

Until the Bitter Weather Passes: Well-being and Courage in Times of Stress



Dael Waxman, M.D.
Professor of Family Medicine
Medical Director, Physician Well-being for Medical Education

Overview

Psychological impact of pandemic(s)

Supporting mental health: medical learning environment

Well-being in times of stress

Courage

Post-traumatic growth



Take Home Points

- Mentally distressed healthcare professionals will not generally seek help.
- Healthcare and medical education systems need to be proactive re: mental distress.
- Peer support is effective.
- Being intentional about (even short) social connections is vital when isolated.
- Holding a focus group is a very effective means for individual and group processing of the stresses of the pandemic.

Learner's Voices



Learner Voice: What it was like to be me this past year.

On the surface, just an intern and later second year resident going through her rotations. Trying to reassure herself that her much needed vacation that was canceled is for the better; her mom going to work in a hospital every day was going to be ok; her pregnant sister also working in a hospital everyday was going to be ok; working out at home is just as good as going to the gym; going this long without seeing my parents is fine; etc. And then dealing with protests and innocent killings here and in Nigeria, constantly checking on other people to make sure they were ok. Trying to educate people on so many issues that affect me and my patients everyday but are suddenly news to the rest of the country. It was attending a candlelight vigil for young lives taken by the Nigerian government, then going to work the next day taking care of a sick patient with COVID, then going to the store after work and hearing someone talk about the government's conspiracy theory and how covid is a lie. It was just a lot of just trying to swallow the new reality and force it to be ok because it had to be, and I just had to keep moving forward. It was now more important than ever to stay safe so I could work because you never knew when someone would have to call out. Even though I lived alone and had my own life, I had to be so mindful of my actions for the sake of my colleagues that I would see the next day.

At the same time, I was developing a relationship. I was getting to know this very special person better and better, growing and falling in love. He was there to process all of my random emotions and frustrations. Who knew before such a crazy year would end, I would get proposed to and become a fiancé!

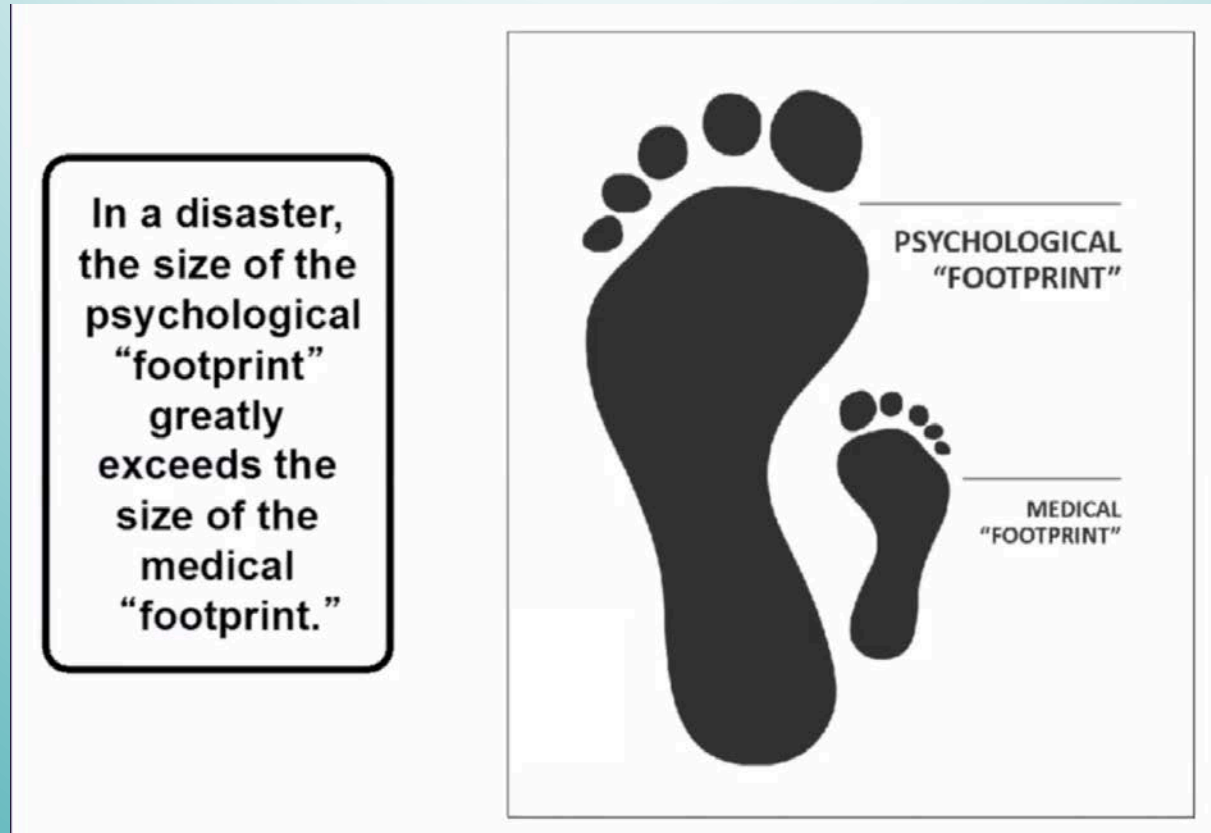
So, me in the pandemic was a whirlwind. Like a full blender. Underneath towards the blades everything is spinning around like chaos, but on top things are calmer and still.

