BEHAVIORAL HEALTH IMPACTS OF COVID-19

Burnout, Compassion Fatigue, Moral Injury, and Resilience in the Context of COVID-19

Behavioral Health Strike Team
Common Terms  
Crisis Standards of Care  
Management of Burnout, Moral Injury, and Compassion Fatigue
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

- Pre-disaster
- Warning
- Threat
- Impact
- Heroic
- Honeymoon - Community cohesion
- Potential secondary impact - Subsequent disaster cascade effects
- Disillusionment
- Inventory
- Trigger event
- Setback
- Secondary honeymoon
- Secondary disillusionment
- Reconstruction - A new beginning

Emotional Response - Lows to Highs

Months Pre- and Post-Outbreak
Crisis Standards of Care

- Preparation of healthcare systems
- Planning for patient surge
- Altered standards of care and scarce resources
  - Contingency: Staffing or supplies are not sufficient to be utilized as normal. What can be substituted, conserved, or eliminated?
  - Crisis standards of care: Not enough resources
    - Planning for who will get resources and who will not
    - Need for triage and standards that are transparent, fair, ethically grounded, and consistent with community values
Crisis Standards of Care in Behavioral Health

- New concept
- What does it look like in practice and real life?
  - Hospital/bed capacity
  - Intensive outpatient programs
  - Outpatient therapy sessions
  - Helplines
  - Emergency rooms
  - Employee assistance programs (EAP)
- Workforce and system capacity is main issue.
Common Responses

Emotional Issues
- Irritability
- Easily frustrated
- Angry
- Sensitive
- Tearfulness
- Hopelessness

Cognitive and Thinking Issues
- Trouble concentrating
- Difficulty tracking details
- Trouble with organization
- Trouble focusing
- Memory issues

Physical Issues
- Headaches
- Stomachaches
- Trouble sleeping
- Snacking
- Muscle tension

Behavioral Issues
- Aggression
- Substance use
- Shutting down
- Withdrawal
- Isolation
How to Manage and Reduce Burnout

- **Bottom line up front**: Burnout is widespread in the context of a disaster. Our energy is more limited right now generally. **Healthy, clear boundaries between work and time off are essential for reducing burnout.**

- Create a system for recognizing personal or group efforts and accomplishments during team or one-on-one meetings. End the check-in with what is currently going well.

- List things you can do during time off that are completely unrelated to work (e.g., re-watch your favorite show, teach yourself a new hobby using online resources, get lost in a book).

- Contribute to a team culture where it is okay to say “no” to requests that can’t be taken. As a leader, model this practice for your team.

- Avoid unhealthy coping practices, such as drinking too much alcohol.
How to Manage and Reduce Compassion Fatigue

- **Bottom line up front:** *Compassion rewards* are the antidote for compassion fatigue. Take time to recognize the impact your work is having on others and celebrate victories when possible (even little ones).

- Cultivate a group of coworkers who are supportive, maintain these relationships.

- If you are in a supervisory or managerial role, lead by example with mandatory and systematic work breaks (on a reasonable schedule) and include them in your schedule.

- Offer verbal support for colleagues (active listening is great!).

- Avoid professional isolation, engage with colleagues while maintaining social distancing (e.g., virtual get-togethers, online consult and affinity groups, and online huddle-style meetings to share information and lessons learned).
How to Manage and Reduce Moral Injury

- **Bottom line up front:** Moral injury is triggered by environmental circumstances, not personal failures. If you experience this, try to focus on external causes that can be addressed, not internal blame.

- Try to acknowledge that this is happening, when or if you notice it.

- Develop a self-care plan based on what works for you as an individual.

- Create a schedule, try to add just one small thing each day you enjoy doing. Mindfulness practices (e.g., meditation and breathing practices) can be helpful.

- If you have a personal history of trauma, consider professional care services to help process your experiences.
The 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
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 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?
What can we **do** that doesn’t add **more** work?

**MEDIC Model** for Disaster Recovery

<table>
<thead>
<tr>
<th>Model</th>
<th>Model resilience as a priority. Focus on purpose, connection, adaptability, and hope. Practicing resilience has a domino effect with others. They see you do it, and they do it too. Modeling resilience is one way to work smarter and not harder.</th>
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<tbody>
<tr>
<td>Engage</td>
<td>Engage in active listening with colleagues. This increases connection and is very effective for both the speaker and the listener. Start with simple, open-ended questions.</td>
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<td>Develop</td>
<td>Develop healthy boundaries around work and personal time. Time off is <strong>not</strong> for work (emails, calls, etc.). This is particularly important for those who work changing shifts. Off time is still off time, regardless of when it takes place.</td>
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<td>Identify</td>
<td>Identify small, workable pieces of a personal self-care plan. Who can you talk to? What activities can you do that give you a <strong>true</strong> break and allow some space? <strong>Smaller</strong> goals and timeframes. Music, TV, books, outdoors. What works for <strong>you</strong>?</td>
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<tr>
<td>Change</td>
<td>Change expectations and priorities about performance success. Shift your thinking from large to small scale. Try to let go of long-held, large-scale expectations, and adapt them for the current situation.</td>
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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.

Getting processes in place from the top down (and modeling good self-care and prioritizing resilience) dramatically reduces burnout for team members.

Remember to put your own oxygen mask on first before helping others.

Take time off as you can. Do things that are entirely not work related.

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

MEDIC, REST, and SAFE Models

Families, Children, and Teens:
- **Behavioral Health Toolbox for Families**: Supporting Children and Teens During the COVID-19 Pandemic
- Behavioral Health Group Impact Reference Guide: Families and Children

Emergency and Healthcare Workers:
- **Coping During COVID-19 for Emergency and Healthcare Professionals**
- Behavioral Health Group Impact Reference Guide:
  - Healthcare, behavioral health, outreach teams, post-vent individuals
  - Unique challenges/considerations
  - Support strategies (organizational, supervisory, personal)

Businesses and Workers:
- **COVID-19 Guidance for Building Resilience in the Workplace**
Training:

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

For information on trainings, please reach out to the Behavioral Health Strike Team at DOH-BHST@doh.wa.gov.
Resources (continued)

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
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