



Indiana
Department
of
Health

MENTAL HEALTH

LINDSAY WEAVER MD

News about Mental Health In The bing.com/news



How Meghan's and William's Mental Health Appearances Went Head-to-Head

Meghan Markle's latest Spotify podcast on slurs such as "crazy" and "hysterical" ...

 Newsweek · 10h

'We need to do more than
just talk about mental health'

 BBC · 7h



Tom Brady says he's utilized
therapy to address his
mental health in recent years

 CNN · 10h



Demand for child mental
health services soars

BBC News on MSN · 7h



The worrying trend this crisis
text line worker is seeing for
mental health in Virginia

wtvr · 2h



World Mental Health Day

- The theme, which is chosen by the World Federation for Mental Health (WFMH), is "Mental Health in an Unequal World".
- The theme was chosen to highlight that access to mental health services are not equal.
- In fact, between 75% and 95% of people with mental health disorders in low- and middle-income countries are unable to access mental health services at all.
- The first World Mental Health Day was Oct. 10, 1992. It was created after WFMH realized that they needed to advocate for mental health. Since this day, the average citizen is much more knowledgeable about mental health.



How can you observe World Mental Health Day this year?

- Practice self-care.
- Educate yourself with research.
- Take time to check in on those you know are struggling with their mental health.
- Encourage equality between physical and mental illness.

Source: <https://wfmh.global/2021-world-mental-health-global-awareness-campaign-world-mental-health-day-theme/>

