

BEHAVIORAL HEALTH IMPACTS OF COVID-19



Trends, Workforce Impacts, & Resources

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Agenda



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



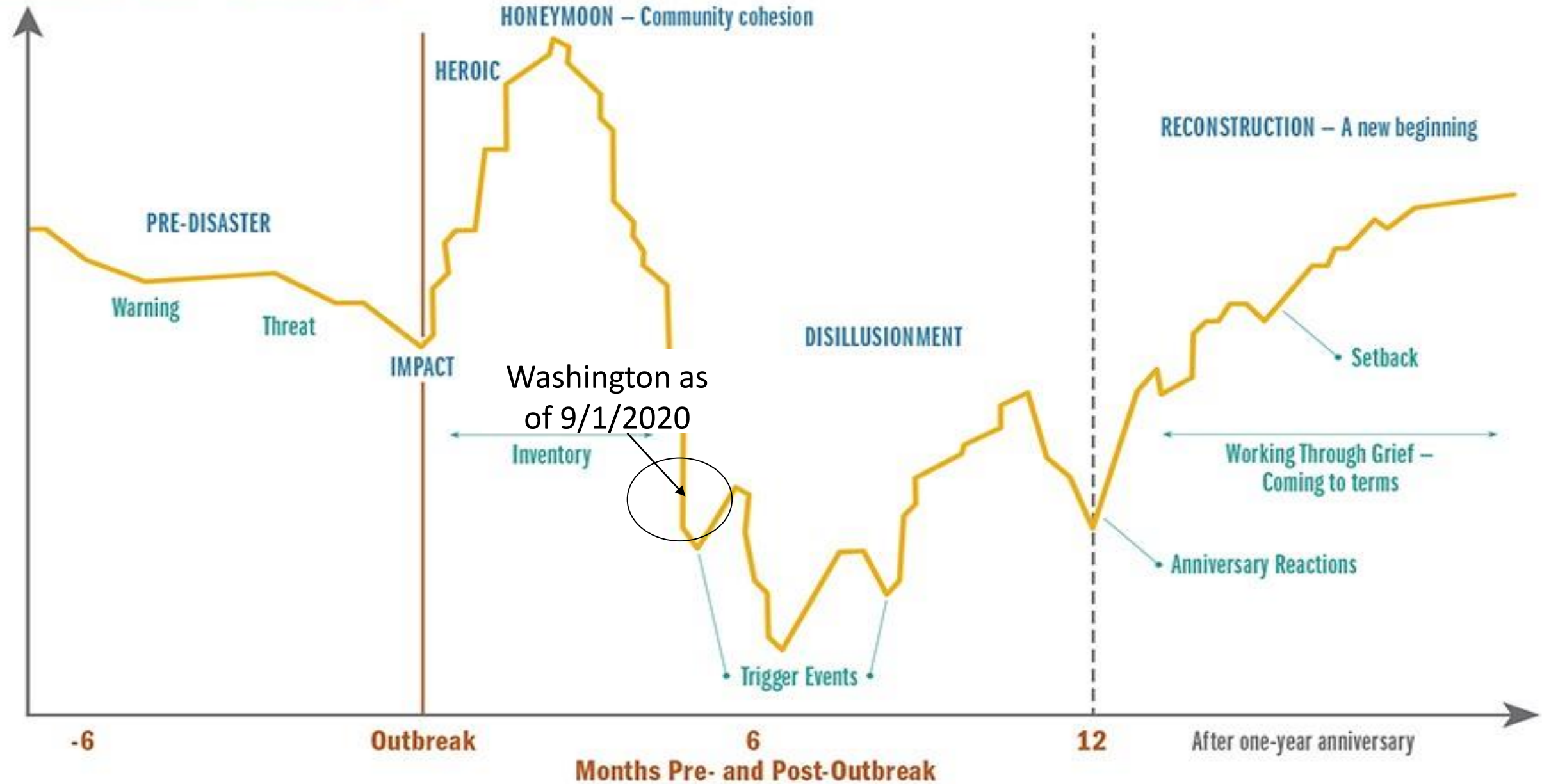
**Understanding impacts to
you and your teams**



