

The Need for Emotional PPE to Foster Well-Being and Resiliency During the COVID-19 Pandemic

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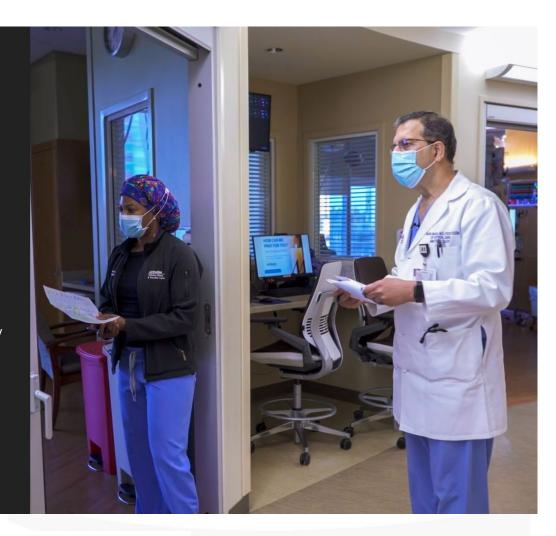




U.S.

Covid-19 Rise, Vaccine Hesitancy Frustrate Doctors in Hospitals Saturated by the Delta Variant

'It's too late for them to get the vaccine,' an ICU nurse in Arkansas said. 'It's been pretty demoralizing.'



THE WALL STREET JOURNAL.

RESIDENTIAL &

We are living with enormous uncertainty during a time of rapid change!



4 Ways Fire Hydrants Break



> Am J Health Syst Pharm. 2021 Apr 22;78(9):818-824. doi: 10.1093/ajhp/zxab051.

Burnout and secondary traumatic stress in healthsystem pharmacists during the COVID-19 pandemic

Adam M Jones 1, John S Clark 1, Rima A Mohammad 1

Affiliations + expand
PMID: 33580662 PMCID: PMC7929387 DOI: 10.1093/ajhp/zxab051
Free PMC article

Abstract

Purpose: To describe the prevalence of burnout and secondary traumatic stress (STS) in health-system pharmacists during the coronavirus disease 2019 (COVID-19) pandemic.

Methods: A cross-sectional, professional pharmacy organization listserver-based online survey of a target group of health-system pharmacists across the United States was conducted. The survey was sent out through professional organization listservers and was anonymous and voluntary. The survey questionnaire included items regarding demographics and employment characteristics, COVID-19-related questions, a survey of respondents' perceptions of the prevalence and severity of burnout, and the Professional Quality of Life Scale (ProQOL). The ProQOL assessed respondents for compassion satisfaction (subcategorized as burnout and STS) and compassion fatigue. Descriptive statistics was used to assess the prevalence of burnout and STS.

Results: Four hundred eighty-four health-system pharmacists completed the survey. Based on respondents' self-ratings of burnout, 47% were identified as having current burnout and 81% as having a history of burnout. Based on ProQOL scoring, 65.3% of respondents were identified as having a moderate or high likelihood of burnout, which was a prevalence higher than that indicated by respondents' self-ratings. Additionally, 51.4% of respondents were identified as having a moderate or high probability of STS and 99.4% as having a moderate or high probability of compassion satisfaction.

Conclusion: The survey found that over half of health-system pharmacists were affected with burnout, half with STS, and all with compassion satisfaction during the COVID-19 pandemic. Unfortunately, the development of burnout and STS in these health-system pharmacists may lead to several work-related consequences (eg, increase risk of medical errors, depression); therefore, addressing burnout and STS is crucial. Further studies of the consequences of burnout and STS during the COVID-19 pandemic are needed.

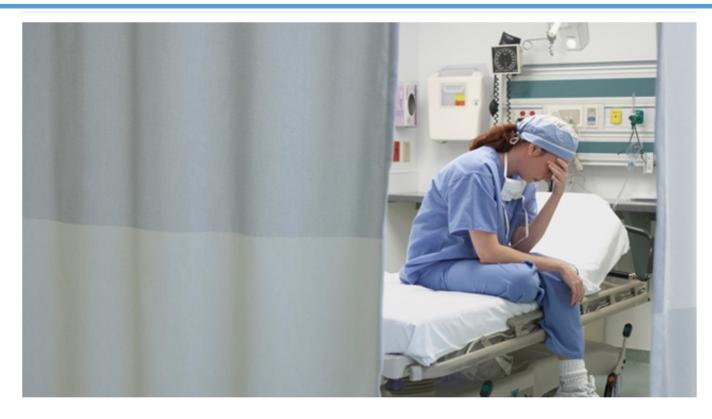


Outline of Talk

- Introduction
- Discussion of COVID Impact on Health Care Workers
- Gender related impact
- Impact on vulnerable populations
- What can you do to increase resilience and constructive coping? (specific pearls and tips)
- Discussion of UNC Well-Being Program initiatives