Psychological Impact of the Pandemic

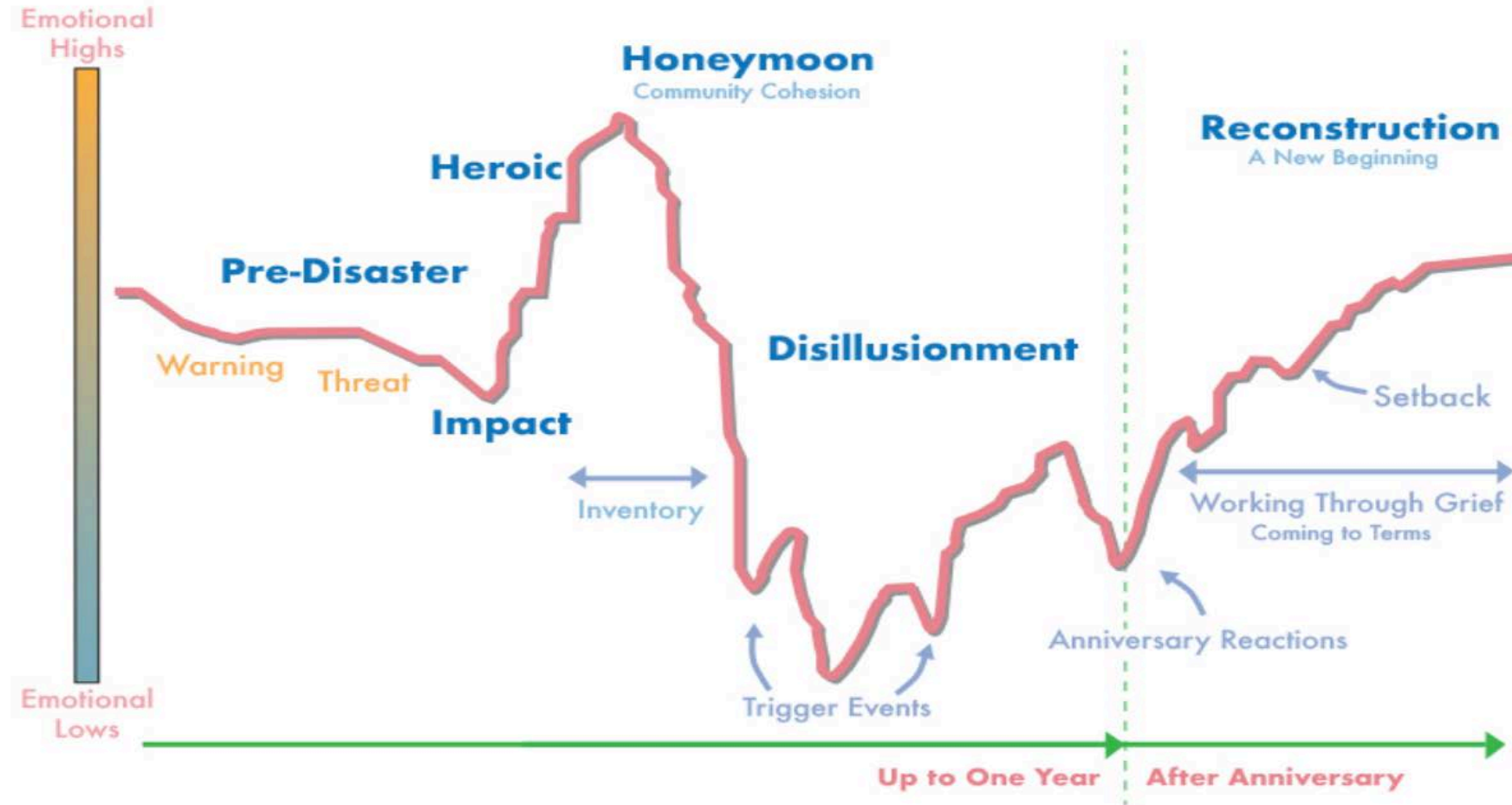
- Disaster Medicine Model – Community
- Healthcare Prof. Psychological Reactions
- Stressors in the Healthcare Setting Model