**You have never walked a
step in someone else's
shoes**





UNIVERSITY OF
LOUISVILLE.
SCHOOL OF MEDICINE



Indiana
Department
of
Health



SCHOOL OF MEDICINE

EMERGENCY MEDICINE



Indiana
Department
of
Health

Post Residency



West Hospital



Charles Warren Fairbanks
CENTER FOR MEDICAL ETHICS



Hospice and Palliative Medicine Fellowship



End of Life Care In the ED, hospital, and home

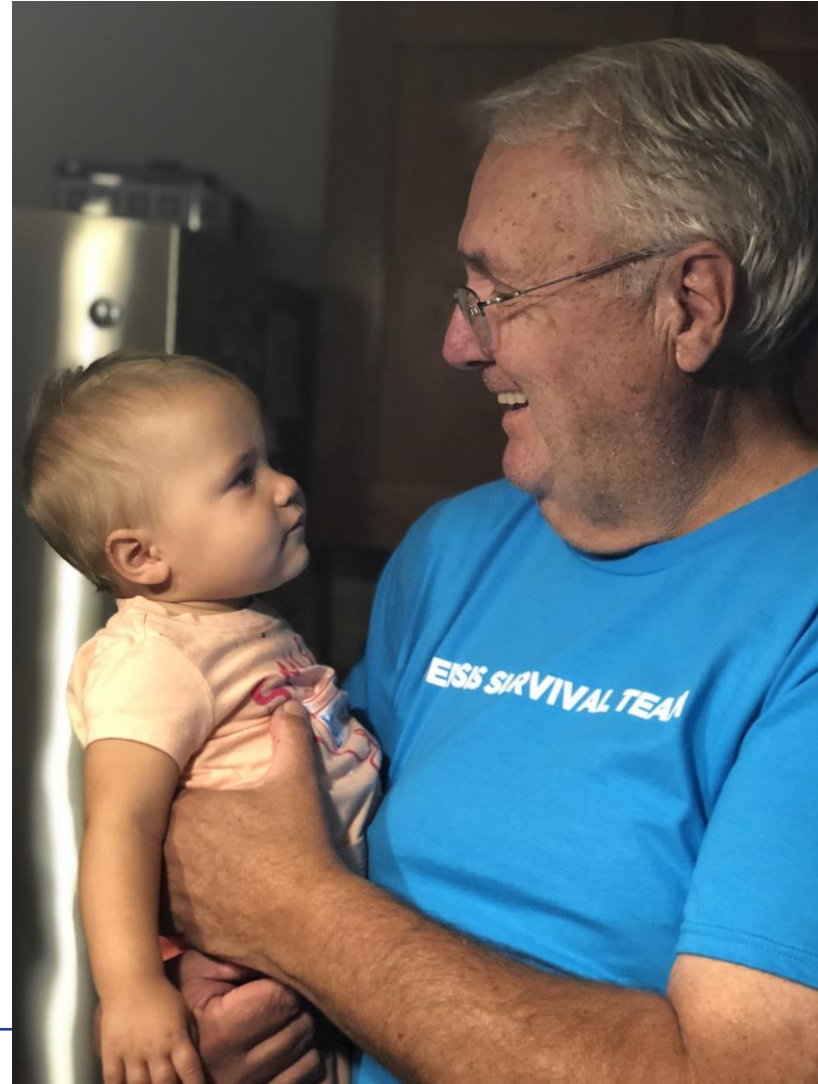
- Setting
- Communication
- Time
- Care

What's next...



Indiana
Department
of
Health

Connecting to People





Indiana
Department
of
Health

FEBRUARY 3, 2020



Indiana
Department
of
Health

February 25, 2020

"Ultimately we expect we will see community spread in this country," said Messonnier. "It's not so much a question of if this will happen anymore, but rather more a question of exactly when this will happen and how many people in this country will have severe illness."

March 6, 2020
First Case



Today

Cases

507 (↓117)

1,925,645 Total Count

Reinfections

22.3% of Cases

115,089 Total Count

Deaths

2 (↓4)

23,689 Total Count
1,059 Probable Deaths

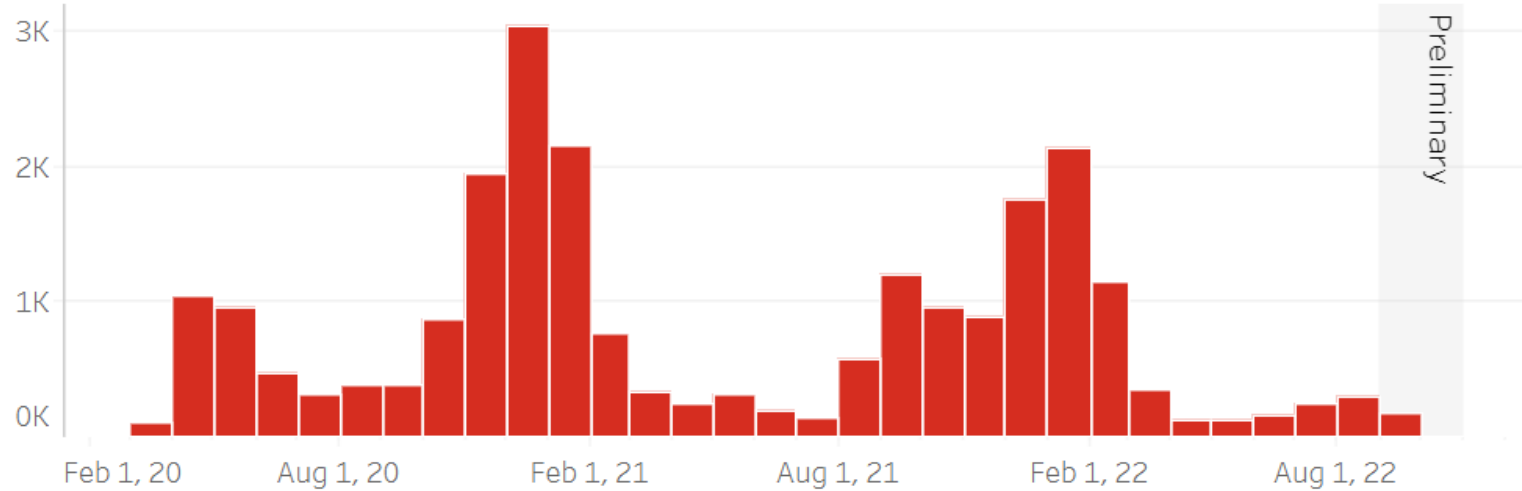
Tests Administered

5,283 (↓566)