Healthcare workers on the front lines of the COVID-19 pandemic risk exposure to the coronavirus daily, and this poses obvious risks to their physical health. But the public health crisis is taking a toll on their mental health as well, contributing to anxiety, stress, depression, loneliness and other concerns, as outlined in a pair of new surveys.



We've moved from stress to trauma. Here's what that means for leaders.

Quint Studer and Diana Hendel, PharmD - Wednesday, November 25th, 2020 Print | Email

Health Care leaders are immersed in the responsibility of managing all that COVID brings to the organization:

- Securing personal protection equipment
- Managing capacity demands
- · Dealing with staffing complexities
- Educating the community
- · Dealing with the media
- Eliminating elective procedures

It is like putting 15 pounds of beans in a 10-pound bag. Something will give.



Current Challenges

- The balance of life and work has never been tougher.
- A person feels a need to be at work to take care of their patients and support the organization, but now has their child at home because of virtual school or because the daycare center is unavailable.
- Extended family cannot be counted on as they once were because of the fear of COVID.
- Staffing is now a greater challenge because so many people are unavailable due to quarantining and other family commitments.
- You may be looked upon as a resource for friends, family, and others.
 - Similar to a pain threshold with a patient, what was at one time a 5, 6, or 7 is now moving into the 8, 9, or 10 range.
- This means an organization must continue to address stress and resiliency, while also implementing a toolkit for dealing with trauma.



000

#Moralinjury injury to an individual's soul #moral conscience & values from an act of perceived moral transgression, producing profound emotional guilt & shame, and for some a sense of #betrayal #anger + profound moral disorientation #Veteran #Doctor #RN #Journalist #humanitarian





Moral Injury

- Moral injury in medicine "occurs when clinicians are ... expected, in the course of providing care, to make choices that transgress their longstanding, deeply held commitment to healing" [1].
- Moral injury has been discussed as an occupational hazard in medicine before the COVID-19 pandemic [2], including in a recent project on developing moral resilience [3]. However, the current crisis has exposed the depth and breadth of moral injury's potential impact upon entire networks of healthcare workers.
- "What Is Moral Injury?" https://fixmoralinjury.org/what-is-moral-injury/. Accessed May 28, 2020.
- Jameton A. Nursing practice: the ethical issues. Englewood Cliffs, NJ: Prentice Hall, 1984.
- Rushton CH, Schoonover-Shoffner K, Kennedy SM (2017). Executive Summary: Transforming Moral Distress into Moral Resilience in Nursing. AJN: American Journal of Nursing, 117(2), 52-56.



THE FOUR Stress Injuries:

Life Threat

A traumatic injury

Fear or experience of exposure to harm to self or others, fear of harming others inadvertently, existing in uncertainty.

Loss

A grief injury

Due to the loss of people, things or parts of oneself.

Inner Conflict

A moral injury

Due to behaviors or the witnessing of behaviors that violate moral values.

Wear and Tear

A fatigue injury

Due to the accumulation of stress from all sources over time without sufficient rest and recovery.





UNC SCHOOL OF MEDICINE Injuries and Ideals Place Us On the Stress Continuum

READY	REACTING	INJURED
(Green)	(Yellow)	(Orange)
DEFINITION Optimal functioning Adaptive growth Wellness FEATURES At one's best Well-trained and prepared In control Physically, mentally and spiritually fit Mission-focused Motivated Calm and steady Having fun Behaving ethically	DEFINITION • Mild and transient distress or impairment • Always goes away • Low risk CAUSES • Any stressor FEATURES • Feeling irritable, anxious or down • Loss of motivation • Loss of focus • Difficulty sleeping • Muscle tension or other physical changes • Not having fun	DEFINITION • More severe and persistent distress or impairment • Leaves an emotional/mental "scar" • Higher risk CAUSES • Life threat • Loss • Moral injury • Wear and tear FEATURES • Loss of control • Panic, rage or depression • No longer feeling like normal self • Excessive guilt, shame or blame