This is expected



Phases of Disaster



DeWolfe, D. J., 2000. Training manual for mental health and human service workers in major disasters (2nd ed., HHS Publication No. ADM 90-538). Rockville, MD: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration,

Psychological & Behavioral Responses to Pandemics/Disaster



Morganstein, Joshua : ACGME Resident Well-being Meeting, October, 2020. Adapted from:
Ursano R, Fullerton C, Weisaeth L, Raphael B. Individual and Community Responses to Disasters.
(In: Textbook of Disaster Psychiatry), Cambridge University Press, 2017.

US MENTAL HEALTH

Mental Health, Substance Use,
and Suicidal Ideation During
the COVID-19 Pandemic —
United States, June 24–30, 2020

3x

ANXIETY

25.5% vs. 8.1%

4x

DEPRESSIVE DISORDER

24.3% vs 6.5%

2x

SUICIDAL IDEATION

10.7% vs 4.5%

Czeisler et al. "Mental Health, Substance Use, and Suicidal Ideation During the COVID-19 Pandemic — United States, June 24–30, 2020" [MMWR Morb Mortal Wkly Rep.](#) 2020 Aug 14; 69(32): 1049–1057.

Healthcare Workers – Early in Pandemic

Proportion of respondents reporting psychological symptoms:



- depression, 50.4%;
- anxiety, 44.6%;
- insomnia, 34%; and
- distress, 71.5%.

Learner Voices – What did you feel?

“On the MICU rotation, I was terrified and scared. I didn’t want to infect my family. Harrowing to see patients get sicker. It’s the most afraid I’ve ever felt.” - MS4

“Hopelessness. I saw patients that were completely healthy and then got deathly ill. Then I would go home and see news reports about anti-masking. It made me feel hopeless and unheard.” - MS3

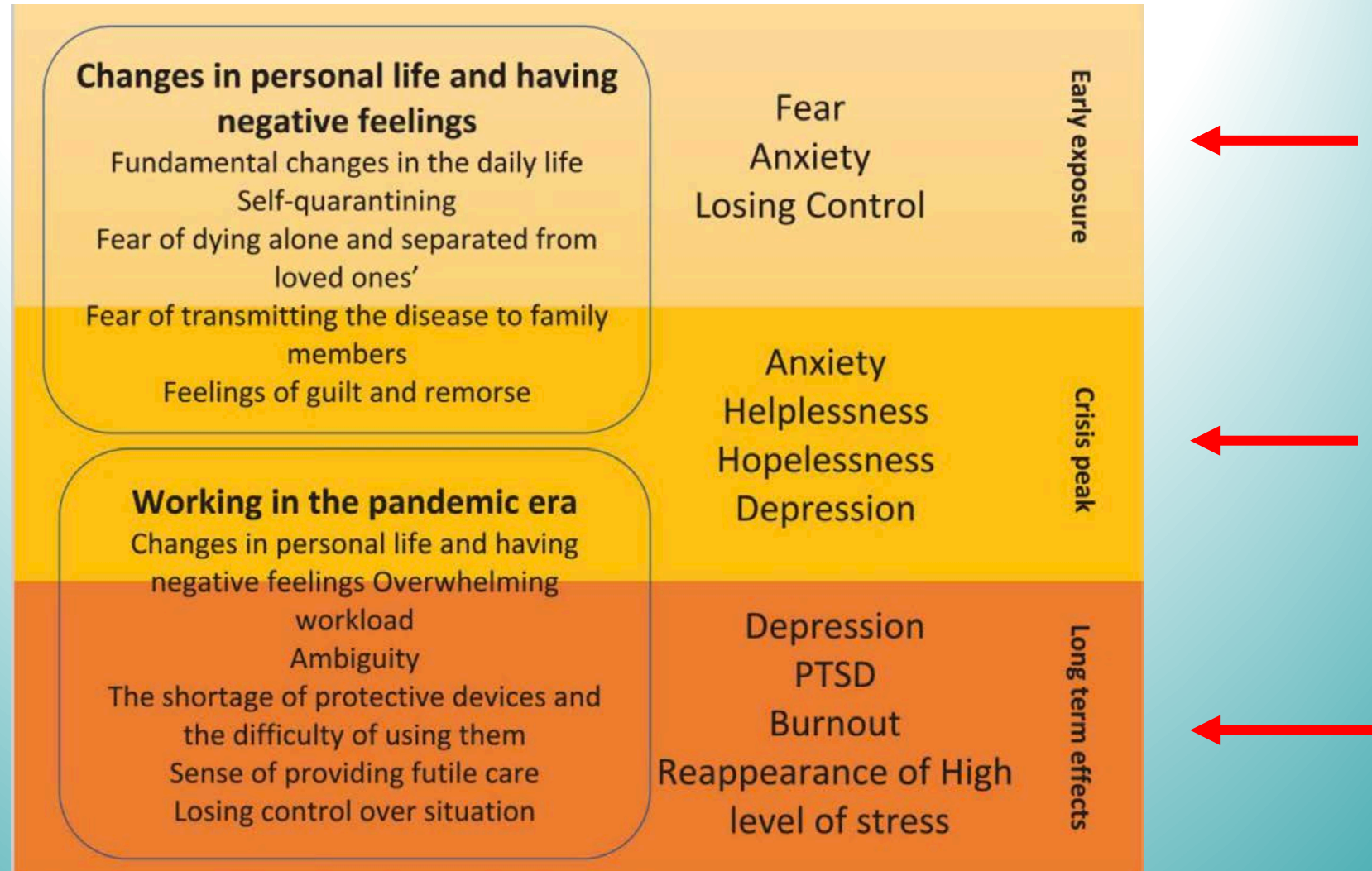
“It has been a draining year because of distancing. My relationships were impaired because of this. In patient care with COVID patients, had to use futility clause. Low health care literacy of family members made this emotionally draining and difficult.”