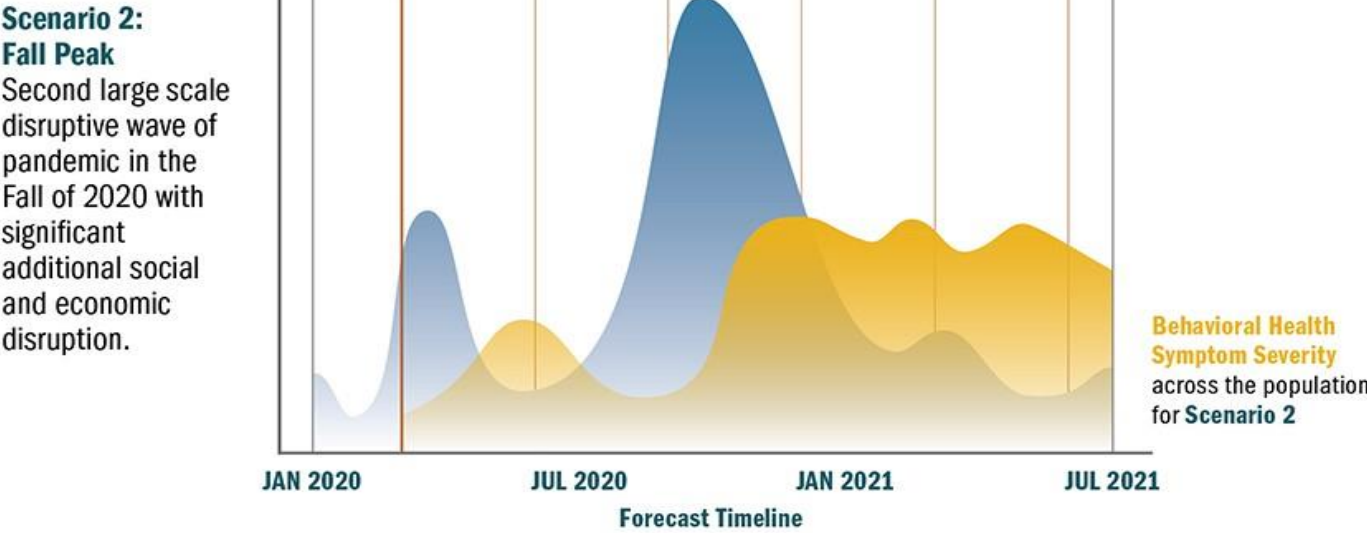
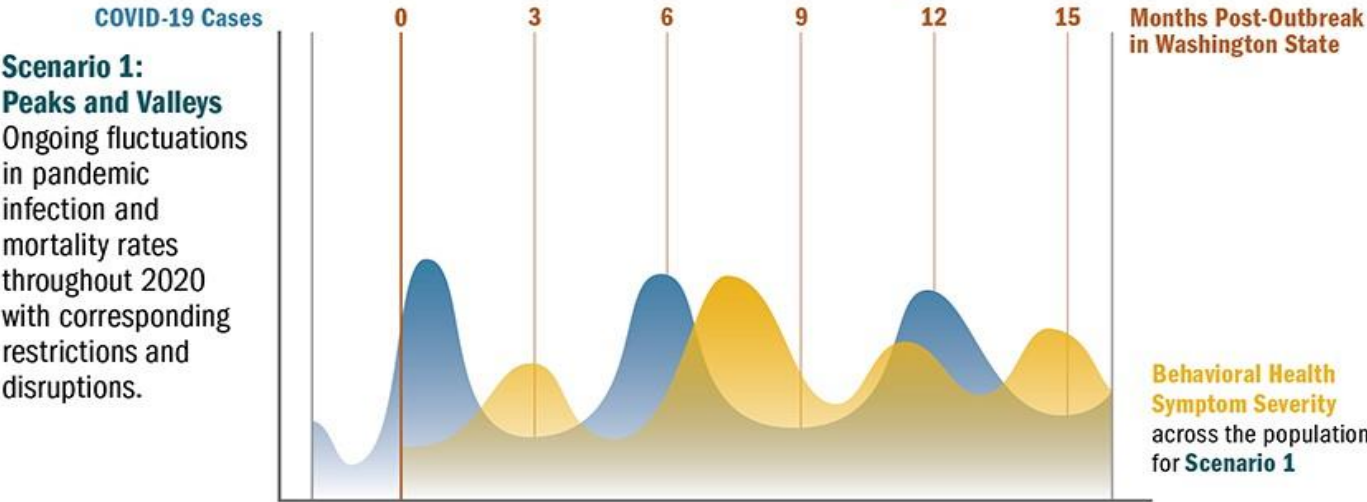
**Developing healthy teams
and resilience in the
workplace**

Reactions and Behavioral Health Symptoms in Disasters

Emotional Response – Lows to Highs



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 3-6 months.