Keep Up with Your Confidence

Trust	Hope	Self-Worth	Meaning
Trust in: Peers Equipment Leaders Mission	Forgiveness of self Forgiveness of others Imagining the future	Belief in self Accurate self- concept Self-respect	Making sense Purpose Faith

Slide/image used with permission from Patricia Watson, PhD; National Center for PTSD



Warning Signs of Excessive Stress

Below are symptoms you may experience if you are under excessive stress. If these symptoms last for more than 2-4 weeks and/or interfere with your relationships, work or daily functioning, you may need to seek care.

> Difficulty thinking clearly, Disorientation, Confusion, Difficulty problem-solving & making decisions, Memory issues, Distortion, Misinterpretation of situations & comments

Fear or terror, Perceived danger, Anger, Hostility, Frustration, Irritability, Deep sadness, Difficulty maintaining emotional balance

Cognitive Emotional Behavioral Physical

Risk-taking, Failure to use PPE. Refusal to follow orders, Endangerment of others, Increased use/misuse of drugs or alcohol, Reduced ability to support peers, Conflicts with others, Withdrawal, Isolation

Rapid heart rate, Palpitations, Muscle tension, Headaches, Tremors, Gastrointestinal issues, Nausea, Inability to relax, Trouble sleeping, Nightmares, Flashbacks, High adrenaline

Source: https://www.samhsa.gov/dtac/dbhis-collections/disaster-response-template-toolkit/disaster-responder-





Emotional, Behavioral, and Psychological Impact of the COVID-19 Pandemic



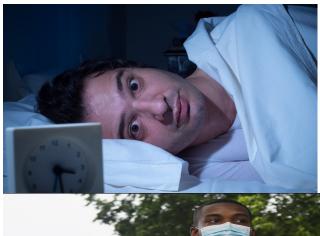
- A rise has been observed in mental health disorders
- Individuals affected by emotional, behavioral and psychiatric disorders tend to be more numerous than those affected by COVID-19.
- The fear of contracting COVID-19 seems not to be as high as concerns about the psychological and social impact of the pandemic, as reported in a United Kingdom survey (Mental health Covid-19, 2020).

Front. Psychol., 02 October 2020 |





Stressors related to the COVID-19 Pandemic





- Stressors related to COVID-19
- potential exposure to the virus and loss of loved ones
- Secondary Adversities
- economic difficulties
- unavailability of food
- psychosocial effects
- disruption of future plans
- underlying physical and psychological conditions
- Health disparities

•(Islam et al., 2020; Pfefferbaum and North, 2020)

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Emotional Stress Impact



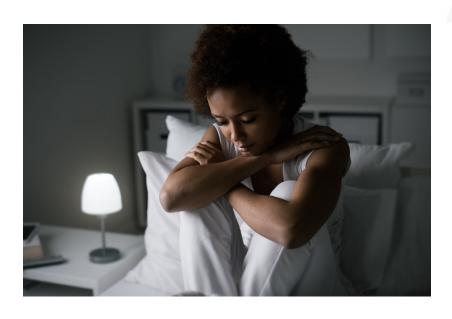
- •Emotional stress may potentially aggravate previous psychiatric conditions or may precipitate its symptomatology (Yao et al., 2020).
- •A critical aspect of this context is that, due to physical distancing, many elective appointments have been canceled and mental health support systems have been suspended, even though remote assistance is rapidly increasing (Holmes et al., 2020).

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High Risk Groups for Mental Health Impact



•Groups that appear to be at higher risk for mental health impact, include:

- frontline healthcare workers
- the elderly
- children
- college students
- LGBTQ+ community
- homeless individuals and those in economic vulnerability
- rural community
- foreigners
- psychiatric patients

•(Holmes et al., 2020; Khan et al., 2020; Salerno et al., 2020; Wood et al., 2020).

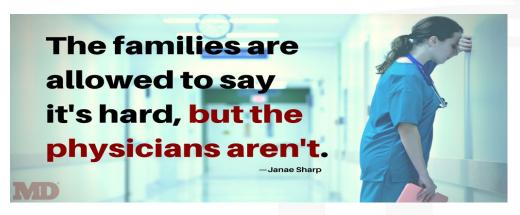
https://doi.org/10.3389/fpsyg.2020.566212).