- Surgery PGY-2

“First and foremost, it felt isolating.” - Orthopedics, PGY-3

“Experienced repeated trauma with seeing dead bodies. Calling family members to deliver the news was heartbreaking.” - Family Medicine PGY-1

Healthcare Professionals' Psychological Reactions – By Stages



Ardebili, et al. "Healthcare providers experience of working during the COVID-19 pandemic: A qualitative study."

[Am J Infect Control](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7536124). 2020 Oct 6 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7536124> :

Stressors in Healthcare Setting Model

Fear for Basic Needs

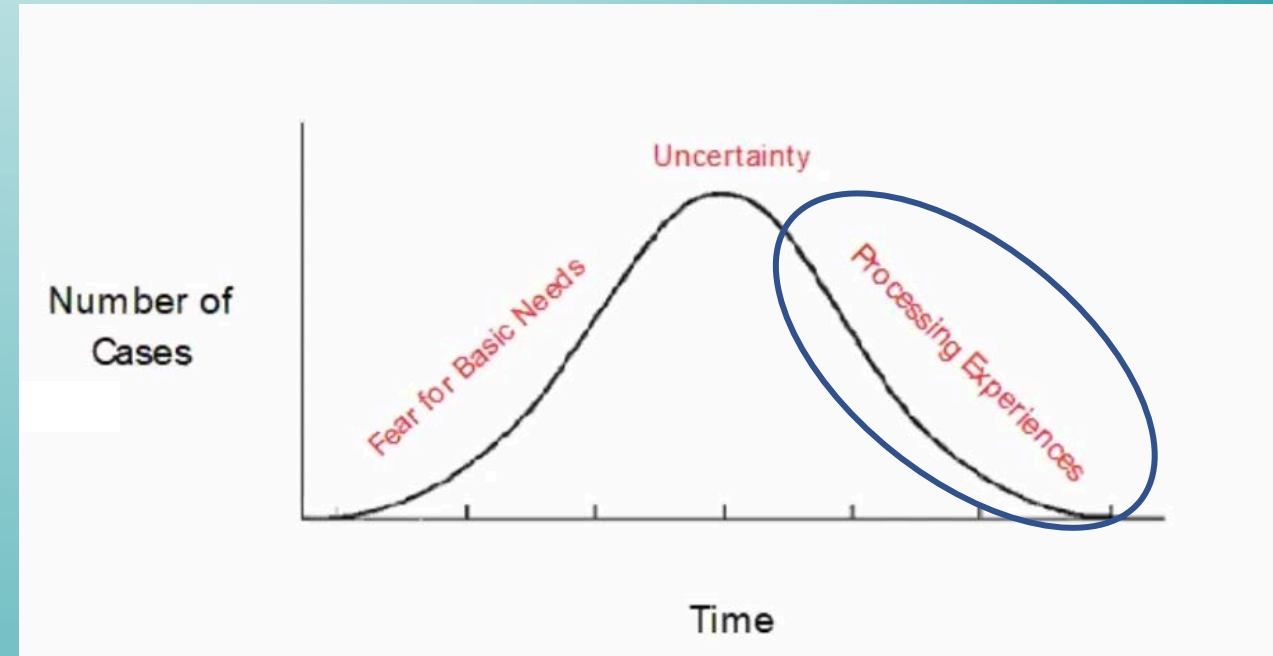
- What will I eat?
- How will I be kept safe?
- Who will care for my children?

