

Self-Care, Resiliency, and Stress Management for Healthcare Providers

Stephen Brady, PhD & Karen McKinnon, MA

January 11, 2021



Housekeeping



- You will need to call in to speak on the line; however, it is recommended that you call in even if you're just listening on the line for a better user experience:
 - Conference number: 1-866-814-9555
 - Participant passcode: 723 288 1431
- All phone lines have been muted.
- During the Q&A portion, you may unmute your phone line by pressing #6. You can also use the participant chat to ask questions.
- Today's session recording and slides will be available on the aidsetc.org website as a resource.

Speakers



Stephen Brady, PhD



Karen McKinnon, MA

This webinar will address how providers can explore and optimize coping, supports, and resiliency in response to COVID-19

Learning Objectives:

- Understand reactions to stress and anxiety that we experience as members of the health care community
- Review approaches to burnout and compassion fatigue and how to address them in our daily work
- Identify opportunities to build and maintain our well-being

Who we are/our perspectives

Polling Question 1

To what extent are you experiencing greater distress as a result of the COVID-19 pandemic?

- a) No increased distress
- b) A small amount of increased distress
- c) A moderate amount of increased distress
- d) A great deal of increased distress

Polling Question 2

What has been the most prominent source of your distress?

- a) Loss of a personal sense of safety, including worries about housing or other basic needs
- b) Feeling traumatized by the upheaval COVID-19 has caused more generally
- d) Worsening of pre-existing and/or new onset of substance use and other mental health disorders
- e) Struggling with loss, grief and/or loneliness
- f) No increased distress

Polling Question 3

How have you been working during the pandemic?

- a) Exclusively remotely
- b) I started off remotely but am back at work in person
- c) I have been working in person all along

Polling Question 4

Now that vaccines are being rolled out, how ready do you feel to get vaccinated?

- a) Ready immediately
- b) More comfortable waiting and seeing how it goes for others
- c) Not planning to get vaccinated

COVID-19: The Disaster Response

- Disasters are hazards, either natural or human made, intentional or unintentional — or a combination of both — whose impact on a community can cause injury and death.
- In public health emergencies, including the COVID-19 pandemic, the entire community is at risk.
- These conditions are stress events that can have lasting effects.
- The health care infrastructure may fall apart during a disaster or be overwhelmed with dire emergency care at the expense of chronic care needs.
- People living with HIV are extremely vulnerable during and after disasters. So are the people who care for them.

Anna Duarte Velasco, Nurse

“The look of fear of dying in many people’s eyes will never be erased from my memory. I feel rage and helplessness because many families have not been able to say goodbye. So much lonely mourning...”

“But it makes me feel a bit better to know that although their families were not there, we were there holding their hands in their last moments.”

*Source: The New York Times

The HIV Workforce Has Been Called Into Action



- Many healthcare workers with the skills and expertise to treat HIV infection are now being called upon to respond to COVID-19.
- Many HIV researchers have turned their attention to COVID-19
- Our AETCs are involved in training the health care workforce about COVID-19

Cassidy Shemelia, Social Worker

“Working through the pandemic daily has forced me to make adjustments in my personal life to protect the ones I love. I haven’t seen my parents in more than a month. It gives me peace of mind to know that even if I happen to be exposed, I would not be transmitting it to them. This also brings sorrow... This is quite a time of uncertainty that will have a lasting impact on us all.”

*Source: *The New Social Worker*

How has COVID affected Care Team Members?

- No time to deal with our own circumstances but expected to set aside own distress to help clients, sometimes taking on work not part of our usual duties
- Guilt over helping their family members first
- The community turns to us and we don't necessarily know more than anyone else does
- We may not be able to help our co-workers if we're overwhelmed
- The health care system can be very hierarchical and no one wants to admit they're struggling
- In a crisis it feels good to be able to help and be useful

Signs of Distress During the COVID-19 Crisis

- Feelings of numbness, disbelief, anxiety or fear
- Changes in appetite, energy, and activity levels
- Difficulty concentrating
- Difficulty sleeping or nightmares and upsetting thoughts and images
- Physical reactions, such as headaches, body pain, stomach problems, and skin rashes
- Worsening of chronic health problems
- Anger or short temper
- Increased use of alcohol, tobacco, or other drugs

<https://www.cdc.gov/coronavirus/2019-ncov/prepare/managing-stress-anxiety.html>

Distinguishing Between Distress and Disorders During the COVID-19 Crisis

Distress

- Can occur in response to any adversity.
- Commonly seen in response to the COVID-19 crisis.
- More severe among workers on the front lines of responding.
- Often does not meet criteria for a psychiatric diagnosis or require specialized mental health interventions.
- Often responds well to supportive strategies.