- Depression (1.9m), anxiety (1.2m), 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)

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
- Approximately 20% of individuals could struggle with alcohol use, but less than 0.5% will likely be *new* acute cases
- May 2020 marijuana and liquor sales were up 44% and 31% respectively compared to 2019

Key Things to Know

Domestic violence tends to increase post-disaster, this is also true for COVID-19:

- 26% decrease in select other offenses
- 17% increase in domestic violence compared to 2019
- True number of cases is likely significantly higher

Behavioral health impacts will likely be seen in phases, peaking 6-9 months post-outbreak

- Follows the psychological phases of disaster, varies based on start of outbreak and mitigation activities within a community
- *Normal* reaction to *abnormal* circumstances
- Resilience is the typical response to disasters and it CAN be taught

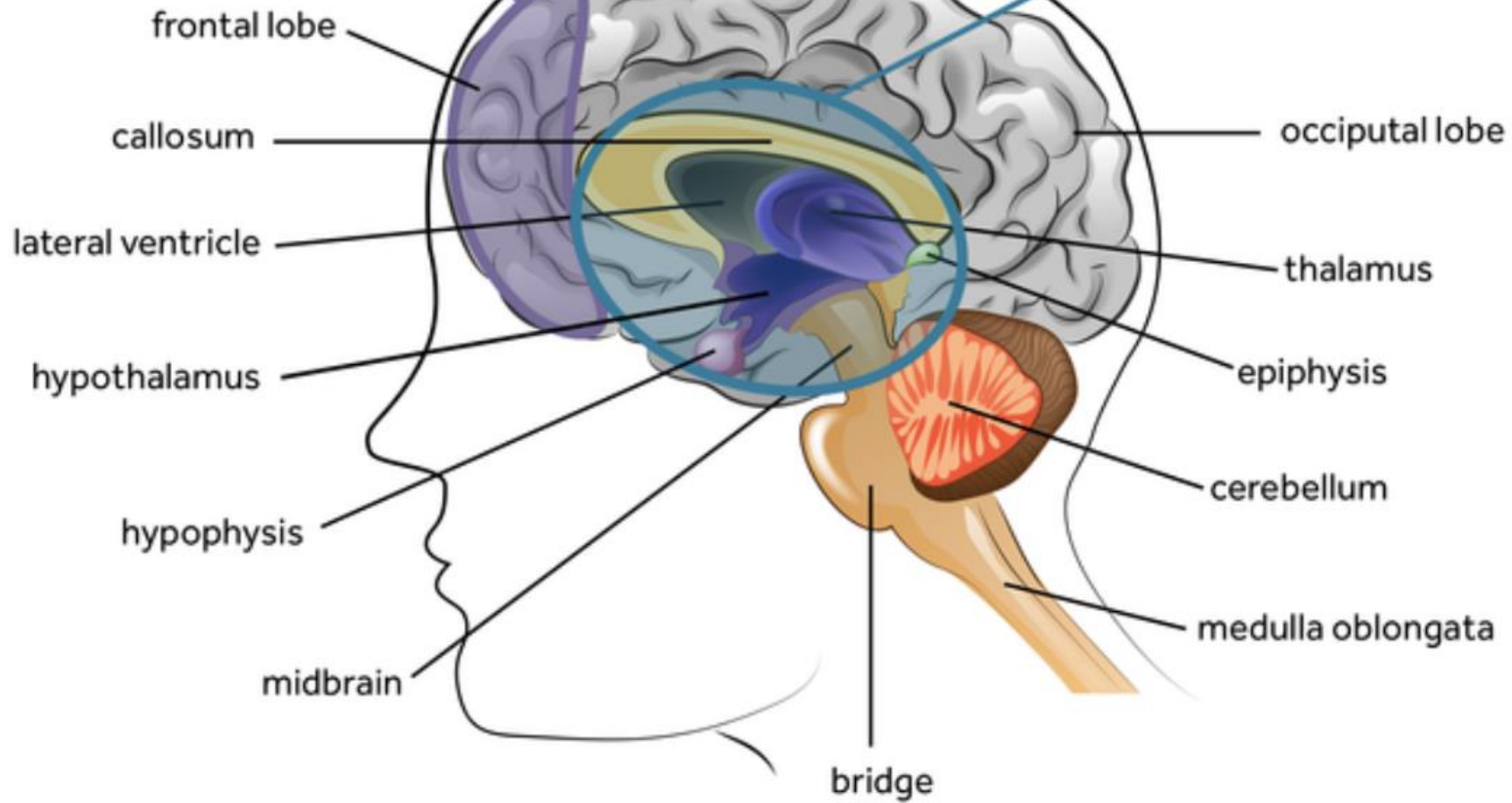
Challenging conditions still to come in Q4 2020