Uncertainty

- How long will this workload be?
- Am I trained for the work?
- Am I doing enough?
- Will I be supported by employer?

Processing Experiences

- Grief and Loss
- PTSD
- Anxiety and Depression



Pandemic Curve: Addressing Stressors

Provide Basic Daily Resources

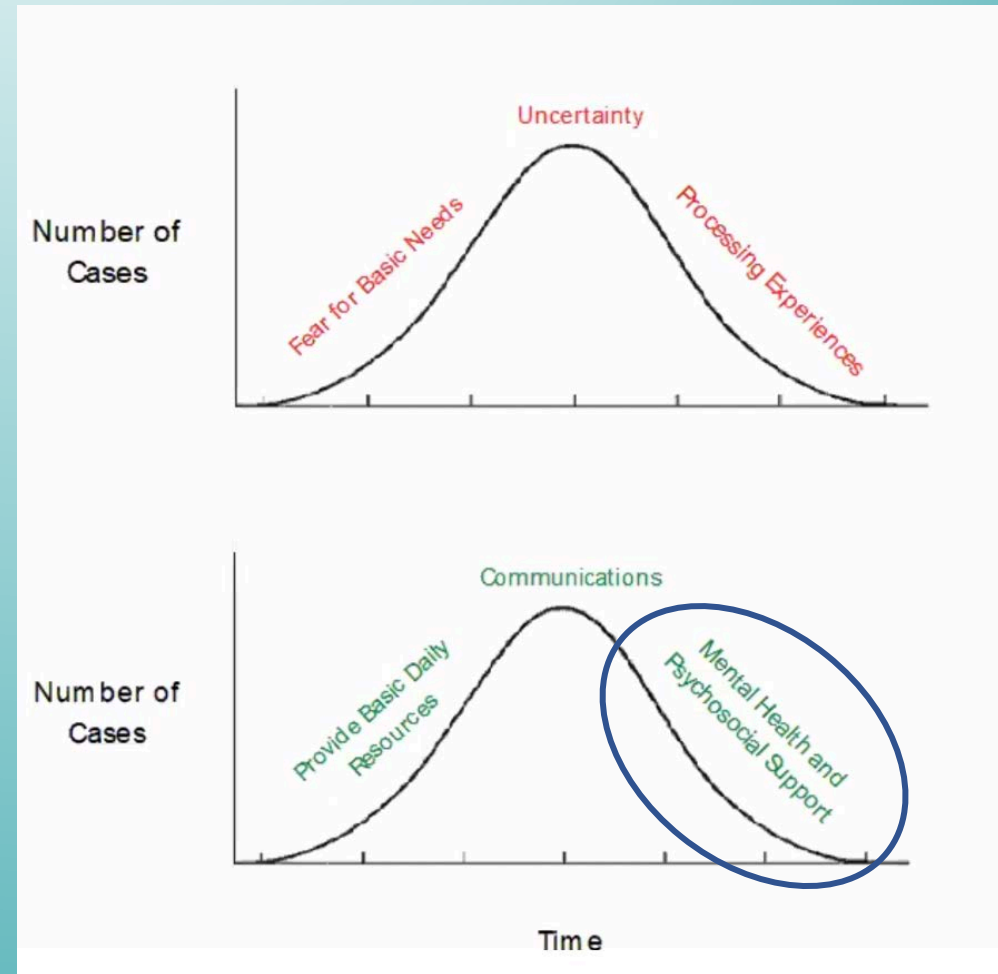
- Food
- PPE
- Childcare resource

Communication

- Transparency
- Succinct and clear
- Wellness messages

Psychosocial and Mental Health

- Proactive Support
- 24/7 phone lines
- EAP
- Support Groups
- Stress First Aid
- Peer Support



The Good News

“Most people injured by trauma, disaster, and fatigue will cope.”