Disorders

- Usually accompanied by persistent severe subjective distress and/or functional impairment.
- Meet recognized diagnostic criteria (ICD, DSM).
- Call for evidenced-informed mental health interventions such as medication and psychotherapy.
- Rules have been relaxed for providing mental health services by virtual means.

Anxiety

- Anxiety is a normal reaction to fear and stress which helps us to react to situations that produce those feelings.

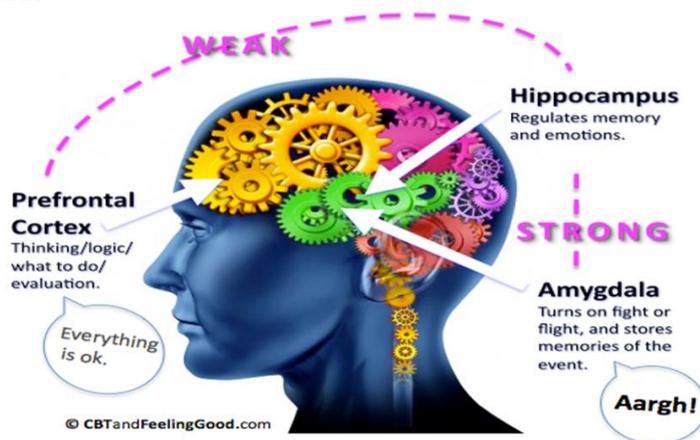
FIGHT



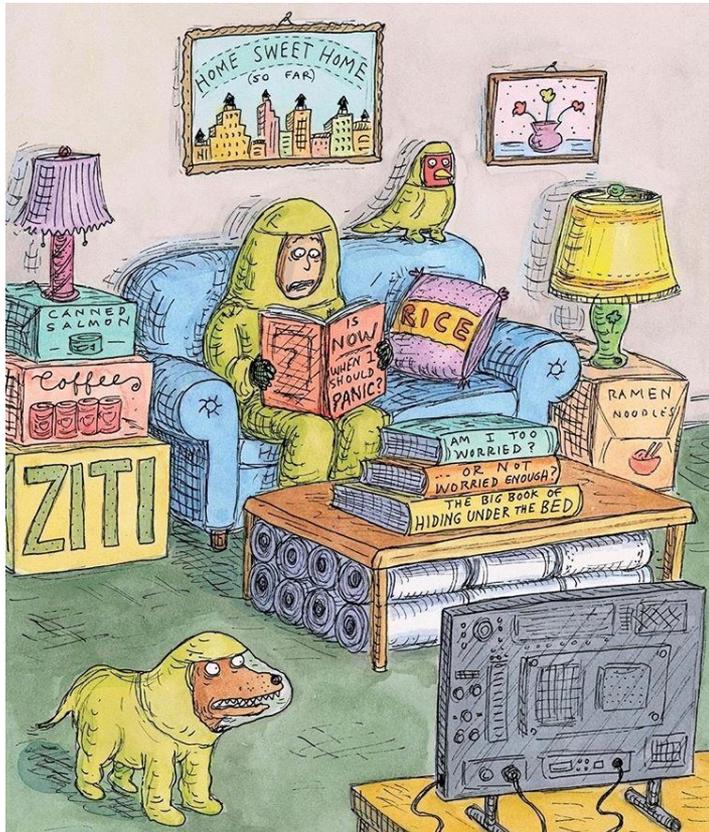
FLIGHT Oohtala!



FREEZE



When Anxiety Becomes a Problem



Debilitating Feelings



PAUSE

- **P**ause for a moment
- **A**nalyze your breathing, mind, and body
- **U**se the moment and your breathing to release tension
- **S**tretch and move
- **E**xhale completely