1. Peak of “Disillusionment” phase of disaster, when behavioral health symptoms are likely going to be at their worst collectively for all.
2. Need for professional and community supports reach highest levels.
3. Social and political division and discontent.
4. Seasonal affective conditions apply (weather / hours of darkness)
5. Lack of financial resources for many combined with pressure for holiday spending.
6. Concerns about a second, potentially larger wave of infections.

PREFRONTAL CORTEX

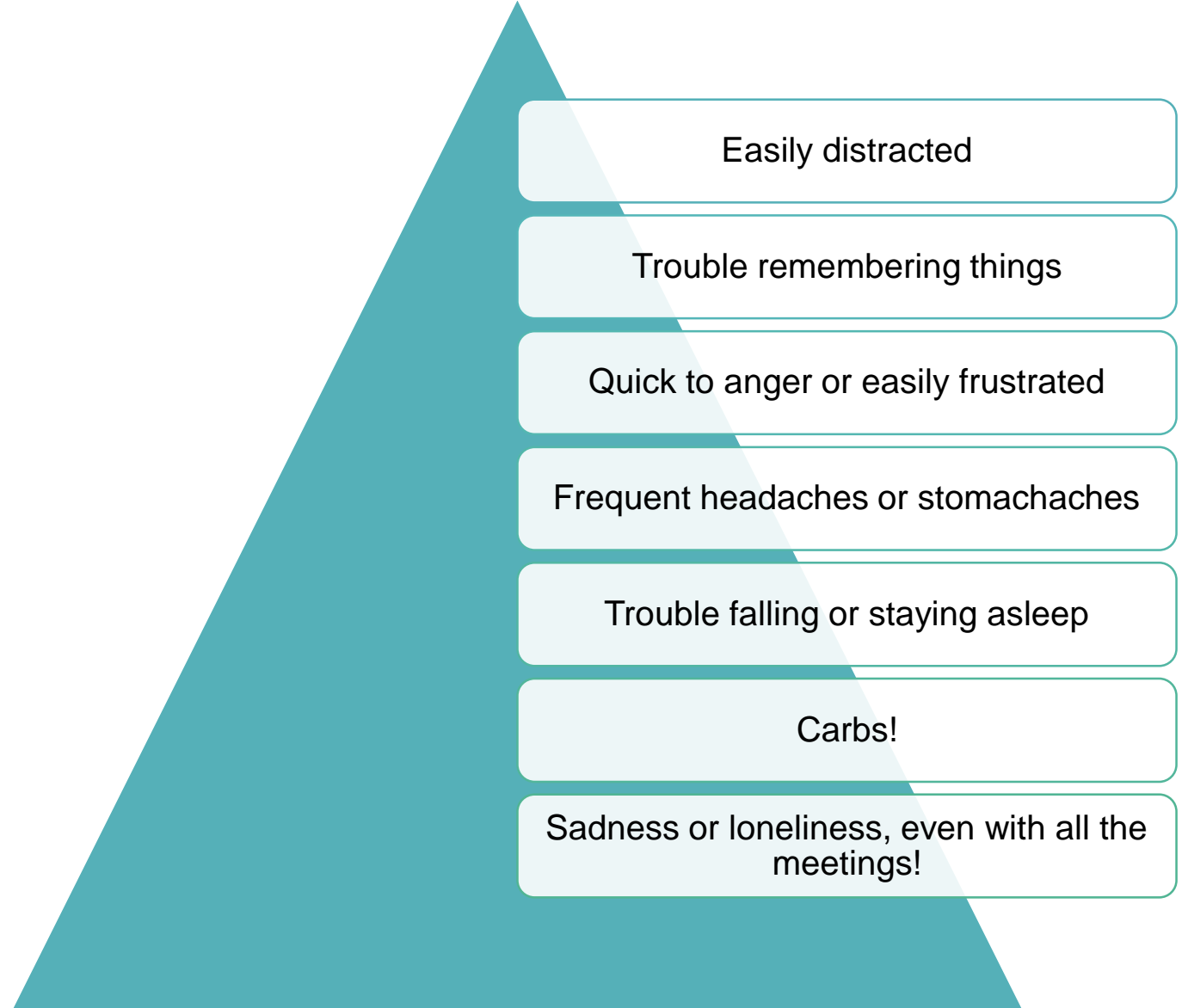
parietal lobe

LIMBIC SYSTEM



Common experiences during transition from Honeymoon to Disillusionment phase

Information that normalizes the shared experience helps people develop resilience.



Stressed brains in the workplace

- Potential for more emotional responding (anger, fear, frustration), less higher-level thinking capacity.
- When people don't (or aren't able) to process the emotional rewards from their work, burnout is likely.
- Other workplace factors that contribute to burnout include:
 - Work where there may be few "compassion rewards" (it feels regularly more challenging or draining than rewarding).
 - Too few resources and too much personal demand to meet perceived needs or asks.

Compassion Fatigue and Job Burnout

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

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

Opportunities for Supervisors & Managers

1. WALK THE WALK: What is DONE is what matters, not what people are told to do.
2. Be honest and open in the communication process
 - a. If you don't know, tell your team that you don't know.
3. Active listening is something that all team members can benefit from learning and practicing.
 - a. Listen for the purpose of understanding and caring, NOT to problem solve.

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

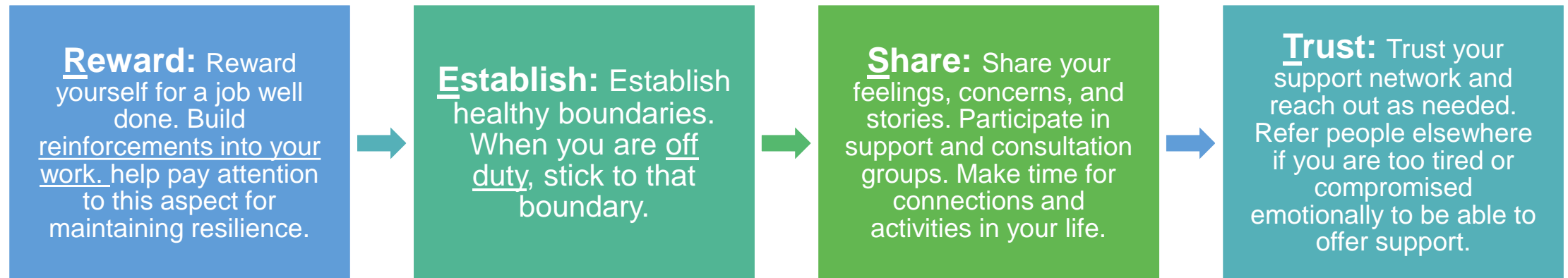
CONNECTION

- How can you maintain existing connections with others?
- How can you develop new connections?
- Connections can be ANYTHING

