

Mental health & COVID-19

Five steps to take care of our patients' mental health during a pandemic

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COVID-19 related stressors

- COVID-19 as a stressor itself
- Major interruptions to our lives (e.g. remote working, home schooling)
- Social distancing and Quarantine
- Economic consequences of COVID-19 (e.g. job loss, business close down, financial insecurity)
- Stigma and discrimination

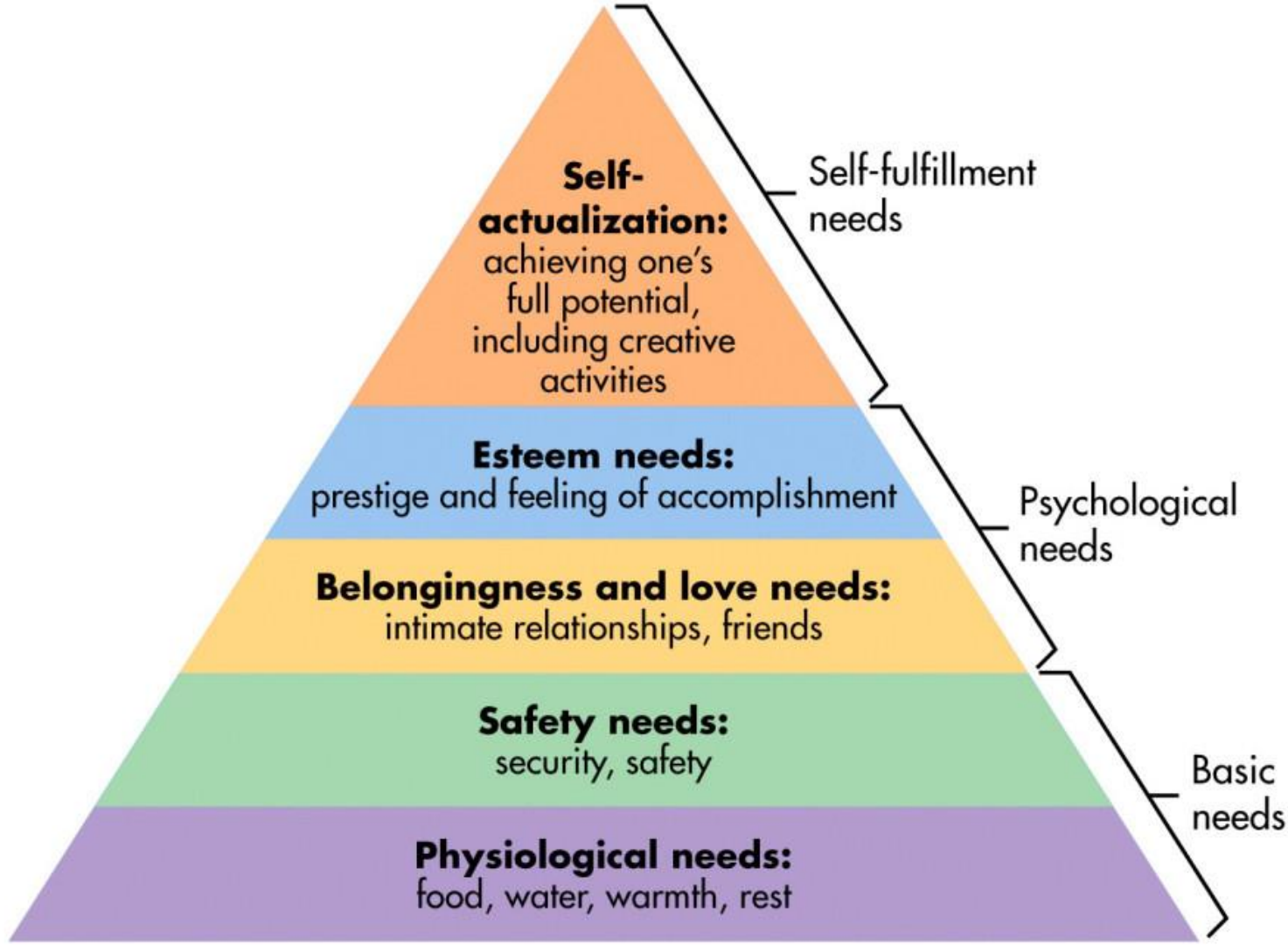
Promote patient's resilience

- Resilience does not mean the absence of any psychological symptoms after disaster exposure, but refers to the ability to "bounce back" from experiencing distress and gradually return to pre-disaster functioning
- Most people do NOT develop psychopathology after a disaster or mass trauma (Norris, Tracy & Galea, 2008)
- Risk and protective factors (Bonanno et al., 2010; Goldmann & Galea, 2014)
 - Risk factors: proximity of exposure to trauma/disaster, prior history of trauma and/or mental illness, post-disaster stressors, neuroticism, tendency to rumination, older age, females, racial-ethnic groups, low socioeconomic status)
 - Protective factors: availability of social support, availability of psychosocial resources

Step 1:

Psychoeducation on stress reactions

- "Normal reactions to an abnormal experience"
 - Fear, anxiety, loss, grief, depression, loneliness
 - Sleep difficulties, appetite changes, loss of energy and productivity, hypervigilance, distressing dreams
 - Troubles concentrating, making decisions, slow thought process, seeing the event over and over
 - Physical: headaches, nausea, dizziness, heart palpitations, chills/sweats
- Why normalize these reactions?