- Patricia Watson, PhD
National Center for PTSD

However....

“Some will become ill...and many that do are unlikely to seek help, even if things are set up to access [that help] easily.”

In other words, if you build it, they won't necessarily come.

More Good News

“Early management of stress reactions is effective.”



Watson P. *Caring for Yourself & Others During the COVID-19 Pandemic: Managing Healthcare Workers' Stress.*
Webinar: March 24, 2020. Schwartz Center for Compassionate Care.

Supporting Mental Health in the Learning Environment

- 24/7 phone line support
- EAP
- Proactive Support
- Support Groups
- Stress First Aid
- Peer Support
- Focus Groups



Supporting Mental Health in the Learning Environment

- 24/7 phone line support



- EAP



Supporting Mental Health in the Learning Environment

- Proactive Support



Heather Farley, M.D. and team, Christiana Healthcare

Supporting Mental Health in the Learning Environment

Support Groups

Open



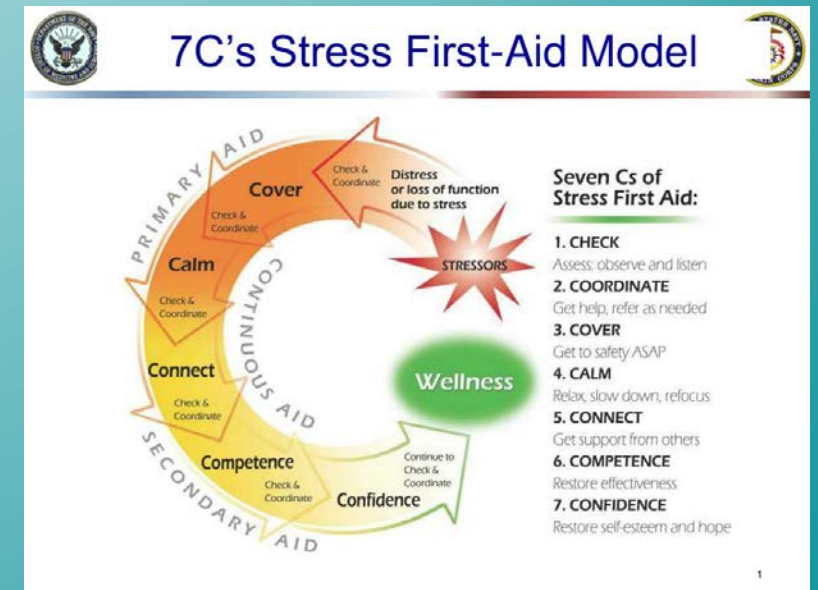
Focused



Supporting Mental Health in the Learning Environment

Stress First Aid

Stress Continuum Model			
READY (Green)	REACTING (Yellow)	INJURED (Orange)	ILL (Red)
DEFINITION <ul style="list-style-type: none"> Optimal functioning Adaptive growth Wellness 	DEFINITION <ul style="list-style-type: none"> Mild and transient distress or impairment Always goes away Low risk 	DEFINITION <ul style="list-style-type: none"> More severe and persistent distress or impairment Leaves a scar Higher risk 	DEFINITION <ul style="list-style-type: none"> Clinical mental disorder Unhealed stress injury causing life impairment
FEATURES <ul style="list-style-type: none"> 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 	FEATURES <ul style="list-style-type: none"> Feeling irritable, anxious or down Loss of motivation Loss of focus Difficulty sleeping Muscle tension or other physical changes Not having fun 	FEATURES <ul style="list-style-type: none"> Loss of control Panic, rage or depression No longer feeling like normal self Excessive guilt, shame or blame 	FEATURES <ul style="list-style-type: none"> Symptoms persist and worsen over time Severe distress or social or occupational impairment
	CAUSES <ul style="list-style-type: none"> Any stressor 	CAUSES <ul style="list-style-type: none"> Life threat Loss Moral injury Wear and tear 	TYPES <ul style="list-style-type: none"> PTSD Depression Anxiety Substance abuse



Supporting Mental Health in the Learning Environment

Peer Support

Battle Buddies

- Buddy systems (swim buddy, high risk work “buddy checks”, 12-step pgms)
- Safety, social support, efficacy
- Formal (vs ad hoc) peer support
- Collaborative selection process
- Daily check-ins: self-care, emotional health, camaraderie



Check – in: 2-3 times/week

- What is hardest right now?
- What worried you today?
- What went well today?
- How are things at home?
- What challenges are you facing with sleep/rest, exercise, nutrition?