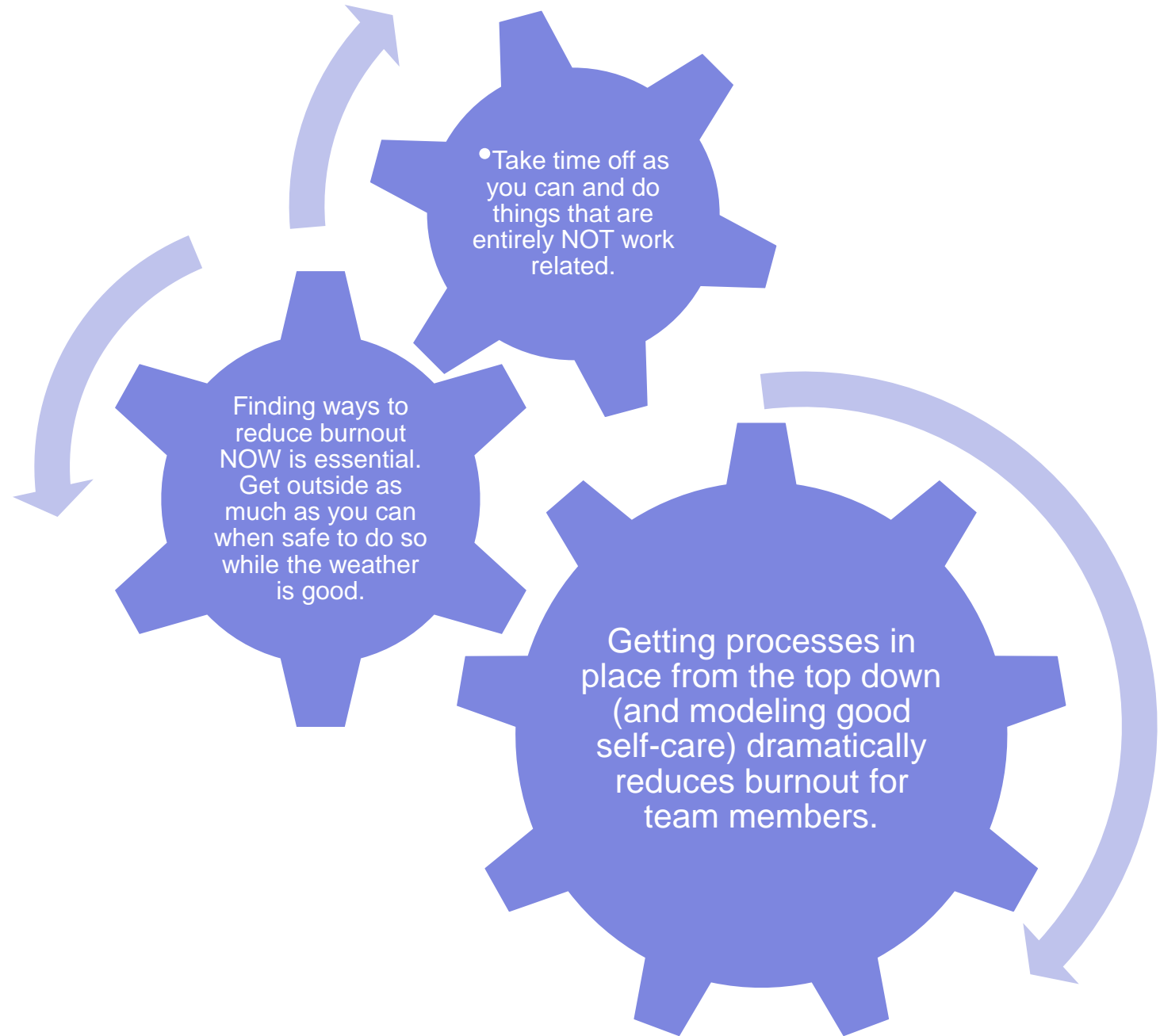
FLEXIBILTIIY / ADAPTABILITY

- 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 you discreet and clear breaks / boundaries?

Practice the **REST** model



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



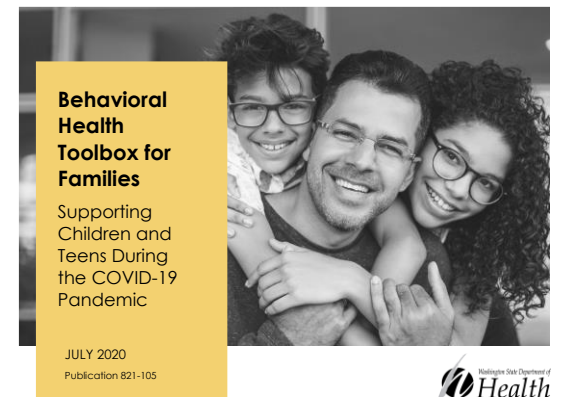
Resources – Healthcare/Behavioral Health:

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:
- Coping During COVID-19 for Emergency and Healthcare Professionals



Resources:

DOH - Forecast and situational reports, guidance and resources:

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

WA 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