Adapted from: “Mindful Self-Compassion” by Christopher Germer and Kristen Neff

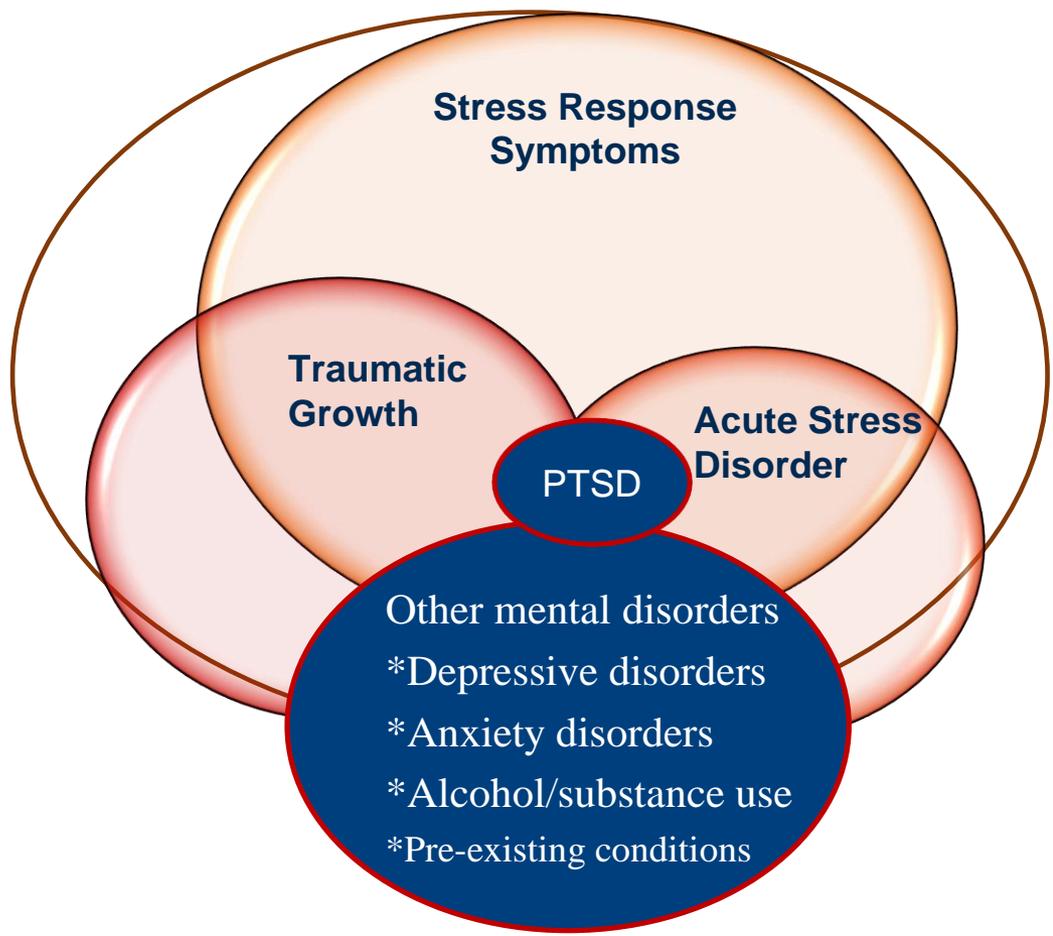
Health Workers' Experience and Wellbeing During the COVID-19 Pandemic in the US

- On-line survey of health workers in the US at 25 medical centers in May 2020
- A convenience sample; N=1132
- Instruments:
 - PHQ-9: Major Depression
 - GAD-7: Generalized Anxiety Disorder
 - PC-PTSD: Post-Traumatic Stress Disorder
 - AUDIT-C: Hazardous Alcohol Use