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WELL-BEING PROGRAM



Health Care Professionals and Suicide



- Suicide mortality rates that were rising over the past two decades combined with the current pandemic are a "perfect storm".
- Factors include economic stress, social isolation, reduced access to religious services, overall national anxiety, increased firearm sales and increases in health care provider suicides.
- The literature shows the relative risk for suicide being 2.27 times greater among female physicians and 1.41 times higher among male physicians versus the general population.



Psychological Disorders Secondary to the COVID-19 Pandemic



- Psychological Disorders Secondary to the COVID-19 Pandemic
- Anxiety and Depression
- Post-traumatic Stress Disorder
- Alcohol Addiction

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Elsevier Public Health Emergency Collection

Public Health Emergency COVID-19 Initiative

Brain Behav Immun. 2020 Aug; 88: 956.

Published online 2020 May 13. doi: <u>10.1016/j.bbi.2020.05.039</u>

PMCID: PMC7219424

PMID: 32405151

Mental health of scientists in the time of COVID-19

Christine Chan, Nicodemus Edrick Oey, and Eng-King Tan*

► Author information ► Article notes ► Copyright and License information Disclaimer

The hard truth is that COVID-19 has changed and will continue to affect how scientists live their day-to-day lives. As the world continues to struggle against the collective enemy, some attention should be placed on the mental health of the silent warriors on the laboratory bench. In the face of overwhelming odds against finding the vaccine for COVID-19 or the cure for cancer or dementia, researchers around the world should find solace in the fact that they are at the frontline of finding a better future for humankind.

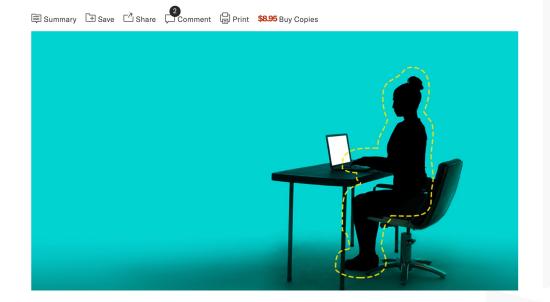


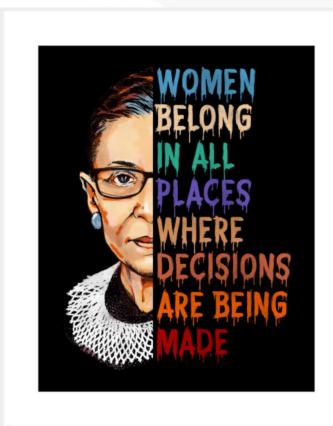
Women in Medicine: The Impact of the Pandemic

Don't Let the Pandemic Set Back Gender Equality

by Deepa Mahajan , Olivia White , Anu Madgavkar and Mekala Krishnan

September 16, 2020







The Pandemic Is a 'Mental Health Crisis' for Parents

New studies show caregivers with young children are stressed, with no signs of relief on the horizon.







Domestic Violence



- •Social distancing may exacerbate the violence and maintain it less visible (Usher et al., 2020)
- •Forced proximity, along with economic stress and disaster-related instability, are risk factors for aggression and domestic violence (Bavel et al., 2020; Usher et al., 2020)
- •Distancing measures may lead to diminished access to community-based and familial support, with fewer opportunities to ask for help (Usher et al., 2020)
- •Fear of COVID-19 and threats about contamination can even be used as a coercive mechanism to maintain the abuse

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Impact of COVID-19 Pandemic on Psychiatric Patients



- •In psychiatric patients, the COVID-19 pandemic might trigger an even worse outcome regarding mental health
- Depression and Anxiety
- Obsessive-Compulsive Disorder
- Schizophrenia
- Hospitalized Patients

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Adolescent Distress During Covid



- Consistent with theory highlighting the importance of peers during the adolescent period, the results showed that adolescents' greatest concerns during the COVID-19 crisis were around the disruption to their social interactions and activities
- Concerns around contracting or getting ill from the virus were very low.
- This suggests that it is the restrictions put in place to reduce the spread of the virus, rather than the virus itself, that is causing adolescents the most distress.