Albott CS, et al. “Battle Buddies: Rapid Deployment of a Psychological Resilience Intervention for Health Care Workers During the COVID-19 Pandemic” *Anesthesia & Analgesia*: [July 2020 - Volume 131 - Issue 1 - p 43-54](#)

Learner Voices – How did you cope?

“Poured myself into wellness activities that I hadn’t before: hiking, virtual meetings with friends. I was intentional about doing something to lift my spirits.” - MS3

“Leaned on support systems. It was helpful to have friends outside of medicine – to escape from this world for awhile.” - MS4

“This is a burden that I didn’t anticipate. I decided to be vulnerable and not project. I was aware that I had to ‘fill my tank’. I did this by actively talking with people outside of medicine who are supportive.”
- Family Medicine, PGY-2

I dealt with so many [non-accidental trauma] and [suicidal] patients. We get them to a good place then they leave and go to a place with limited resources. We discharge and wonder how long before we will see them again. At the end of the day, cultivated gratitude for having a safe place to be.”
- Pediatrics PGY-2

Supporting Mental Health in the Learning Environment

Focus Groups



“Our deepest human need is to be seen by other people — to really be seen and known by someone else.....”

- Brene' Brown

Sample Questions for a Focus or Support Group

1. What are/have been your greatest challenges, hassles, or frustrations?
2. What are/have been your greatest rewards/successes?
3. What does it mean to be on this team/in this program?



Learner Voices - How did you feel after the focus group?

“A sense of release!” - Fam Med PGY-2

“It was cathartic.” - Orthopedics, PGY-3

“Helpful because I don’t always speak out.” - MS3

“This has been very therapeutic. It is very helpful to be seen and heard.” - MS4

Individual Well-being in the Pandemic




Laurie Santos, Ph.D.
Professor, Yale University
Happiness Lab

“We need to double down on well-being activities during the pandemic – especially social connections.”

Individual Well-being in the Pandemic

COVID-19


 MENU >

Tips to cope and enhance your resilience.

- Communicate with your coworkers, supervisors, and employees about job stress.
 - Talk openly about how the pandemic is affecting your work.
 - Identify factors that cause stress and work together to identify solutions.
 - Ask about how to access mental health resources in your workplace.
- Remind yourself that everyone is in an unusual situation with limited resources.
- Identify and accept those things which you do not have control over.
- Recognize that you are performing a crucial role in fighting this pandemic and that you are doing the best you can with the resources available.
- Increase your sense of control by keeping a consistent daily routine when possible — ideally one that is similar to your schedule before the pandemic.
 - Try to get adequate [sleep](#).
 - Make time to eat healthy meals.
 - Take breaks during your shift to rest, stretch, or check in with supportive colleagues, coworkers, friends and family.
- When away from work, get exercise when you can. Spend time outdoors either being physically activity or relaxing. Do things you enjoy during non-work hours.
- Take breaks from watching, reading, or listening to news stories, including social media. Hearing about the pandemic repeatedly can be upsetting and mentally exhausting, especially since you work

From CDC.GOV

Individual Well-being in the Pandemic



WELLNESS GUIDE

12/14/2020

DAILY PERSONAL CARE CHECKLIST

Upon waking

- Slept at least seven hours
- Checked medical conditions and took medication
- Stayed home if felt sick

Away from work

- Did 30 minutes of fast walking or other moderate activity
- Ate healthy, well-balanced meals
- Made time for personal hygiene
- Recharged from work with music, meditation, talking to someone, etc.

FAMILY CARE CHECKLIST

Did we ...

- Make "rules" that help our family feel safe: basic hygiene, cleaning, any special living arrangements?
- Use calming strategies with family and keep routines?
- Call or use the internet to connect with family?
- Work as a family team to deal with daily challenges and to explain COVID-19 to our children?

STRESS CHECK-UP

Do I...

- Feel irritated, angry, or in denial?
- Feel uncertain, nervous, or anxious?
- Lack motivation or concentration?
- Feel tired or that everything is too much?
- Feel sad or depressed?
- Have trouble sleeping?
- Use more alcohol, tobacco, or drugs?
- Grieve for someone who died from COVID-19?
 - *Talk to someone if you are stressed.*

WAYS TO COPE WITH STRESS AND GRIEF

Did I ...