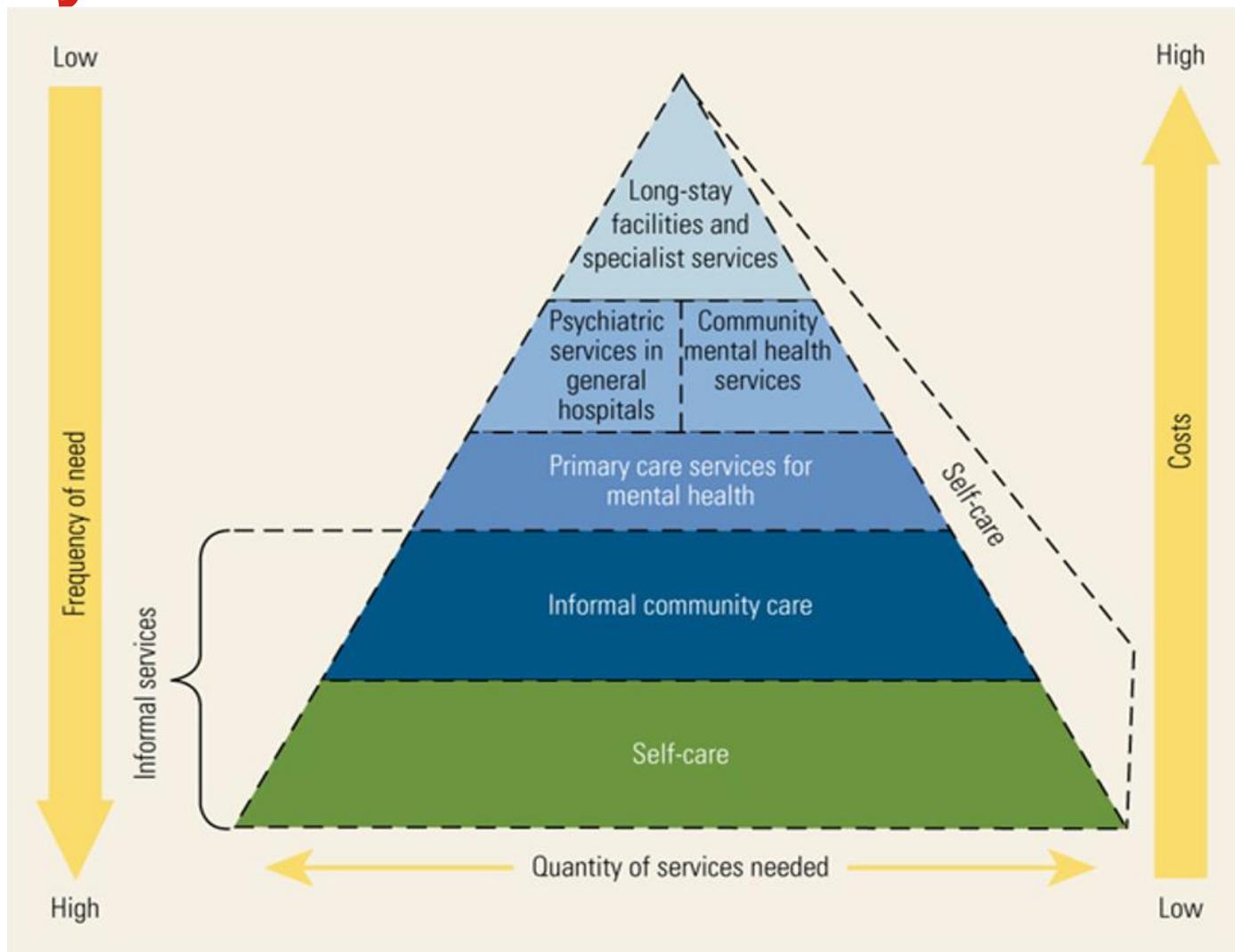
Health Workers' Experience and Wellbeing During the COVID-19 Pandemic in the US

- “Probable” major depression (PHQ-9 \geq 10): 14.0%
 - Average score was 4.8
- “Probable” generalized anxiety disorder (GAD-7 \geq 10): 15.8%
 - Average score was 4.9
- “Probable” posttraumatic stress disorder (PC-PTSD \geq 3): 23.1%
 - Average score was 1.4
- “Probable” alcohol use disorder (AUDIT-C \geq 4 for men & \geq 3 for women): 42.6%
 - Average score was 2.5

Responses to Traumatic Experiences



The World Health Organization (WHO) Pyramid of Mental Health Services



- **Seek mental health care when needed**– If distress impacts activities of your daily life for several days or weeks, or if your symptoms are severe, reach out for formal mental health care.
- Many local and national resources have been created to respond to COVID-19. This includes local and national helplines.
- We list multiple resources at the end of this webinar for you to use and share.

How to recognize burnout and manage compassion fatigue

Challenges to Coping

- ✦ **Protest/Outcry**: feeling stunned, confused, anxious and finding relief through angry outbursts
- ✦ **Denial**: trying to hide or bury or ignore feelings
- ✦ **Intrusion**: memories and emotions flood in, trouble concentrating and sleeping

Process the experience: learning to accept what's happening and adopting a strategy to manage it in a healthy way

Facilitators of Coping

- Seeking support from others like friends and relatives
- Seeking a support group after a traumatic event like the death of a loved one or co-worker
- Learning to feel good about how we dealt with a crisis
- Realizing that we have the ability to act and respond effectively even while feeling fearful
- Journaling can be a source of building our sense of competence and self-efficacy

Burnout

- Included in the 11th Revision of the International Classification of Diseases (ICD-11) as an occupational phenomenon—**not** classified as a medical condition.
- World Health Organization: Syndrome resulting from chronic workplace stress that has not been successfully managed.
- Maslach Burnout Inventory—sample item
 - I don't really care what happens to some patients.