Magson, N.R., Freeman, J.Y.A., Rapee, R.M. et al. Risk and Protective Factors for Prospective Changes in Adolescent Mental Health during the COVID-19 Pandemic. J Youth Adolescence (2020). https://doi.org/10.1007/s10964-020-01332-9





Adolescent Distress During Covid

COVID-19 related worries, difficulties with online learning, and increased family conflict were associated with greater psychological maladjustment.



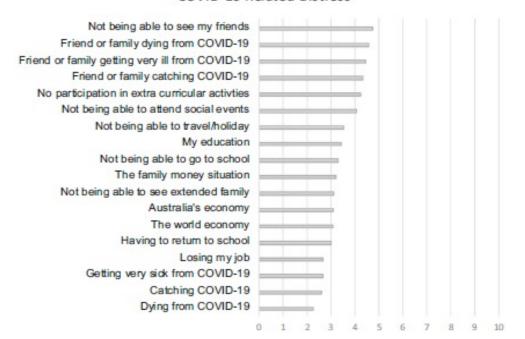


Greater exposure to traditional media, adherence to government restrictions, and feeling socially connected with others was associated with less distress

Magson, N.R., Freeman, J.Y.A., Rapee, R.M. et al. Risk and Protective Factors for Prospective Changes in Adolescent Mental Health during the COVID-19 Pandemic. J Youth Adolescence (2020). https://doi.org/10.1007/s10964-020-01332-9



COVID-19 Related Distress



Participants in the current study were part of the larger longitudinal Risks to Adolescent Wellbeing Project (the RAW Project) who have been completing online questionnaires annually for the past four years.

Fig. 1 Factors contributing to COVID-19 related distress among adolescents. Rated on a scale of 0 (not at all distressed) to 10 (extremely distressed)

Magson, N.R., Freeman, J.Y.A., Rapee, R.M. et al. Risk and Protective Factors for Prospective Changes in Adolescent Mental Health during the COVID-19 Pandemic. J Youth Adolescence (2020). https://doi.org/10.1007/s10964-020-01332-9



Resilience



Psychological resilience refers to the phenomenon that many people are able to adapt to the challenges of life and maintain mental health despite exposure to adversity.

Chmitorz A, Kunzler A, Helmreich I, et al. Intervention studies to foster resilience - A systematic review and proposal for a resilience framework in future intervention studies [published correction appears in Clin Psychol Rev. 2018 Feb 2;:]. Clin Psychol Rev. 2018;59:78-100. doi:10.1016/j.cpr.2017.11.002





What Resilience is (and what it isn't)!

- Old Definition
- The ability to "bounce back" from a negative life event and return to a previous state of being

- New Definition
- When experience with adversity leads us to develop a knowledge, skills, or attitudes that improve our ability to withstand future challenges

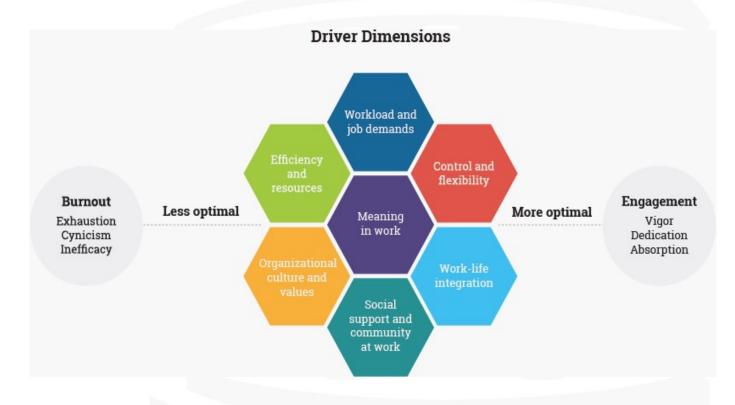
Stephens, T.M. (2019, August) Building Personal Resilience: Develop skill to overcome daily challenges and prepare for the future. *American Nurse Today, 1*4(8). 10-15. https://www.myamericannurse.com/wp-content/uploads/2019/08/ant8-Resilience-729a.pdf





A Perspective on Drivers and Solutions...