21,058,275 Total Count

Statewide Deaths for All Time

By Month of Death



Indiana
Department
of
Health

CDC, WHO, Research, Preparedness, Supplies



Health Workers are More Likely to Experience Mental Health Problems

- Challenging work conditions put over 20 million U.S. health workers at risk for mental health problems. Health workers include everyone working in patient care, such as nurses, physicians, home health aides, and medical assistants, and many others who serve in critical support roles.
- Mental health concerns among health workers include stress, burnout, depression, anxiety, substance use disorders, and suicidal behavior.
- These mental health concerns are not new. Even before the pandemic, health workers faced challenging work conditions and suffered high rates of poor mental health outcomes.
- For example, 79% of physicians reported burnout starting before the pandemic [1].



Some of the challenging work conditions in healthcare include:

- Long work hours
- Rotating and irregular shifts
- Intense physical and emotional labor
- Exposure to human suffering and death
- Increased risk of exposure to disease and violence



Recent research shows many health workers are feeling the weight of these challenges and this has intensified with the onset of the COVID-19 pandemic. Shortages in staffing and personal protective equipment, and fatigue, loss, and grief have added a new level of burden to health workers.

According to a survey from June-September 2020 [2]:

- 93% of health workers reported being stressed out and stretched too thin;
- 82% shared being emotionally and physically exhausted; and
- 45% of nurses reported that they were not getting enough emotional support.



Other studies during the pandemic found:

- 22% of healthcare workers experienced moderate depression, anxiety, and post-traumatic stress disorder in a collective analysis of 65 studies.
- 69% of physicians reported experiencing depression and 13% had thoughts of suicide.
- Of physicians reporting burnout, 64% were women.
- Nurses, frontline, and younger workers reported more severe psychological symptoms than other health workers.

These challenges risk a serious shortage in available health workers. In one survey, 32% of nurses reported they might leave their positions within a year. The top reasons for leaving included insufficient staffing, intensity of workload, and the emotional toll of job.

PTSD in HCWs

- Healthcare Workers (HCWs) in emergency care settings are particularly at risk for PTSD because of the highly stressful work-related situations they are exposed to, that include: management of critical medical situations, caring for severely traumatized people, frequent witnessing of death and trauma, operating in crowded settings, interrupted circadian rhythms due to shift work).
- PTSD rates have been reported to range from 10 to about 20%, with even higher PTSD rates (8% to 30%) among Intensive Care Unit (ICU) staff.

-
- Although most individuals prove to be resilient after being exposed to a traumatic event, several risk factors may compromise the effectiveness of adaptation, including prior psychiatric history, female sex, lack of social support, having young children; experiencing feelings of helplessness during the trauma or intensity of emotions when exposed (i.e., anger, peritraumatic distress).
 - On the other hand, resilience, defined as the capacity to react to stress in a healthy way through which goals are achieved at a minimal psychological and physical cost plays a key role in mitigating the impact of traumatic events and hence reducing PTSS, enhancing at the same time the quality of care

-
- Some authors found first-line exposure to have a protective effect.
 - Reported that HCWs working in SARS high risk units, as expected, experienced greater distress than HCWs displaced in other departments such as the psychiatric one, but contrary to expectations HCWs caring for many SARS patients while working in high-risk units emerged as being less distressed.
 - This finding suggests that experience in treating SARS patients may be a mediating factor that could be amenable to intervention in future outbreaks.
 - This is in line with more recent findings from a COVID-19 study, according to which PTSS severity of non-front-line nurses was greater than that of front-line nurses, who showed stronger psychological endurance.
 - The authors argue that this finding may be explained considering that front-line nurses were voluntarily selected and provided with sufficient psychological preparation. Moreover, the selected front-line nurses were mainly middle-level backbone staff with working experience and psychological capacity.