Dealing with Burnout: The Three R's

Recognize – Watch for the warning signs of burnout

Reverse – Undo the damage by managing stress and seeking support

Resilience – Build resilience by attending to physical and mental health

What to Do

Occurrence, Prevention, and Management of the Psychological Effects of Emerging Virus Outbreaks on Healthcare Workers: Rapid Review and Meta-analysis

- 159 papers met criteria for inclusion
- Studies examined risk and protective factors for the psychological well-being of healthcare workers in any clinical setting responding to COVID-19, SARS, MERS, Ebola and severe strains of Influenza A
- The authors made recommendations for healthcare workers responding to COVID-19 based on the results

What to Do: Strategies that help

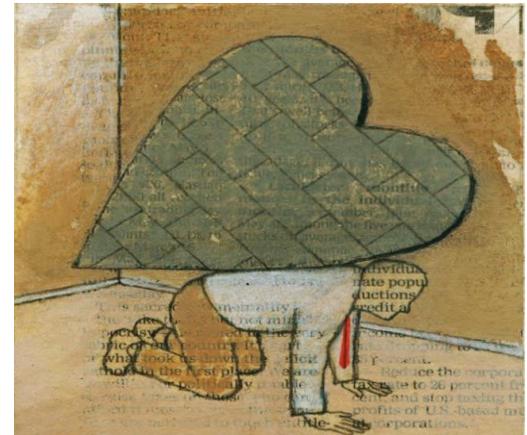
- Provision of protective gear (PPE)
- Measures to increase safety (e.g. ventilation, reduced patient density, etc.)
- Staff “buddy” system to support personal precautionary measures
- Enforcement of infection control procedures
- Alternative accommodation for staff who are concerned about infecting their families
- Video facilities for staff to contact significant others
- Guaranteed food and daily living supplies
- Sufficient rest, time off, breaks during work

What to Do: Strategies that help

- Training and education around infectious diseases
- Clear and supportive communication in care settings
- Peer and family supports
- Opportunities for reflection on the effects of stress
- Access to psychological interventions
- Recognition of staff efforts

Compassion Fatigue

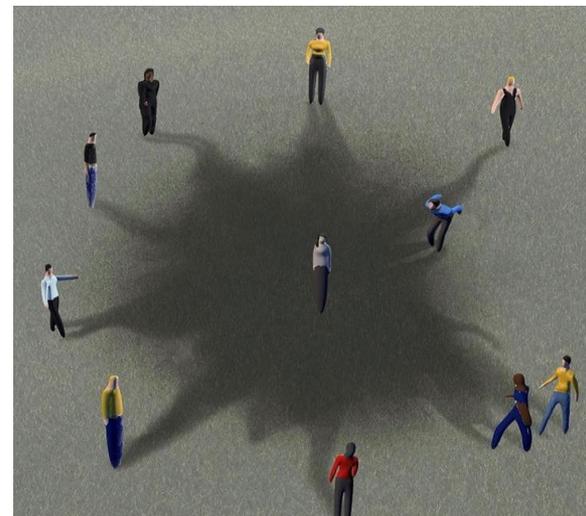
- Compassion fatigue is not a mental health disorder
- State of physical, emotional, and mental exhaustion
- Response to prolonged stressful work situations, associated with misgivings about how we spend each day and the value of our work
- Most common with exposure to traumatic events
- Associated with insufficient resources



Freudenberger, 1974; Pompilli et al., 2010

Workplace Contributors to Compassion Fatigue

- Lack of control
 - *Inability to influence decisions that affect your work*
- Confusing expectations
 - *Lines of authority, what supervisors and others expect from you*
- Dysfunctional dynamics
 - *Bullying or workplace environment where you feel underappreciated by your colleagues or where your boss micromanages you*
- Conflicting values
 - *Your values differ from your employer's*



Compassion Satisfaction

- Enjoying compassion is an important factor in motivation to to help
- The feeling of being expanded and made happy through helping another person
- Provider joy
- Contributors
 - Having a contract to do the work
 - Working during the day
 - Experience with traumatized patients
 - Feeling part of a team at work

Workplace Contributors to Compassion Satisfaction

- Modifications in organizational structure and work processes
 - Addressing workplace stressors in groups
 - Work schedule
 - Work load
 - Leaving work at work
 - Supervision
- Improving harmonious workplace relationships between providers and the organization through professional development to make a better work environment
 - Attending conferences and retreats without having to ask for time off from work
 - Structured share-back with those who did not attend

Know your limits!



Instructions: Make a list of signs and symptoms that tell you that you're approaching your limit.

