

Protecting Mental Health and Promoting Recovery in COVID-19 & Beyond

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National Advisory Council National Health Service Corps*

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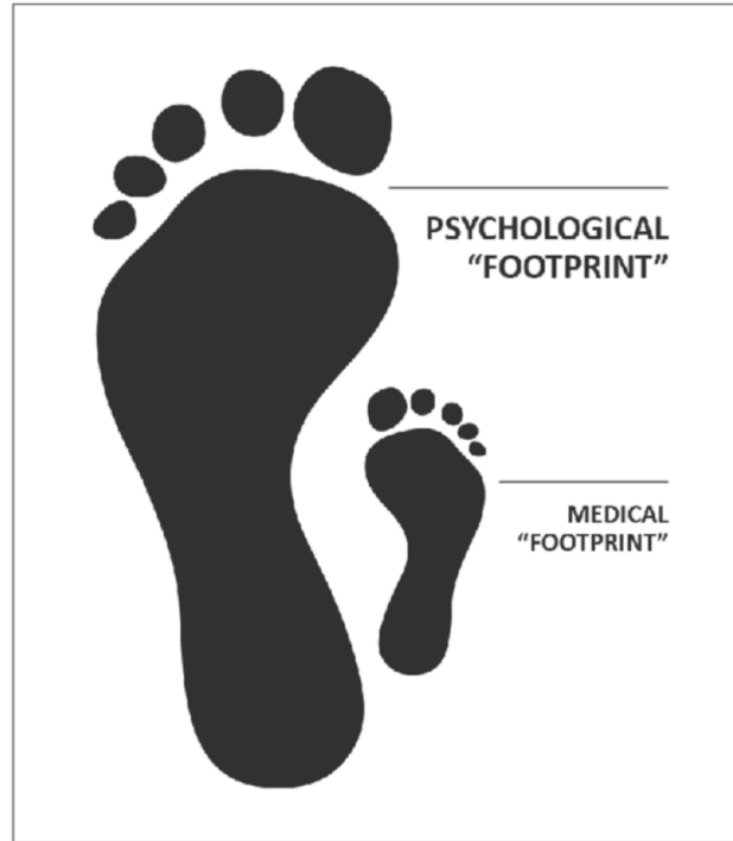
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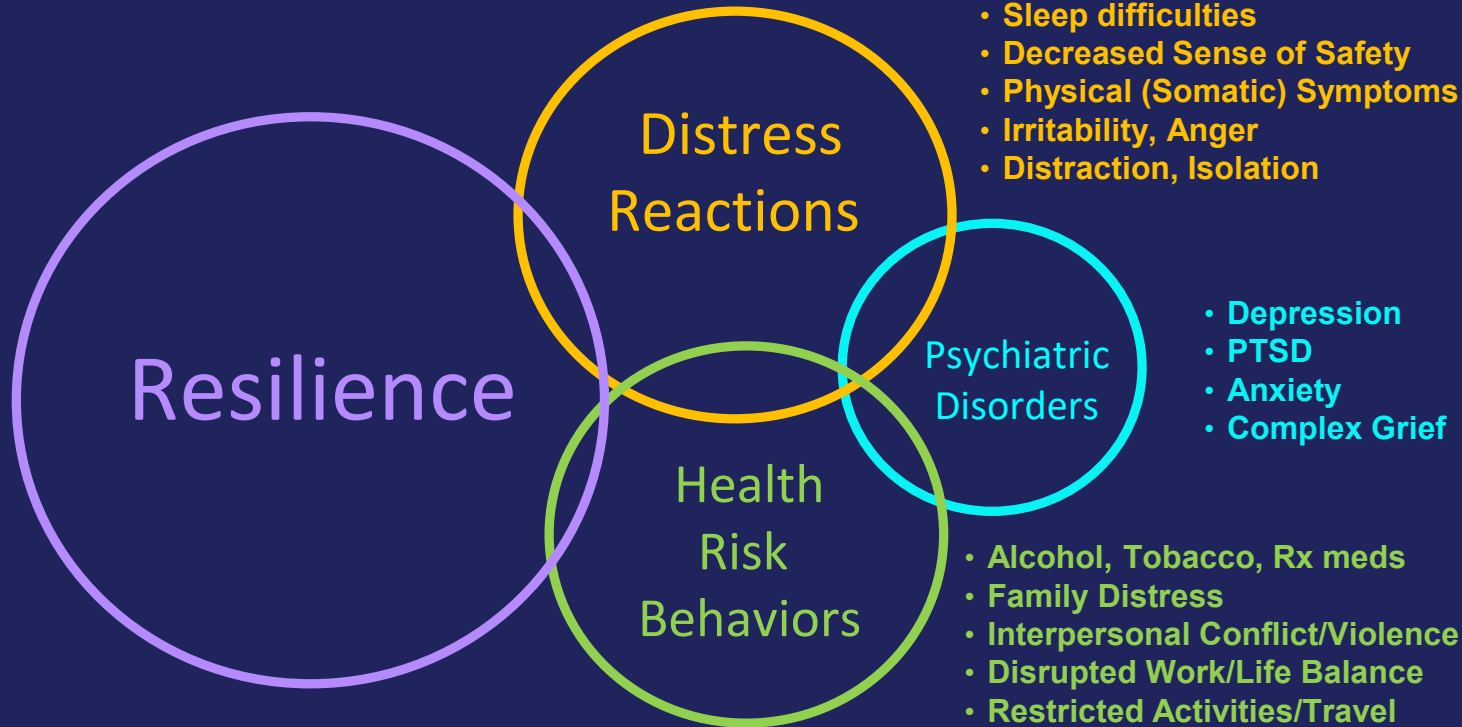
Disclaimer

