## **Behavioral health impacts will likely be seen in phases**, typically peaking 6-9 months post-outbreak- ***current data suggest an extended disillusionment phase for COVID pandemic.***

- Follows the psychological phases of disaster, varies based on start of outbreak and mitigation activities within a community
- *Normal* reaction to *abnormal* circumstances
- Disease activity in the winter will be a strong predictor of behavioral health symptoms well into the spring/summer

# Burnout, Compassion Fatigue, Moral Injury, & Exhaustion

## **Workplace burnout and similar phenomena continues to increase overtime**

- Compounded by other factors such as mental health stigma, PPE access, and added work
- Burnout - exhaustion of body and mind, unequal balance of demands and resources
- Compassion Fatigue- emotional/physical tiredness, less ability to empathize
- Moral Injury- Strong feelings of guilt, shame, or anger due to not being able to provide the kind of care or service they want and expect to provide

## **General fatigue, exhaustion, and feeling overwhelmed are common experiences:**

- Sleep problems, diminished cognitive and high-level thinking, and increased impacts of existing behavioral health symptoms such as depression, anxiety, or trauma
- Organizations should address staff wellness and resilience: make it a priority and model it
- Practicing self-care, building personal coping/resilience plans, and rest is key for individuals



# Recovery vs Return to Baseline

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**An eventual return to baseline levels of functioning** for many people should occur around 14-18 months after the initial outbreak

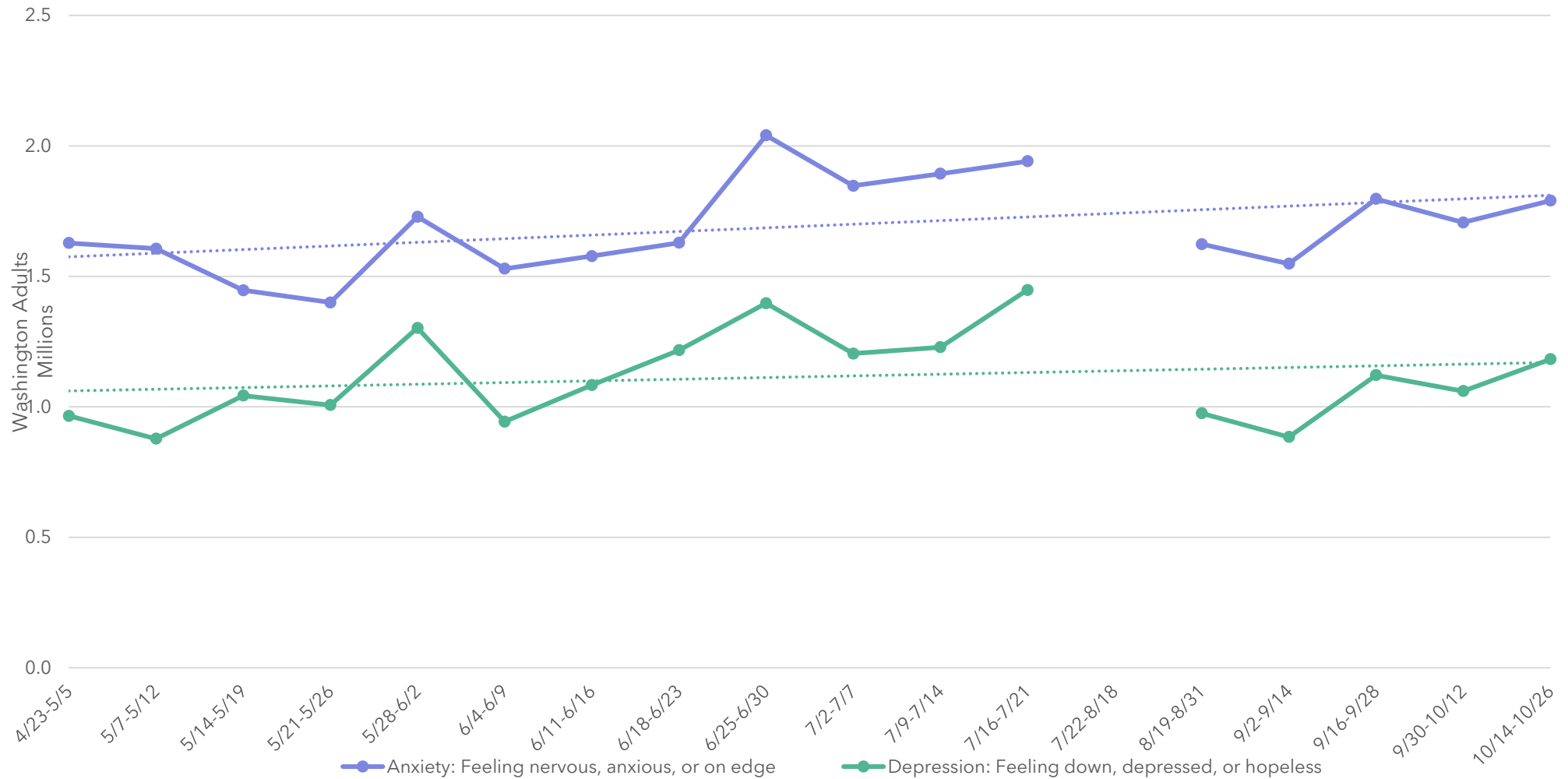
- Assuming rates of infection do not continue to significantly increase, and
- A sense of a “new normal” is underway