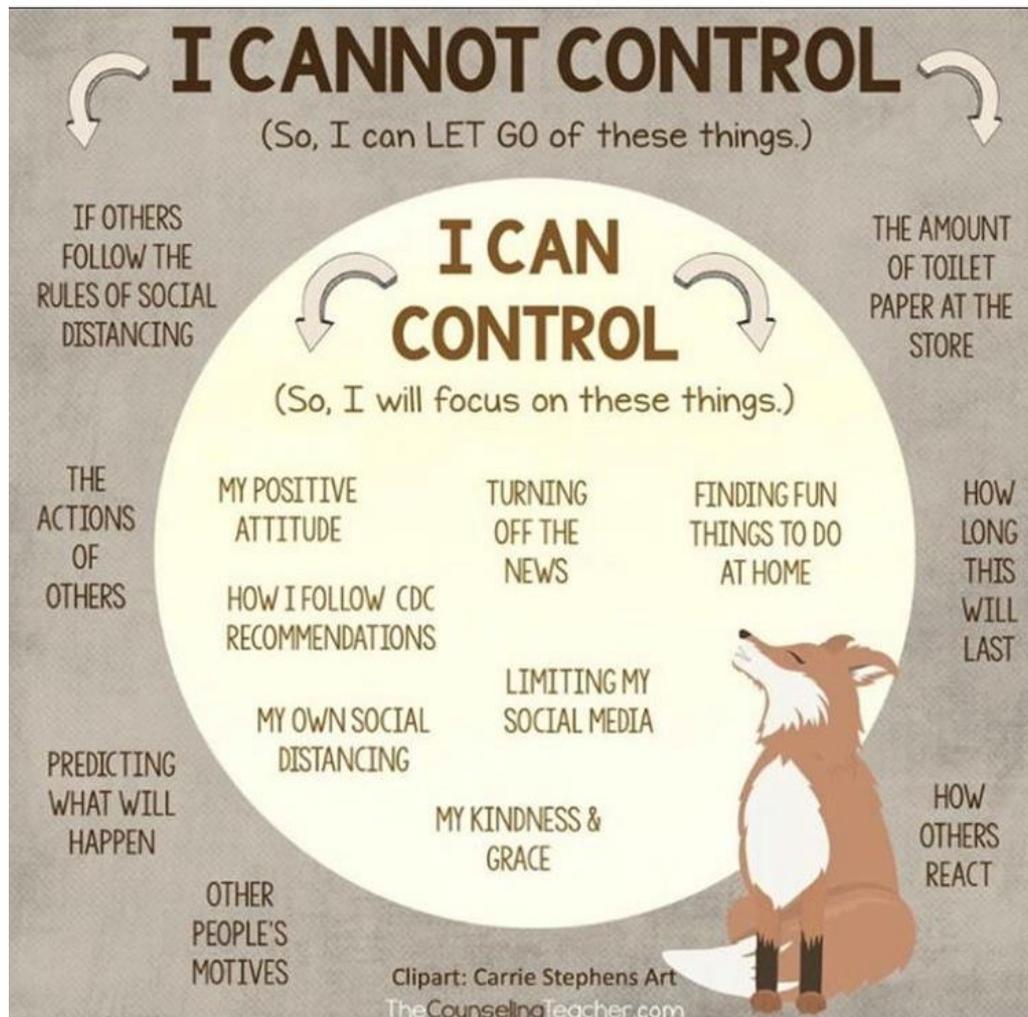
- **PAY ATTENTION** to these signals. Notice when they arise.
- **OBSERVE** yourself. What do these signals tell you about how close you are to your limit?
- **STOP YOURSELF** and take a time out to rest. Walk, stretch, breathe deeply, meditate, talk with a friend or co-worker. Take care of your physical needs.
- **LISTEN** to what your body and your emotions tell you. Treat yourself with the same care and respect you give your patients.

Self-care for providers

What are some of the things currently stressing you out?

- Please write 1-2 of your stressors into the Chat box





Jeffrey Oppenheim, Neurosurgeon

“Working “As a neurosurgeon, I’ve always found it important to contain my emotions. These last two months I’ve cried more than I have in decades. Allowing myself that vulnerability has been cathartic.”