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**In a disaster,
the size of the
psychological
“footprint”
greatly
exceeds the
size of the
medical
“footprint.”**



Psychological & Behavioral Responses to Pandemics & Disasters

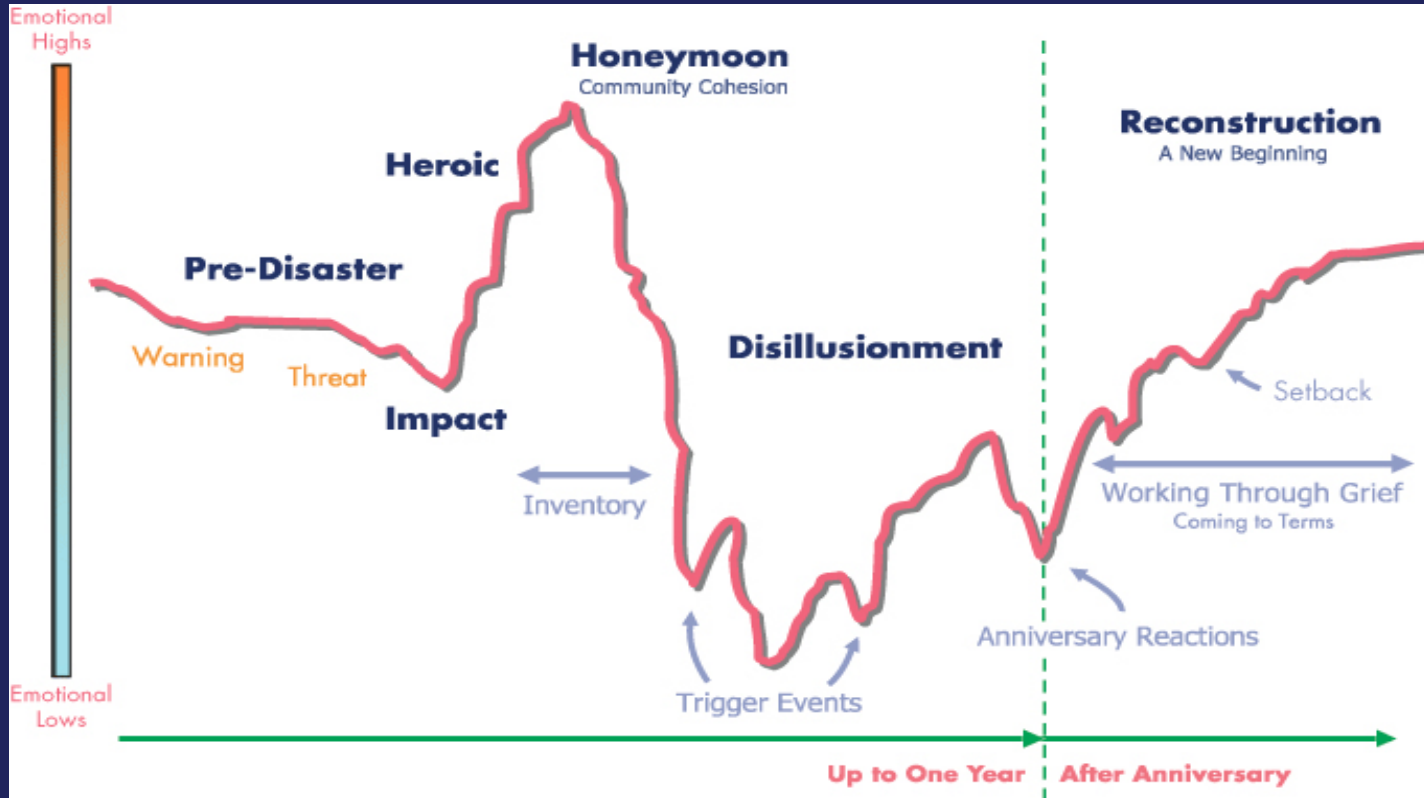


Stress Continuum

READY	REACTING	INJURED	ILL
<p>DEFINITION</p> <ul style="list-style-type: none"> • Adaptive coping • Effective functioning • Well-being <p>FEATURES</p> <ul style="list-style-type: none"> • In control • Calm and steady • Getting the job done • Playing • Sense of humor • Sleeping enough • Ethical and moral behavior 	<p>DEFINITION</p> <ul style="list-style-type: none"> • Mild and transient distress or loss of function <p>FEATURES</p> <ul style="list-style-type: none"> • Anxious • Irritable, angry • Worrying • Cutting corners • Poor sleep • Poor mental focus • Social isolation • Too loud and hyperactive 	<p>DEFINITION</p> <ul style="list-style-type: none"> • More severe and persistent distress or loss of function <p>TYPES</p> <ul style="list-style-type: none"> • Trauma • Fatigue • Grief • Moral injury <p>FEATURES</p> <ul style="list-style-type: none"> • Loss of control • Can't sleep • Panic or rage • Apathy • Shame or guilt 	<p>DEFINITION</p> <ul style="list-style-type: none"> • Clinical mental disorders • Unhealed stress injuries <p>TYPES</p> <ul style="list-style-type: none"> • PTSD • Depression • Anxiety • Substance abuse <p>FEATURES</p> <ul style="list-style-type: none"> • Symptoms persist > 60 days after return from deployment