Intersecting Dimensions





Mayo Clinic Proceedings, Vol. 92 Issue 1, Shanafelt, T., Noseworthy, J.H., Executive Leadership and Physician Well-being: Nine Organizational Strategies to Promote Engagement and Reduce Burnout, Pages No. 129-146, Copyright (2017)



Linking Interventions

Framework for linking cultural norms in medicine with burnout factors and potential interventions

POSITIVE VALUE	NEGATIVE POTENTIAL	BURNOUT FACTOR(S)	POTENTIAL MENTAL TRAINING INTERVENTIONS
Service	Deprivation	Compassion fatigue Entitlement	Reframing Appreciation and gratitude
Excellence	Invincibility	Emotional exhaustion	Mindful self-compassion Inner critic awareness
Curative competence	Omnipotence	Ineffectiveness Cynicism	Self-awareness Generous listening
Compassion	Isolation	Depersonalization	Connection and community Silence as energizing

Nedrow A, Steckler NA, Hardman J. Physician resilience and burnout: can you make the switch?. Fam Pract Manag. 2013;20(1):25-30.



How do you help the healers? The Emotional PPE Project covers what masks and face shields don't

The project makes free therapy available to health care workers facing unrelenting stress. And its cofounder understands firsthand the value of resilience.

By Melissa Karen Sances Updated January 27, 2021, 2:52 p.m.















What can you do to be more resilient?



- For our faculty currently experiencing decreased satisfaction in their work or who want to become "unstuck" from a day-to-day, downward spiral, we propose asking the following questions to raise self-awareness, allow reflection, and take the first steps to building resiliency:
 - What did I learn today? Would I do anything differently?
 - What three things am I grateful for today? What inspired me?
 - How did I talk to myself today? Did I take myself too seriously? Did anything surprise me?
 - Was I overly self-critical?
 - Did I practice compassion (to self and others?)



Nedrow A, Steckler NA, Hardman J. Physician resilience and burnout: can you make the switch?. Fam Pract Manag. 2013;20(1):25-30.



Personal Protective Factors (in alphabetical order)



- Competence The knowledge, skills, and attitudes needed to successfully perform a job or task
- Faith/Spirituality A belief in God or a higher power that provides comfort, hope, and strength during times of stress or spirituality adversity
- Flexibility A willingness to change
- Hope Belief that something better is possible
- Humor Prevents us from taking things so seriously, enhances our coping abilities, and reduces the intensity of our emotional reaction to stress
- Meaning in life The ability to recognize a "purpose" or "meaning" in your experiences and the ability to identify your "why"
- Optimism Positive outlook and/or favorable belief about a future outcome

Stephens, T.M. (2019, August) Building Personal Resilience: Develop skill to overcome daily challenges and prepare for the future. *American Nurse Today, 1*4(8). 10-15. https://www.myamericannurse.com/wp-content/uploads/2019/08/ant8-Resilience-729a.pdf





- Perseverance Not easily discouraged by failure or barriers to success. You recognize the importance of continuing your efforts, especially if the outcome is related to your priorities or purpose
- Positive Emotions Approachable and supportive of others
- Self-awareness The ability to know yourself, monitor your emotions, and regulate your responses to others and situations
- Self-efficacy Confidence in your ability to perform a specific task in a particular situation.
- Self-esteem/confidence A positive belief in your own self-worth or value
- Social support Family, friends, or others to whom you can turn to in times of need



Stephens, T.M. (2019, August) Building Personal Resilience: Develop skill to overcome daily challenges and prepare for the future. *American Nurse Today, 1*4(8). 10-15. https://www.myamericannurse.com/wp-content/uploads/2019/08/ant8-Resilience-729a.pdf



Build a resilience plan

Use this tool to develop a plan for resilience that will help you overcome daily challenges and prepare you for what's to come.

Who am I?	Why am I here?	What do I need?	How will I do this?
Priorities (list your top 5)	Purpose	Goals	Actions
Examples: 1. Faith/spirituality 2. Family 3. Personal health 4. Job 5. Community service	Example: Big why: To positively influence and show love toward those I encounter.	Examples: Increase time spent in contemplation Increase quality time I spend each day with spouse and children Improve diet and exercise to lose 10 lbs Better manage work time to be more productive Prioritize volunteer and service commitments	Examples: Schedule 10 minutes twice a day to engage in contemplation. Put aside cell phone and other devices between 6 and 9 PM each evening. Schedule 30 to 45 minutes for walking each evening. Delegate tasks when appropriate. Choose two volunteer commitments and eliminate those that don't contribute to my personal and professional goals.