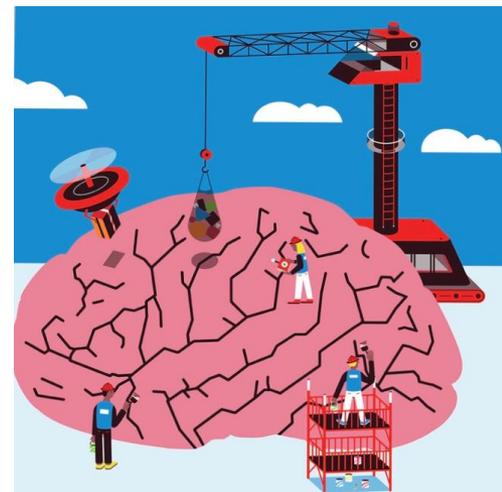
*Source: The New York Times

Self-Care to Build Resiliency

- Talk with someone about your feelings - anger, sadness, and other emotions - no matter how difficult it seems.
- Try not to feel responsible for tragedy or frustrated by not having been able to do something directly to rescue people.
- Adopt methods to promote your own physical and emotional wellbeing through healthy food, rest, exercise, relaxation, and meditation.
- Within what's possible, maintain a routine in the familiar and daily without taking additional responsibilities for yourself or your family.

Effective Approaches

- Relaxation
- Mindfulness
- Sleep-diet-exercise
- The mind and the body are part of a single ecosystem regulated by our brains. Let's take care of our whole selves.



Effective Approaches

- Relaxation, mindfulness, sleep-diet-exercise
- Either one-to-one or group Cognitive Behavioral Therapy (CBT)
 - Cognitive Restructuring
- Medication
 - Antidepressants—Can help with symptoms of sadness, anxiety, and irritation

Wellness Strategies

- Regular cardiovascular exercise
- Mindfulness Eating
- Practicing Sleep Hygiene
- Managing work schedule
- Doing Pleasurable hobbies



Mindfulness

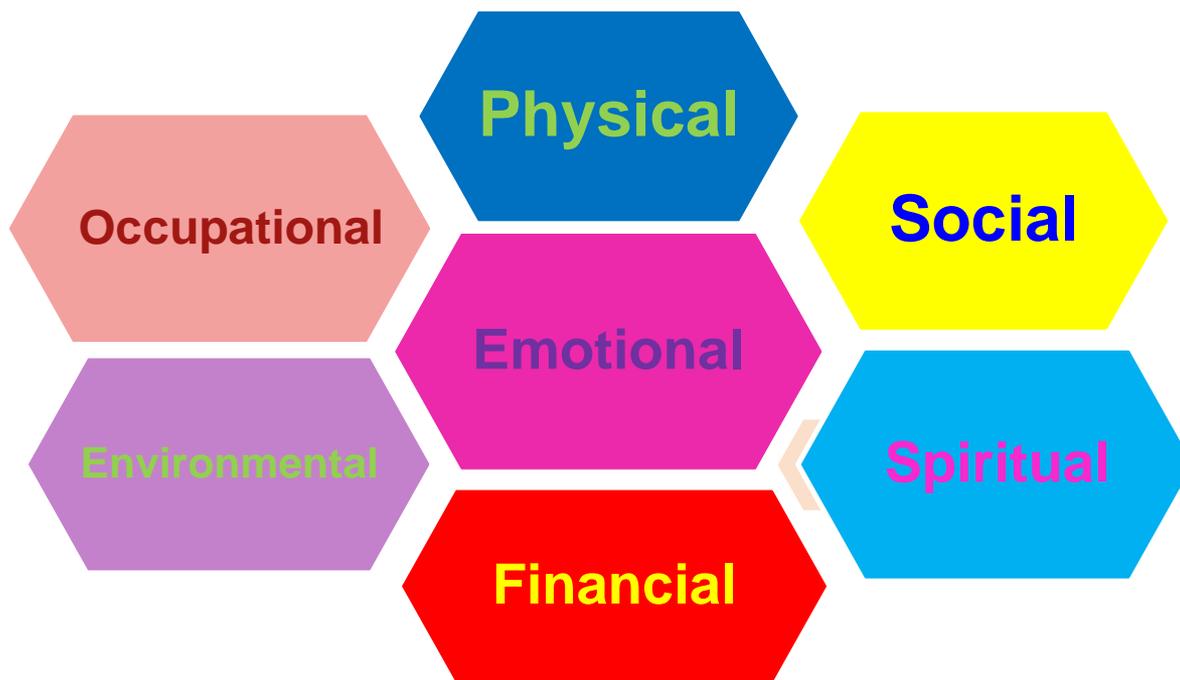
- Being mindful is the process of being moment-to-moment, actively and openly observing your own physical, mental, and emotional experiences.
- Mindfulness is evidence-based as a method to reduce stress, improve attention, stimulate the immune system, reduce emotional reactivity, and promote a sense of health and well being.
- Easier said than done?



Questions to use as daily mindfulness anchors

- What do I need in this moment to support positive thinking?
- What self-care practices will help me be better prepared to care for my clients, colleagues and loved ones?
- How can I balance my needs with the needs of others?
- How can I maintain an open and grateful attitude when I interact with people who need my attention?
- What will help me connect genuinely with my others when they're sharing their needs, concerns and thoughts?