<p>Self Help</p>	<p>Leadership/Organizational Support Peer Support</p>		<p>Screening/Referral</p>



Organizational / Community Phases



Who is at Risk?



Morganstein, J. C., West, J. C., & Ursano, R. J. (2019). Work-Associated Trauma. In M. B. Riba, S. V. Parikh, & J. F. Greden (Eds.), *Mental Health in the Workplace* (pp. 161–180). Springer International Publishing.

Norris, F. H., Friedman, M. J., Watson, P. J., Byrne, C. M., Diaz, E., & Kaniasty, K. (2002). 60,000 disaster victims speak: Part I. An empirical review of the empirical literature, 1981-2001. *Psychiatry*, 65(3), 207–239.

Somasundaram and van de Put (2006). Management of Trauma in Special Populations after a Disaster. *J Clin Psychiatry*;67(suppl 2):64-73

Look for strengths/resilience in everyone...

Substance Use,
Family Conflict,
Social Isolation

Time w/ Family,
Connect w/ Neighbors,
Self-Reliance

HOME
BOUND
DURING COVID-19

Healthcare Worker Sustainment



ORGANIZATIONS

INDIVIDUALS

Self-care
Take Breaks
Peer Buddies
Stay Connected
Self Check-ins
Honor Service
Speak Up

Training
Equipment
Education
Policies
Procedures
Resources

LEADERS

Presence
Communication
Encouragement
Be an example
Normalizing
Hope/optimism
Grief

Brooks, S. K., Dunn, R., Amlôt, R., Rubin, G. J., & Greenberg, N. (2018). A Systematic, Thematic Review of Social and Occupational Factors Associated With Psychological Outcomes in Healthcare Employees During an Infectious Disease Outbreak. *Journal of Occupational and Environmental Medicine / American College of Occupational and Environmental Medicine*, 60(3), 248–257.