**-OR-**

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

- Reduced ability to emotionally recover due to additional/ongoing impacts
  - Longer recovery to baseline, impacts lasting longer
  - Shift in symptoms: Increase in anxiety and PTSD more likely
- Other impacts (economic, social) will also play a role

# Anxiety, Depression (Census Bureau)



# The Good News

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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.

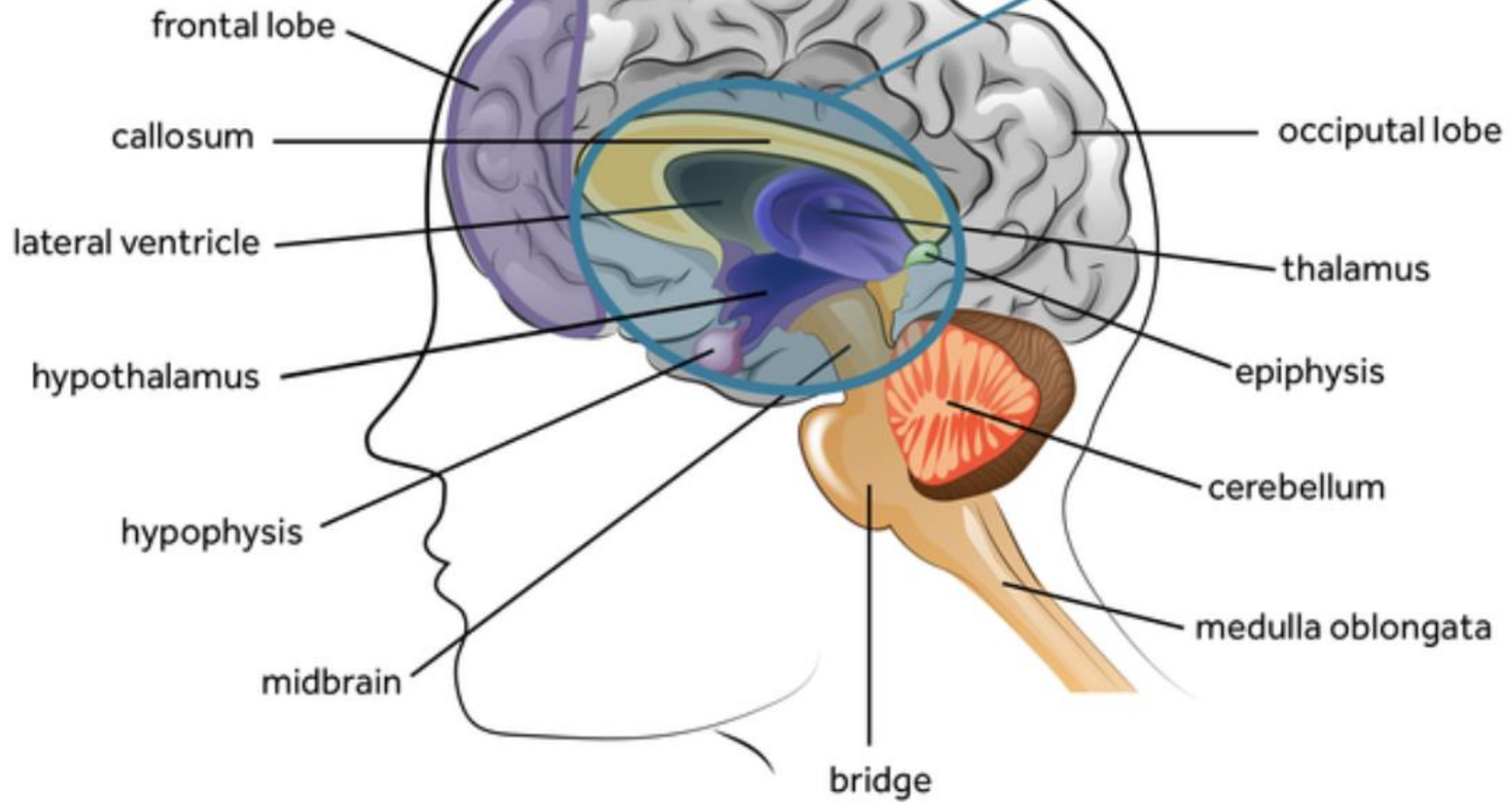
Resilience can be increased by:

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

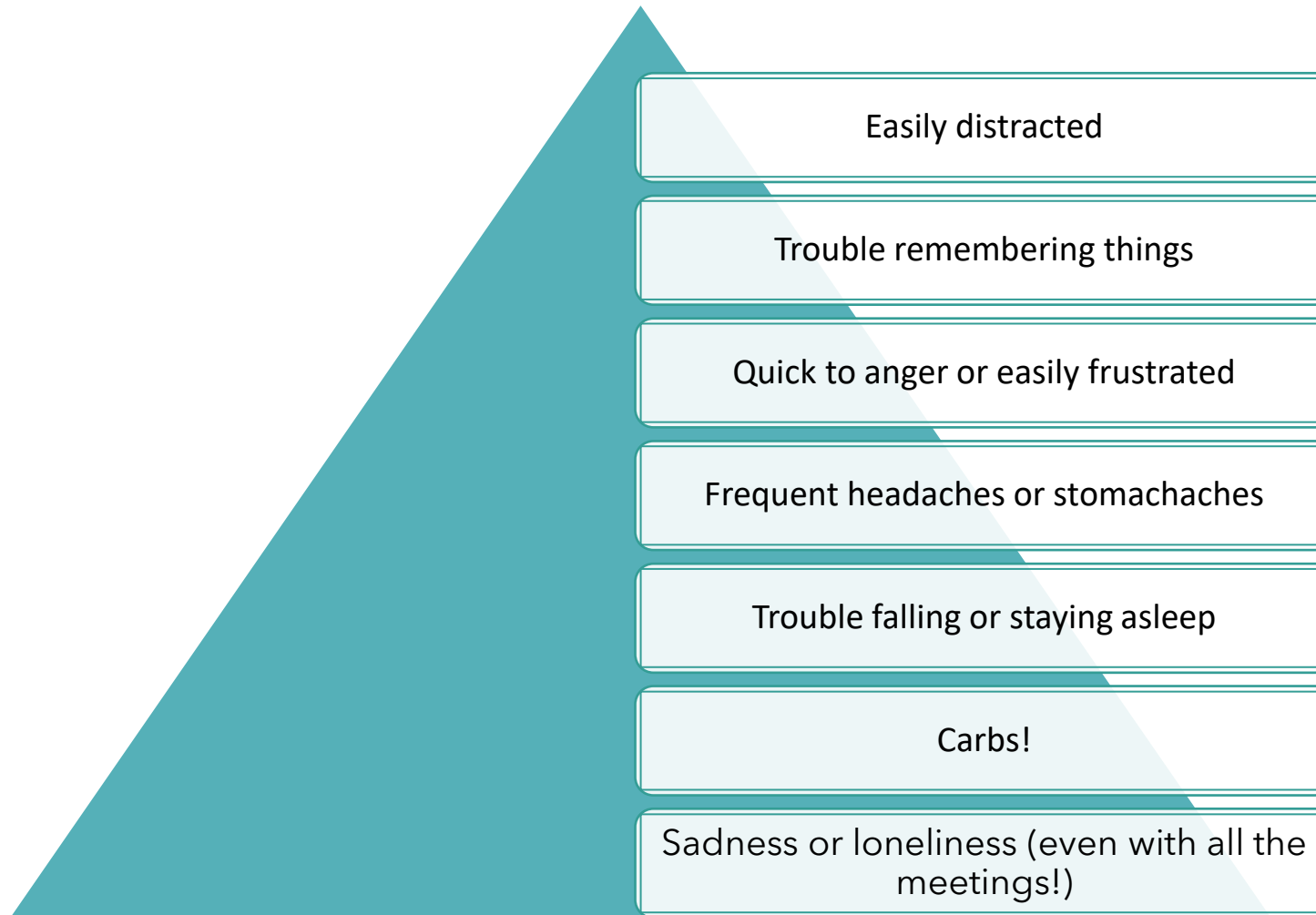
## PREFRONTAL CORTEX

parietal lobe

## LIMBIC SYSTEM



## Common Experiences right now:



**Information that normalizes the shared experience helps people develop resilience.**

# Stressed Brains in the Workplace

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

# Compassion Fatigue And Job Burnout

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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

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- **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?