Protective Factors against PTSS

- Perceived adequacy of training
- Positive working organization, such as:
 - working in structured units,
 - a sense of protection of environment and
 - clear communication of directives and of precautionary measures
 - clear and prompt communication about the disease
 - providing precautionary measures, such as Personal Protective Equipment (PPE)
 - support of a supervisor/head of department, colleagues and family



Individual risk factors

- First, female gender. Most of the studies on HCWs dealing with Coronavirus outbreaks tend to show a higher incidence of PTSD among women.
- Females, in fact, were shown to be most affected by PTSS in three SARS studies as well as younger HCWs or HCWs with fewer years of work experience.
- Moreover, nurses proved to be more affected by PTSS than other HCWs Although this has been explained as related to closer contact with infected patients, we may also argue that often the nurse staff are mostly women. Further studies in this regard are thus warranted.
- Outbreaks threatening family members' well-being or affecting children's care, in fact, may constitute a burden for women.

Copying Strategies

- All these factors could be influenced by coping styles adopted by the HCWs to address the psychic burden of the outbreak.
- Physicians chose humor as a coping strategy more frequently than nurses, and this resulted in lower post-traumatic stress morbidity.
- Other authors stressed the effect of maladaptive coping styles in predicting PTSS, such as avoidance, hostile confrontation and self-blame.

Risk factor: Isolation

- Isolation was found to be an important factor related to PTSS.
- Consequently, HCWs who had been quarantined were shown to be at higher risk as well as HCW survivors from the infection.
- These latter constitute a special population in which the impact of infectious disease, along with related fears for one's health and for the contagion of loved ones and the sense of isolation and the rejection due to the stigma, lead to a greater PTSS burden.

NIOSH Activities to Improve Health Worker Mental Health

- NIOSH is actively working to help address this issue through the new [Health Worker Mental Health Initiative](#).
- One goal of the Initiative is to raise awareness of health workers' mental health issues, particularly focusing on the role work conditions play and what employers can do.
- The Initiative also aims to:
 - Identify and improve data, screening tools, trainings, resources, and policies to address health worker mental health
 - Reduce stigma related to seeking and receiving care for mental health
 - Identify workplace and community supports for health workers
 - Eliminate barriers to accessing care

Working Conditions

Work in healthcare often involves:

- Intensely stressful and emotional situations in caring for those who are sick
- Exposure to human suffering and death
- Unique pressures from relationships with the patient, family members, and employers
- Working conditions with ongoing risk for hazardous exposures such as to COVID-19, other infectious diseases, hazardous drugs, and more
- Demanding physical work and risk of injuries such as from patient handling
- Long and often unpredictably scheduled hours of work. This is often related to as-needed scheduling, unexpected double shifts, and unpredictable intensity of on-call work.
- For many health workers, unstable and unpredictable work lives, and financial strain

COVID Pandemic introduced additional stress

- The COVID-19 pandemic introduced additional elements of fatigue, strain, stress, loss, and grief for healthcare workers.
- Many healthcare workers experienced increased workload in the face of short staffing and shortages in critical personal protective equipment. This led to increasing anxiety and the risk of personal harm.
- Some healthcare workers report symptoms consistent with post-traumatic stress disorder related to the pandemic. Some also reported residual symptoms due to personal infection with COVID-19.
- Many healthcare workers place the well-being of others before self.
 - On the surface, this dedication to patients may seem admirable.
 - However, it can ultimately be harmful if it delays or prevents workers from getting the help that they need for their own health and well-being.

Stigma

- Stigma is another factor contributing to mental health concerns among healthcare workers.
- There is a strong and historical stigma related to healthcare workers seeking care for mental health concerns or substance use disorders.

Recognize the symptoms of stress you may be experiencing

- Feeling irritation, anger, or in denial
- Feeling uncertain, nervous, or anxious
- Lacking motivation
- Feeling tired, overwhelmed, or burned out
- Feeling sad or depressed
- Having trouble sleeping
- Having trouble concentrating



Know the common work-related factors that can add to stress during a pandemic:

- Concern about the risk of being exposed to the virus at work
- Taking care of personal and family needs while working
- Managing a different workload
- Lack of access to the tools and equipment needed to perform your job
- Feelings that you are not contributing enough to work or guilt about not being on the frontline
- Uncertainty about the future of your workplace and/or employment
- Learning new communication tools and dealing with technical difficulties
- Adapting to a different workspace and/or work schedule

What can you do:

Communicate with your coworkers, supervisors, and employees about job stress

- Identify things that cause stress and work together to identify solutions.
- Talk openly with employers, employees, and unions about how the pandemic is affecting work. Expectations should be communicated clearly by everyone.
- Ask about how to access mental health resources in your workplace.