Birkeland, M. S., Nielsen, M. B., Knardahl, S., & Heir, T. (2015). Time-lagged relationships between leadership behaviors and psychological distress after a workplace terrorist attack. *International Archives of Occupational and Environmental Health*.

Wood, M. D., Walker, T., Adler, A. B., Science, C. C. O. H., & Jahangiri, K. (2020). Post-Traumatic Growth Leadership: Mitigating Stress in a High-Risk Occupation. *Occupational Health Science*.

Resources

<https://www.acponline.org/practice-resources/physician-well-being-and-professional-fulfillment/im-emotional-support-hub>

Physician Well-being and Professional Fulfillment

HOME > PRACTICE RESOURCES > PHYSICIAN WELL-BEING AND PROFESSIONAL FULFILLMENT > I.M. EMOTIONAL SUPPORT HUB

I.M. Emotional Support Hub

It's common right now to feel overwhelmed, stressed, or depressed.

Taking care of ourselves and encouraging others to practice self-care sustains our ability to care for those in need.

Protect your health and well-being by connecting with easily-accessible peer support through the [Physician Support Line](#), and affordable, confidential counseling is available through The Emotional PPE Project and The Therapy Aid Coalition.



If you or someone you know is in crisis, help is available 24/7. Text 741741 or call the National Suicide Prevention Lifeline (1-800-273-8255) or Disaster Distress Hotline (1-800-985-5990).

Anonymously let your organization know how they're doing

Track your wellness with a 5-minute set of weekly surveys

Access mental health resources specific to your organization

TRAINING SLIDES & MATERIALS:

<https://www.gnyha.org/program/hero-ny/>



HERO-NY

HEALING, EDUCATION, RESILIENCE & OPPORTUNITY FOR NEW YORK'S FRONTLINE WORKERS

<https://heroeshealth.unc.edu/>

CSTS Center for the Study of Traumatic Stress

CSST/Department of Psychology/Infectious Disease Immunology | 6851 Hero Highway Road, Durham, NC 27843-4799 | www.CSTSDurham.org

MANAGING THE STRESS OF RETURNING TO WORK AFTER COVID-19: A Guide for Supervisors

The COVID-19 pandemic has required physical distancing, which altered many aspects of personal and occupational life, including reduced in-person work. A shift in remote work has also changed how workers manage daily routines, develop work goals, perform tasks, and interact with one another.

Evening some workers look forward to face-to-face interactions with co-workers and supervisors, others are likely to feel reluctant.

- Encourage Healthy Boundaries – Encourage employees to go regular and adequate sleep and nutritious meals, and engage in daily physical activity.
- Develop Goals – Review how best to align workers' short- and long-term goals with in-person activities.
- Encourage Connections – Help workers connect regularly with each other to provide peer support, help with problem solving, and build team connections.
- Investigate Breaks – Reassess needed workers' take regular breaks and, whenever possible, go outside to get exposure to fresh air and daylight.
- Communicate about Schedules – Regularly send clear messages to workers about how the workplace is meeting up to date and complying with health and safety guidelines.
- Manage Uncertainty – Help workers understand that information about COVID-19 and return to work is likely to evolve and a small knowledge will continually adjust practices and procedures to optimize the work environment.
- Facilitate Growth – Model for workers how best to apply their skills and ongoing strategies as they return to work, and encourage their successful practices.

- Help to Prepare for in-Person Work
 - Minimize Concerns – Be prepared to offer additional assistance and support to workers who do not feel comfortable returning to work.
 - Include Personnel – Ask workers about challenges of returning to work and potential solutions; individual conversations, group discussions, and surveys are all helpful.
 - Address Challenges – Help workers plan how best to take care of family needs (e.g., vulnerable family members, child care needs, and pets).
 - Reduce Barriers – Assist their transition back to in-person work by reviewing and modifying policies and procedures that impact worker well-being and productivity.
 - Be Considerate – Consider practices that balance the mutual strengths of virtual and in-person work to create strategies that are positive for workers, as well as the organization.

<https://www.cstsonline.org/resources/resource-master-list/coronavirus-and-emerging-infectious-disease-outbreaks-response>

THANK YOU