- Talk to family, friends, people at work, or religious leaders about my feelings?
- Write down my feelings to help process them (see daily journal ideas)?
- Practice breathing and relaxation skills; take part in religious or spiritual activities?
- Focus on what I can control?
- Make basic needs and physical health a priority?
- *If you feel like hurting yourself or someone else. Call the National Suicide Prevention Lifeline (800-273-8255)*

WHERE TO TURN FOR SUPPORT

- "COVID Cares" Support Services offers 20-minute phone support from 9 a.m. to 9 p.m.; www.mnpsychsoc.org/covid-care-schedule.html
- Disaster Distress Hotline, call 800-985-5990 or text "TalkWithUs" to 66746
- Crisis Text Line, Text "MN" to 741741
- National Suicide Prevention Lifeline, call 800-273-8255

DAILY JOURNAL IDEAS

- What do I need to be and stay at my best?
- What was the hardest thing for me today?
- What do I feel good about today?
- What inspired me today?
- What gave me hope today?
- Do I need to talk or process something with my buddy?
- What did I learn about myself today?
- What am I going to dream about?
- What can I do better?
- What do I need to start again tomorrow?

From Minn. Dept of Health

Learner Voices – Well-being

“We were told by our faculty to be sure to attend to our well-being but the usual ways we do that were not available (exercise class, having dinner with classmates, going to concerts with peers, socializing!)”

- Surgery PGY-2

“Not having the ability to have resident wide activities outside of the hospital was really a downer!”

- Peds PGY-1

“Initially I went hiking and camping. This gave me perspective: the seasons pass, the earth has many seasons, everything is cyclical. This is just a phase.”

- Orthopedics, PGY-3

“Talked to family and significant other. Safely traveled to spend time with loved ones.”

- Fam Med, PGY-2

An illustration of a diverse crowd of people, all wearing face masks. The people are depicted in various colors (blue, orange, black, pink) and styles (curly hair, buns, etc.), representing a multicultural group. The text "Courage: Building a Culture of Well-being" is overlaid in the center in a white, sans-serif font.

Courage: Building a Culture of Well-being

Five Essential Elements of Immediate and Mid-Term Mass Trauma Intervention

Safety

Calming

Self/Community Efficacy

Connectedness

Hope/Optimism

Hobfoll SE, et al. "Five Essential Elements of Immediate and Mid-Term Mass Trauma Intervention: Empirical Evidence" *Psychiatry: Interpersonal and Biological Processes*, January 2008

<https://doi.org/10.1521/psyc.2007.70.4.283>

Safety



Calming

Normalizing

- Negatively charged emotions



Cultivating positive emotions

- Social connection: virtual meetings, happy hours,

Community Efficacy



Connectedness



Hope



Post-traumatic growth

The experience of individuals or organizations whose development in some areas has surpassed what was present before the traumatic event.



Post-traumatic growth

Characterized by positive changes in 5 domains:

- New possibilities → Can this disruption propel our innovation and improvement?
- Relating to others
- Personal strength → What strength did our organization display in surviving this trauma?
- Appreciation of life
- Existential change → Are we authentically serving our community and patients?

*This is the time to be slow,
Lie low to the wall
Until the bitter weather passes.*

*Try, as best you can, not to let
The wire brush of doubt
Scrape from your heart
All sense of yourself
And your hesitant light.*

*If you remain generous,
Time will come good;
And you will find your feet
Again on fresh pastures of promise
Where the air will be kind
And blushed with beginning.*



John O'Donohue

Acknowledgements

Medical Residents

Samuel Cohen-Tanugi, M.D.	PGY-3, Orthopedics
Ijeoma Okoye, M.D.,	PGY-2, Family Medicine
Cassady Hossenlopp, M.D.	PGY-3, Pediatrics
Bailey Maloney, M.D.	PGY-1, Family Medicine
Anika Trent, D.O.	PGY-1, Family Medicine
Carrie Sartor, M.D.	PGY-1, Family Medicine
Sharon Olang, M.D.	PGY-1, Family Medicine
Kaylee Smith, M.D.	PGY-2, Surgery
Kirstin Weider, M.D.	PGY-2, Physical Medicine and Rehab.
Aseem Kaul, M.D.	PGY-2, Family Medicine

Medical Students

Joi McLaughlin, MS4
Harish Pudokodu, MS4
Whitney Schwalm, MS3
Mark Baumgarten, MS3