What can you do:

Identify those things which you do not have control over and do the best you can with the resources available to you.

Increase your sense of control by developing a consistent daily routine when possible — ideally one that is similar to your schedule before the pandemic.

- Keep a regular [sleep schedule](#).
- Take breaks from work to stretch, exercise, or check in with your supportive colleagues, coworkers, family, and friends.
- Spend time outdoors, either being physically active or relaxing.
- If you work from home, set a regular time to end your work for the day.
- Practice [mindfulness](#) techniques
- Do things you enjoy during non-work hours.



What can you do:

- Connect with others. Talk with people you trust about your concerns and how are you feeling
- Connect with others through phone calls, email, text messages, mailing letters or cards, video chat, and social media.
- Check on others. Helping others improves your sense of control, belonging, and self-esteem. Look for safe ways to offer social support to others, especially if they are showing signs of stress, such as [depression and anxiety](#).
- If you feel you may be misusing alcohol or other drugs (including prescription drugs) as a means of coping, reach out for help.
- If you are being treated for a mental health condition, continue with your treatment and be aware of any new or worsening symptoms.

If you feel you or someone in your household may harm themselves or someone else:

[988 Suicide & Crisis Lifeline](#) (formerly known as the National Suicide Prevention Lifeline)

- 988 for English or Spanish, or [Lifeline Chat](#). TTY users can use their preferred relay service or dial 711 then 988.

[National Domestic Violence Hotline](#)

- Call 1-800-799-7233 and TTY 1-800-787-3224

If you are feeling overwhelmed with emotions like sadness, depression, or anxiety:

[Disaster Distress Helpline](#)

- CALL or TEXT 1-800-985-5990 (press 2 for Spanish)



BeThe1To

If you think someone might be considering suicide, be the one to help them by taking these 5 steps:

ASK. KEEP THEM SAFE. BE THERE. HELP THEM CONNECT. FOLLOW UP.



