



## Grief, Exhaustion, and Finding Vitality in Behavioral Health Care for Supervisors & Leadership

### *Highlights & Key Concepts*

**Presenter:** Kira Mauseth, PhD, Astrum Health, LLC; Seattle University Senior Instructor; co-lead for the Behavioral Health Strike Team, Washington State Department of Health; member, Washington State Disaster Medical Advisory Committee (DMAC).

#### Summary Ideas:

**Processing grief isn't linear. Use the HEAL model to guide you through the process of grief and loss.**

- **Honor.** Honor the loss, such as by participating in rituals and ceremonies; or by journaling, sharing stories, and reflecting on memories.
- **Express.** Express your emotions and allow yourself to feel deeper emotions like fear and sadness.
- **Acknowledge.** Acknowledge the loss and the obstacles preventing you from healing.
- **Live.** Living means starting with breathing and acknowledging that some days, all you can do is make it through the day; over time, grow from just surviving or existing to more active living.

#### Questions & Responses:

**Q1** *As we enter year three of the pandemic, what contextual factors are the biggest influences on how we are feeling right now?*

**A1** An important contextual factor that significantly influences us is the amount of loss we have all experienced over the past 3 years. Many of us have experienced the loss of a loved one, a job, connection with friends and family, and the ability to experience special events and milestones (such as graduation, weddings, and vacations). These losses can feel overwhelming and take a toll on your mental health, which is why it is important to talk about our losses and the toll they have taken on us.

**Q2** *What effects has COVID-19 had on supervisors and leaders?*

**A2** The COVID-19 pandemic has impacted supervisors and leaders in numerous ways, and the main effect is increased stress levels and burnout. Due to the length and complexity of the pandemic, it has forced leaders/supervisors to create significant changes in the work environment, to take on new roles, and provide increased support to their co-workers. These factors have increased the level of responsibility and stress on supervisors and leaders.

---

**Q3** *How do issues of equity and inclusion affect grief and vitality? We see that many communities are experiencing historical trauma and oppression, inequities, societal disparities, yet also possess unique strengths and resources.*

**A3** We know unequivocally that the pandemic has not been an “equal opportunity” disaster, as marginalized communities are disproportionately affected. Many marginalized communities also have unique strategies and resources that have helped them combat the additional adversity of the COVID-19 pandemic.

**Q4** *Why does setting boundaries matter, and how does it help increase vitality?*

**A4** Setting healthy boundaries is often an effective way to protect you from burnout and to increase vitality because it increases your resiliency, reduces stress, improves work-life balance, and helps you operate more effectively as a supervisor/leader. To be clear: setting boundaries does not mean you are no longer dedicated or care about your co-workers or clients; rather, it means you recognize the importance of your own life, family, and work, and is a sign of self-respect and self-worth

**Q5** *How can identifying your core values help you gain vitality?*

**A5** It can be challenging to identify and ground yourself in your fundamental values; however, by doing so, you can reorientate yourself and focus on what matters most to you. By ensuring that your decisions and actions move you towards the life you want to live, you’ll increase your vitality.

**Q6** *Define “degradation of care.” What are the consequences of this phenomenon?*

**A6** Degradation of care means that when a large-scale disaster happens, it degrades the ability of the behavioral health care system to provide care. Specifically, the disaster increases the scarcity of resources, shifts how care is delivered, and decreases staffing ratios, which often means that people may have to do things outside their job role and complete tasks they have never done before or are unfamiliar with. The main consequences of degradation of care are moral injury and burnout.

**Q7** *What is the neurological impact of the continued COVID-19 pandemic, and how does this affect the ability of supervisors to do their jobs?*

**A7** When exposed to moderate or severe long-term stressors, our limbic system and flight-or-fight response are highly activated, which can look biologically and physiologically like a traumatic reaction in the brain. So, due to the long-term stress caused by the pandemic, many people's brains are currently functioning in a traumatic or semi-traumatic state. Operating in a traumatic or semi-traumatic state undermines the ability of supervisors and leaders to function to the best of their ability because it hinders your ability to use your prefrontal cortex. And when your prefrontal cortex is affected, it affects your ability to reason, remember things, think abstractly, plan, and organize information.

## Resources:

- [Related webinar recording and slides](#) from Northwest MHTTC
- [Washington State Department of Health behavioral health resources](#)

---

**Disclaimer:** This training or product was prepared for the Northwest Mental Health Technology Transfer Center under a cooperative agreement from the Substance Abuse and Mental Health Services Administration (SAMHSA). This work is supported by grant SM 081721 from the Department of Health and Human Services, SAMHSA. All material appearing in this presentation, except that taken directly from copyrighted sources, is in the public domain and may be reproduced or copied without permission from SAMHSA or the authors. Citation of the source is appreciated. Do not reproduce or distribute this presentation for a fee without specific, written authorization from the Northwest MHTTC.

At the time of this presentation, Miriam Delphin-Rittmon served as SAMHSA Assistant Secretary. The opinions expressed herein are the views of the speakers, and do not reflect the official position of the Department of Health and Human Services (DHHS), or SAMHSA. No official support or endorsement of DHHS, SAMHSA, for the opinions described in this presentation is intended or should be inferred.