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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

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## **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

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## 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?

## Practice the **REST** Model

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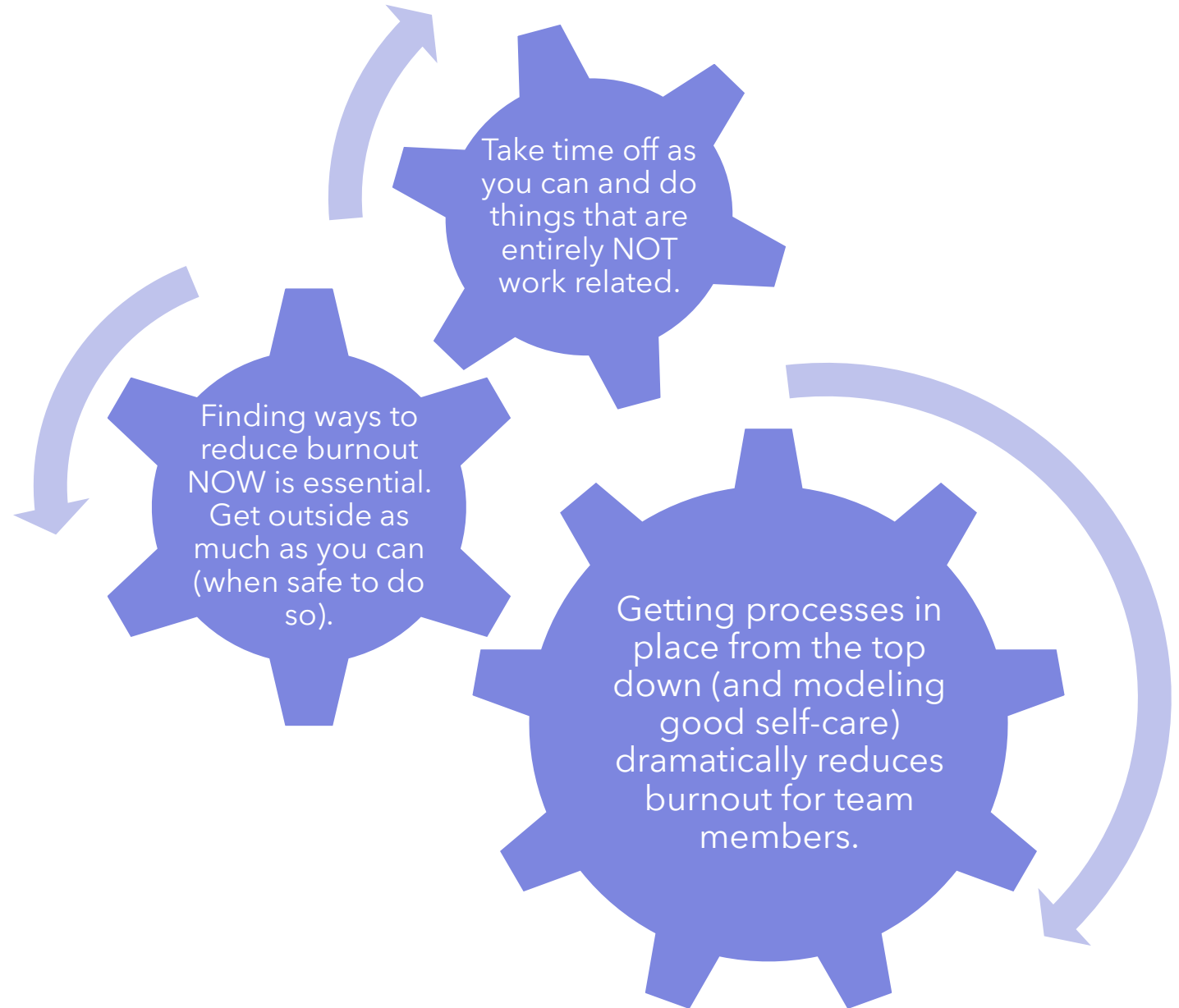
**Reward:** Reward yourself for a job well done. Build reinforcements into your work. Help pay attention to this aspect for maintaining resilience.

**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

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## **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:

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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