 1. Help patients to understand what they are going through - label and name the emotions
 2. Help patients to know it is reasonable to expect these transient reactions
 3. Let patients know many of us do experience these reactions and it is okay to seek help



Step 2: Basic needs first

Maslow Hierarchy's of Needs

Step 3: Build a plan to reduce stress and maintain health behaviors

Behavioral skills	Goal
DBT Distress Tolerance	To help patients avoid making a situation worse when they cannot solve the problem right away
CBT Behavioral Activation	To help patients stay activated and not depressed
ACT Radical Acceptance	To help patients accept what they cannot control, and to engage in what matters and controllable to them

*Note. These skills can be used in a combination, and most often they do.

Ask patient first, before teaching skills

- What things are you doing that make you feel more anxious?
(Help patient to see what behaviors they are doing and how the behaviors influence their mood)
- What things are you doing that make you feel more sad/depressed/not motivated?
- What have you tried and that have been helpful to you?
(Help patient to see what they are doing well and okay - promote resilience!)

Distress tolerance skills

Take Care of Your Health

Distraction


PLEASE

TREAT **P**HYISCA**L** ILLNESS
BALANCE **E**ATING
AVOID MOOD-**A**LTERING DRUGS
BALANCE **S**LEEP
GET **E**XERCISE



PLEASE

ACTIVITIES
CONTRIBUTING
COMPARISONS
EMOTIONS
PUSHING AWAY
THOUGHTS
SENSATIONS



we mind
tools
ACCEPT

Distress tolerance skills

Self-sooth with 5 senses

SELF-SOOTHING

Self-soothing is a quick and effective way to reduce the intensity of negative emotions.