Find out why this can save a life at
www.BeThe1To.com

If you're struggling, call the Lifeline at
988



Indiana
Department
of
Health

How I did it



Indiana
Department
of
Health

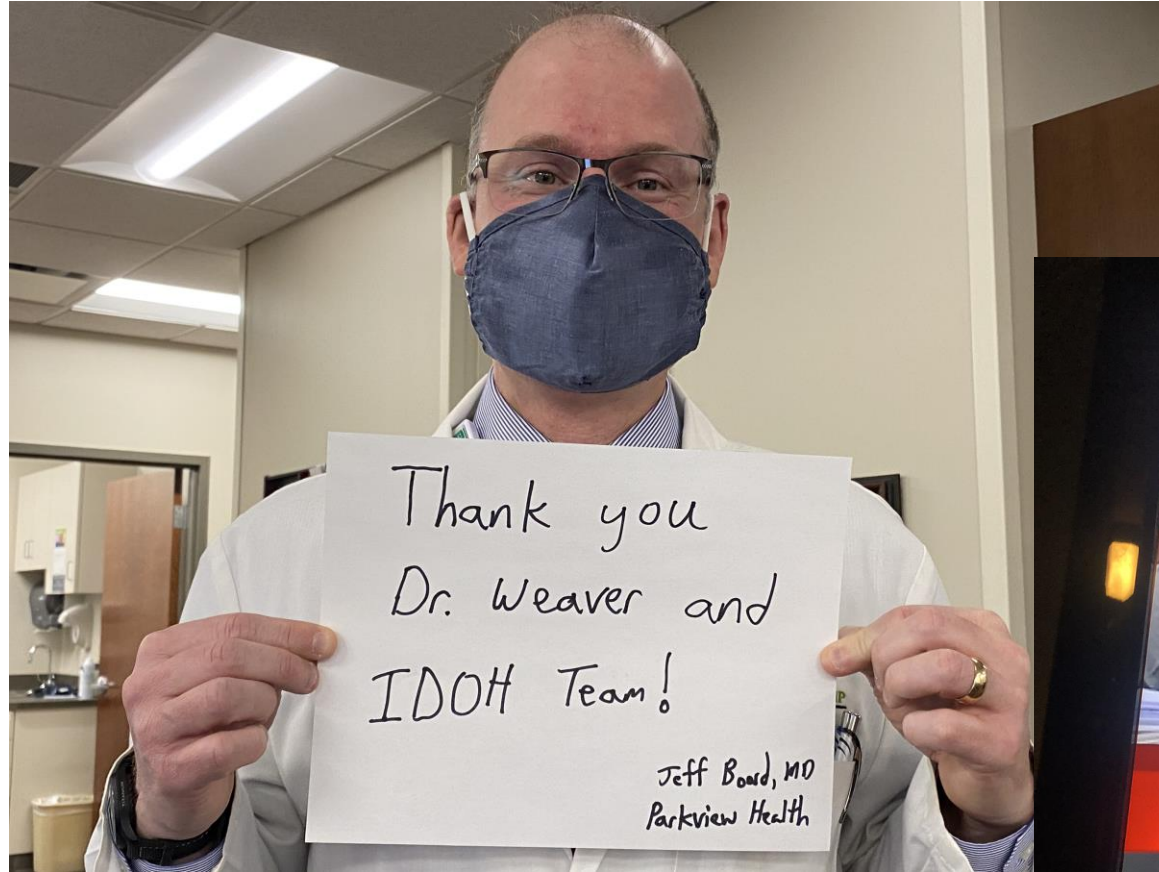




How Hoosiers got it done

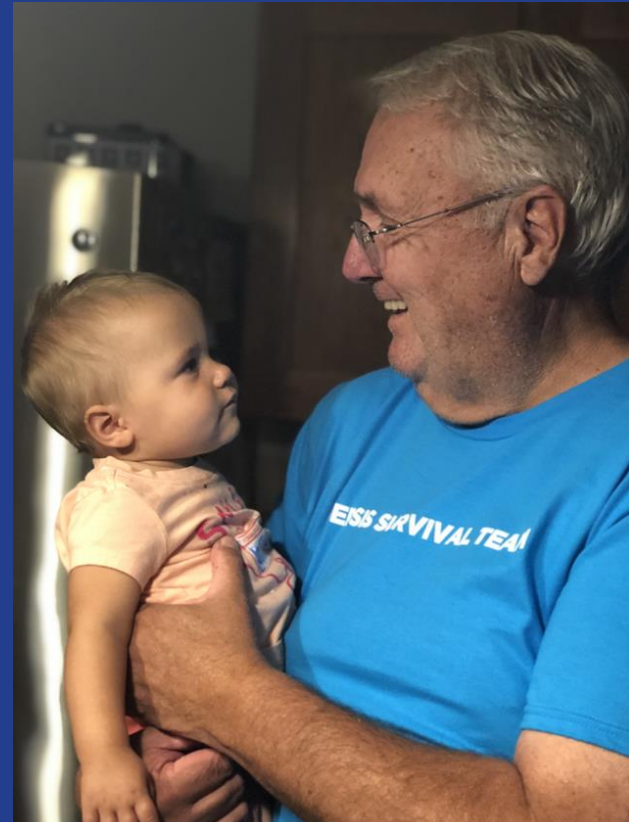


Celebrating the good stuff





leave nothing unsaid and nothing undone



What is life? It is a flash of a firefly in the night. It is the breath of a buffalo in the wintertime. It is in the little shadow which runs across the grass and loses itself at sunset."



~ Crowfoot Blackfeet

Resources:

- CDC Mental Health Resources: <https://www.cdc.gov/mentalhealth/tools-resources/index.htm>
- Indiana Resources: <https://www.namiindiana.org/resources>
- Indiana Division of Mental Health and Addiction home page: <https://www.in.gov/fssa/dmha/>