Toolbox for Building Wellness



Stoewen DL. Dimensions of wellness: Change your habits, change your life. *Can Vet J.* 2017;58(8):861-862.

Exercise: 8 Dimensions of Self-Care

- Consider the questions on the next several slides about each of the 8 dimensions of well-being.
 - Emotional
 - Environmental
 - Financial
 - Intellectual
 - Occupational
 - Physical
 - Social
 - Spiritual

Questions

- Emotional well being
 - ✓ Are you aware of your emotions throughout the day?
 - ✓ Do you express your emotions respectfully?
 - ✓ Do you have healthy emotional habits?
- Environmental well being
 - ✓ How do your home and work environments affect you?
 - ✓ Do you spend time in nature or outdoors?

Questions

■ Financial well being

- ✓ Do you have resources and knowledge needed to maintain your financial health?
- ✓ Do you plan and feel secure in your financial future?

■ Intellectual well being

- ✓ Do you take advantage of opportunities to learn in your personal and professional lives?
- ✓ Have you found forms of creative expression for yourself?

Questions

- Occupational well being
 - ✓ Do you feel personally fulfilled and energized from your work?
 - ✓ Are you satisfied with the direction your career seems to be taking?
- Physical well being
 - ✓ Do you choose healthy foods?
 - ✓ Are you physically active?
 - ✓ Do you use drugs/alcohol to alleviate stress?

Questions

■ Social well being

- ✓ Do you actively participate in activities with your family and community?
- ✓ Are there people you can reach out to when you need help?

■ Spiritual well being

- ✓ Do you find meaning in your life?
- ✓ Are you doing work that's compatible with your values?

Polling Question 5

- After today's presentation, is there a particular dimension you'd like to focus your attention on?

- Emotional
- Environmental
- Financial
- Intellectual
- Occupational
- Physical
- Social
- Spiritual

Posttraumatic growth

- We've responded to a crisis, and it feels good to help and be useful
- We're getting better at caring for people with COVID-19; this is reflected in a lower rate of death, even when cases spike
- We've increased our expertise in using the internet for patient care, work meetings, and training
- Vaccines are being rolled out and people are feeling hopeful that the worst of the pandemic soon will be behind us

The Wounded Healer

There is a transformative and healing effect when we recognize how our individual suffering is a personalized reflection of our collective suffering. Our personal wound is the footprint and signature of the collective wound in which we all share and participate. It is liberating and healing to step out of pathologizing ourselves and re-contextualize our personal conflicts, problems and wounds as part of a wider transpersonal pattern of human experience.

*From an essay by Paul Levy. The term “Wounded Healer” was coined by Henri Nouwen, a Dutch Catholic priest, professor, writer and theologian.

Resources

Resources

- Mindful Self-Compassion
<http://www.mindfulnesscompassion.org/>
- The Maslach Burnout Inventory (MBI)
<http://www.mindgarden.com/products/mbi.htm>
- Fortney, L., Luchterhand, C., Zakletskaia, L., Zgierska, A., & Rakel, D. (2013). Abbreviated mindfulness intervention for job satisfaction, quality of life, and compassion in primary care physicians: A pilot study. *Annals of Family Medicine*, 11(5), 412-420.
- Nedrow, A., Steckler, N. A., & Hardman, J. (2013). Physician resilience and burnout: Can you make the switch? *Family Practice Management*. Retrieved from <http://www.aafp.org/fpm/2013/0100/p25.html>

Resources

- Dyrbye, L. N., Satele, D., Sloan, J., & Shanafelt, T. D. (2013). Utility of a brief screening tool to identify physicians in distress. *Journal of General Internal Medicine*, 28(3), 421-427
- National Anxiety Foundation: www.lexington-online.com/naf.html
- National Center for Posttraumatic Stress Disorder (PTSD): www.ptsd.va.gov

Resources

**Screening Linked to Use of Clinical Calculators & Tools:
The HIV National Curriculum: www.aidsetc.org/nhc (Free)**

Mental Disorders Screening

Anxiety: GAD-2

Anxiety: GAD-7

Dementia: IHDS

Depression: PHQ-2

Depression: PHQ-9

PTSD: PC-PTSD-5

Substance Use Screening

Alcohol: AUDIT-C

Alcohol: CAGE

CAGE-AID

Drug Abuse: DAST-10

Drug Abuse: TICS

Opioid: Risk Tool

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<https://aidsetc.org/resource/hiv-sars-cov-2-webinar-series>