Sight

Low lighting
Soothing colors
Sleeping masks
Coloring books
Pinterest Collages

Touch

Soft things
Cuddle things
Massage
Hot/cold shower
Heated/weighted blanket



Sound

Calming noise
ASMR videos
Nature sounds
Guided meditations
Binaural beats

Smell

Aromatherapy
Fresh air
Candles/incense
Comforting smells



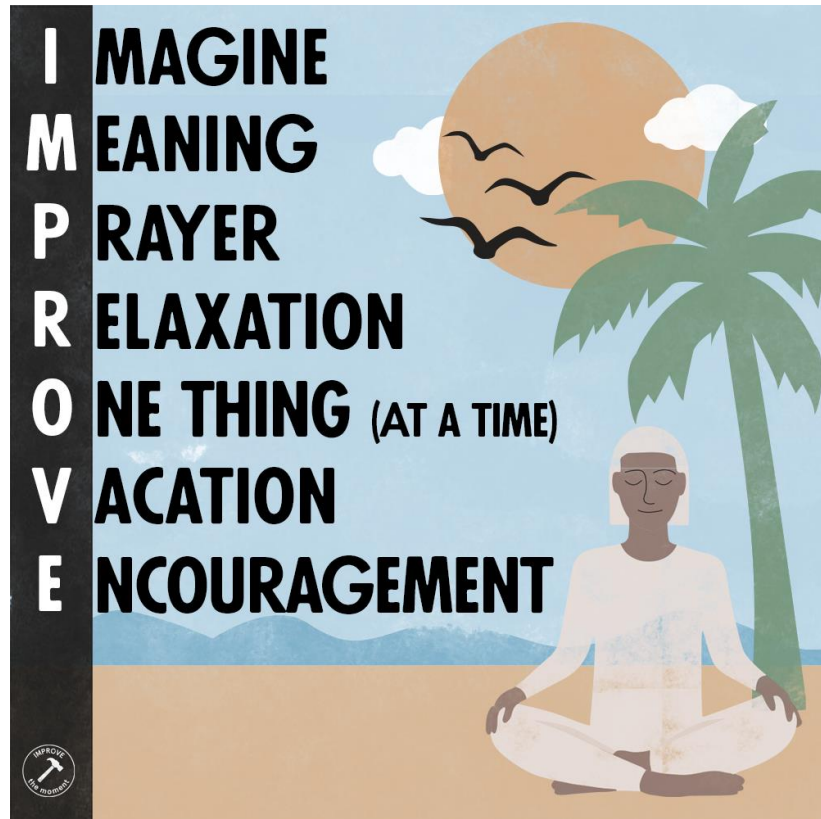
Taste

Strong flavors
Warm drinks
Eat slowly
Nostalgic flavors



www.blessingmanifesting.com

Improve in the moment



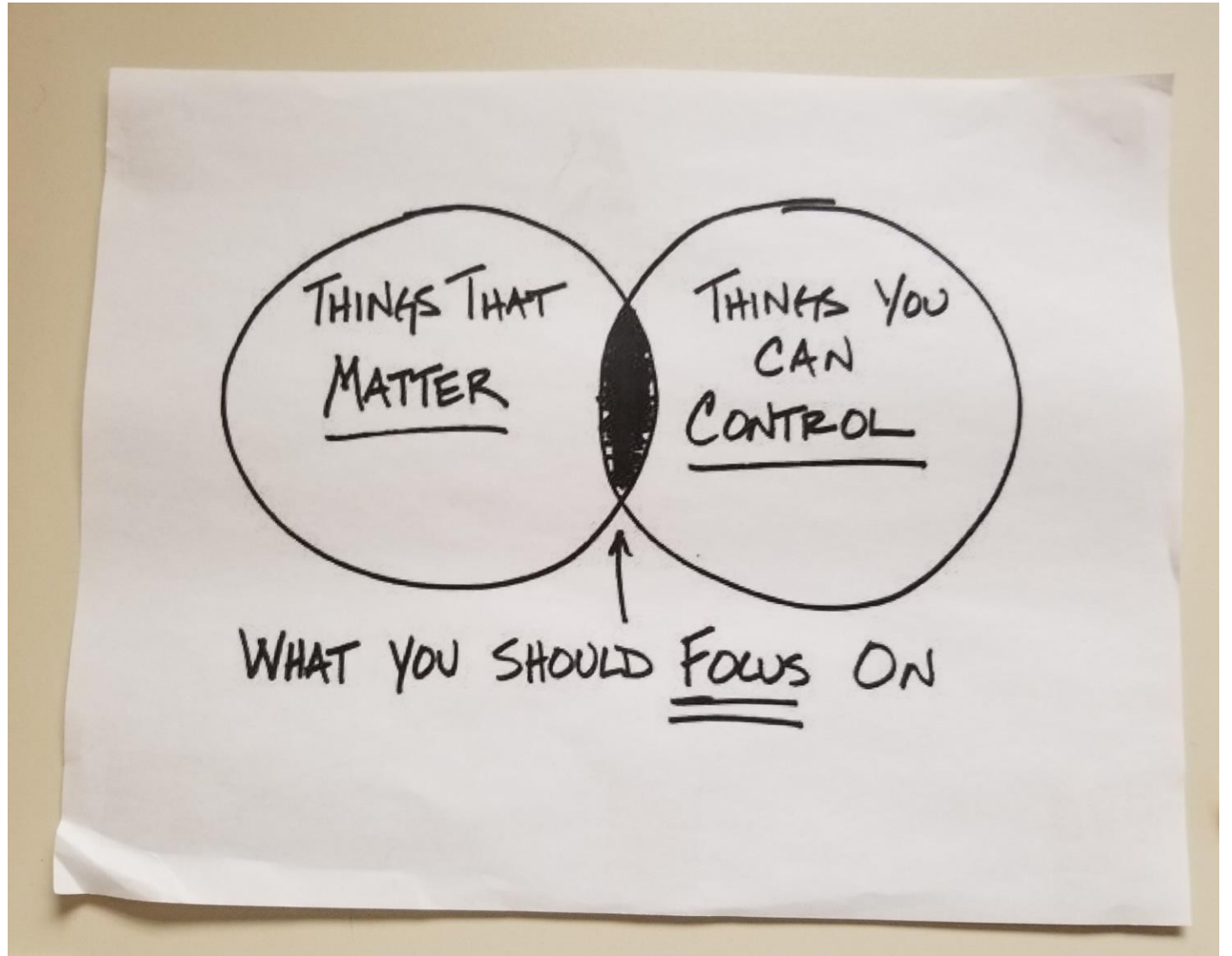
For details, please refer to this PDF: <https://www.therapistaid.com/worksheets/dbt-distress-tolerance-skills.pdf>