Stephens, T.M. (2019, August) Building Personal Resilience: Develop skill to overcome daily challenges and prepare for the future. *American Nurse Today, 1*4(8). 10-15. https://www.myamericannurse.com/wp-content/uploads/2019/08/ant8-Resilience-729a.pdf





SCHOOL OF MEDICINE



Recent Article from New England Journal of Medicine



Supporting Clinicians during Covid-19 and Beyond — Learning from Past Failures and Envisioning New Strategies

Jo Shapiro, M.D., and Timothy B. McDonald, M.D., J.D.

linicians are facing important emotional stressors during the Covid-19 pandemic, including grief from seeing so many patients die, fears of contracting the virus and infecting

their family members, and anger over health care disparities and other systems failures. For some, these stressors have caused or exacerbated burnout, depression, or post-traumatic stress disorder, ing improvements in workplace efficiency and workflow, increased supplies of personal protective equipment, and strengthening of communication with organizational leaders. Other efforts often meant to be appreciative, messages depicting clinicians as heroes imply an expectation of personal sacrifice at all costs. Well-being efforts have overemphasized personal resilience, thereby placing the burden of handling emotional distress solely on individual clinicians. Research has found, however, that organizational approaches to improving clinician well-being are more effective than

Home About FAQ Media

Welcome.

The Emotional PPE Project connects healthcare workers in need with licensed mental health professionals who can help.

No cost. No insurance. Just a trained professional to talk to.

Healthcare Workers Affected By The COVID-19 Crisis

Mental Health Practitioners Looking To
Help

All Services Provided Through The Emotional PPE Project Are Free Of Charge.

The Emotional PPE Project is a directory that provides contact information of volunteer mental health practitioners to healthcare workers whose mental health has been impacted by the COVID-19 crisis.



Strategies for Emotional Support Programs

Recommendations	UNC Resources	Comments
Peer Support Programs	UNCMC Peer Support Program	UNC has a peer support program offering support after adverse events, unexpected outcomes, loss of a patient, and assaults from patients and visitors
Proactive Outreach Programs	Partnership with Heroes Health Initiative	H3 helpline mental health professionals work in cooperation with Heroes Health Initiative to reach out to clinicians within UNC who exhibit levels of distress above threshold
Easily accessible and psychologically safe "reach-in" services for clinicians requesting help	Healing Heroes Helpline (H³) Taking Care of Our Own Outpatient Psychiatry for faculty and staff	Multiple points for clinicians throughout the health care system to access mental health services
Institutional leadership should be accountable for clinician well-being	Annual Review Organizational Goals	The Well-Being of our faculty is a key component of the annual review process for all Department Chairs and organizational goals have been created to assess and address well-being



Taking Care of Our Own During COVID

Extensive expansion during COVID & New Initiatives

- Expansion of clinical, supportive and educational services
- Incorporation of additional clinicians who are supervised by director of TCOOO to provide more robust and accessible services
- New service line to provide mental health for all healthcare workers
- Address issues around DEI, systemic racism and recent sociopolitical events
- To assist in providing pointed needs assessment and plan development to promote wellness determinations and design interventions with corresponding research initiatives



Improving Work Life.

The integrated Well-Being Program is here to support co-workers and physicians across our health system and school of medicine.

UNC SCHOOL of MEDICINE UNC Chapel Hill UNC Health Care Intranet



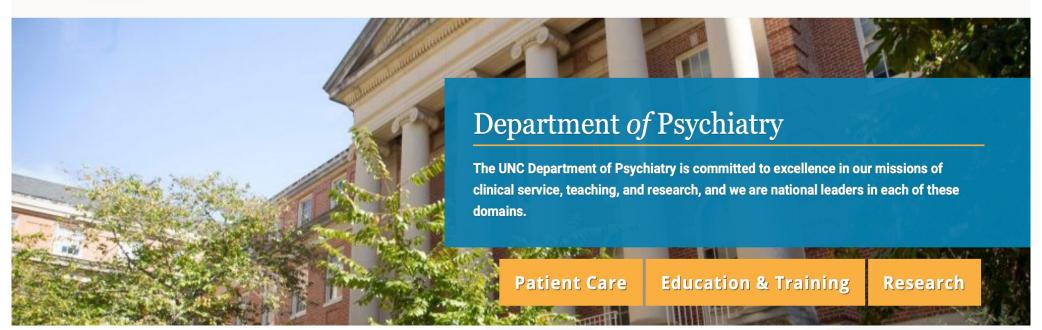
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Thank You to Wonderful Colleagues

Well-Being and Taking Care of Our Own Program



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