Behavioral activation

1. Identify activities that brings patient pleasure, sense of mastery and meaning
2. Break down the activities into smaller, manageable goals of each day, and do it in chunks (Will you be able to achieve this goal even when you have the worst depressed day?)
3. Make sure the activities are naturally reinforcing or at least pair with some activities that are rewarding
4. Make a plan to do those activities and incorporate them in the routine
5. "Follow your plan, not your mood" - motivation follows action.
(This may be harder nowadays given COVID-19, but patient can still plan for activities and schedule for a break)

(Martell, Dimidjian, Hermann-Dunn , 2013)

Radical acceptance



Step 4: Encourage social interactions (in the midst of physical distancing)

- Psychological impact of social distancing/quarantine: frustration, boredom, loneliness, anger, increased attention to health concerns and worrying (SAMHSA, 2014; Brooks et al., 2020)
 1. Reach out to one another
 2. Build the best possible support they can digitally (e.g., virtual dinners, online church groups, Netflix party)
 3. Have meaningful and thoughtful conversations (not just about COVID-19)
 4. Only consume and share accurate information from credible sources
 5. Dress for the social life you want, even if at home

Step 5: Connect patients to community resources and/or behavioral health

- Community resources
 - The Emerald City Resource Guide by Real Change
<https://main.realchangenews.org/EmeraldCityResourceGuide>
 - Accurate information about COVID-19
(upon patient's request)
 - Unemployment/food/housing assistance
 - Online community groups
- Behavioral health providers
 - Warm handoff to Juli or Kris
 - Provider consultation with behavioral health
 - Regular behavioral health referrals
- Hotlines
 - SAMHSA's Disaster Distress Helpline
1-800-985-5990
 - National Suicide Prevention Lifeline
1-800-273-TALK (8255)

COVID-19 Resources for Providers

- UW ICTP <http://ictp.uw.edu/resources/resources>
- American Psychological Association <https://www.apa.org/practice/programs/dmhi/research-information/pandemics>
- American Psychiatric Association <https://www.psychiatry.org/psychiatrists/covid-19-coronavirus>

Self-help Resources for Patients

- Therapy handouts/online learning
 - Coronavirus Anxiety Workbook by The Wellness Society
<https://thewellnesssociety.org/wp-content/uploads/2020/04/Coronavirus-Anxiety-Workbook.pdf>
 - The Therapist Aid
<https://www.therapistaid.com/therapy-guide/behavioral-activation-guide>
<https://www.therapistaid.com/worksheets/dbt-distress-tolerance-skills.pdf>
 - DBT distress tolerance skills video
<https://www.sunrisertc.com/distress-tolerance-skills/>
- Apps
 - CPT-I coach (for insomnia or sleep difficulties)
 - Moodivate (behavioral activation) - Iphone only
 - Stop Breathe Think (for mindfulness/meditation/relaxation techniques)