

# *Now What??*

Personal and Professional  
Recovery



# INTRODUCTIONS

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# INTRODUCTIONS

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## OBJECTIVES

- Describe the importance of intentionality, mindfulness and presence as it relates to healing.
- Utilize trauma and grief theory to identify losses and the impact of COVID-19.
- Demonstrate the importance of naming, and what has been lost and unattended.
- Apply and integrate lessons learned into personal and professional growth.
- Discuss transition and provide tools for action for personal and professional recovery

# TAKING AN INTENTIONAL PAUSE:

## What we are NOT going to do today:

- Critical Incident Stress Debriefing
- Therapy

## What we ARE going to do today:

- Provide a framework for thinking through the experience
- Provide opportunity to reframe the events and experiences of the past two years.
- Emphasize the importance of being present.
- Give you some tools and resources

“We do not learn from experience, we learn from reflecting on experience.”

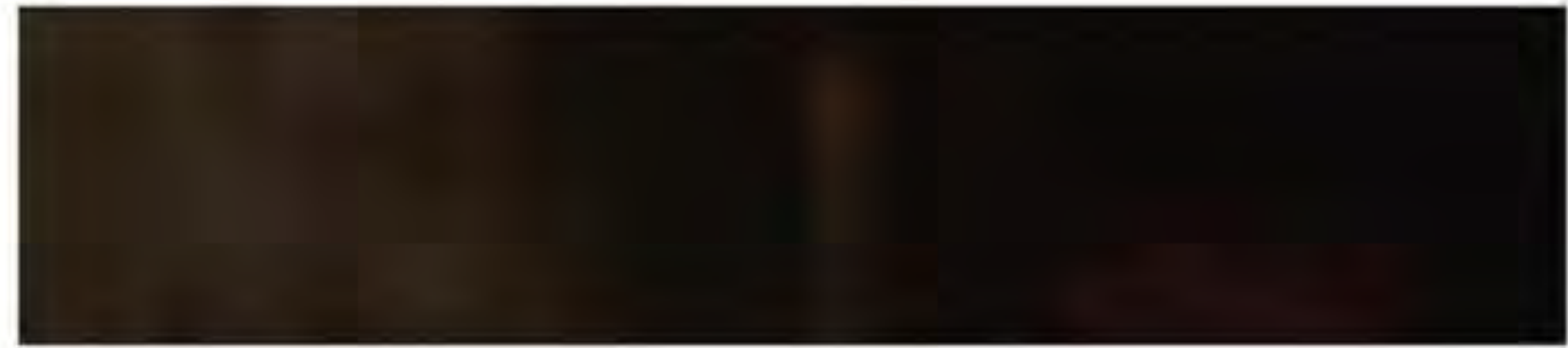
-John Lewey

WHERE ARE YOU WHEN YOU'RE REFLECTING?

# TAKING AN INTENTIONAL PAUSE:

**Today we are going to focus on two areas:**

- Personal
- Professional
  
- Framework of Identify, Integrate, and Adapt
  - In the world of recovery, “Name it, Claim it, Tame it”.
  
- Think of this like developing a quality improvement plan for yourself and your department.



**YOU CAN ONLY KNOW  
WHERE YOU'RE GOING IF  
YOU KNOW WHERE  
YOU'VE BEEN**

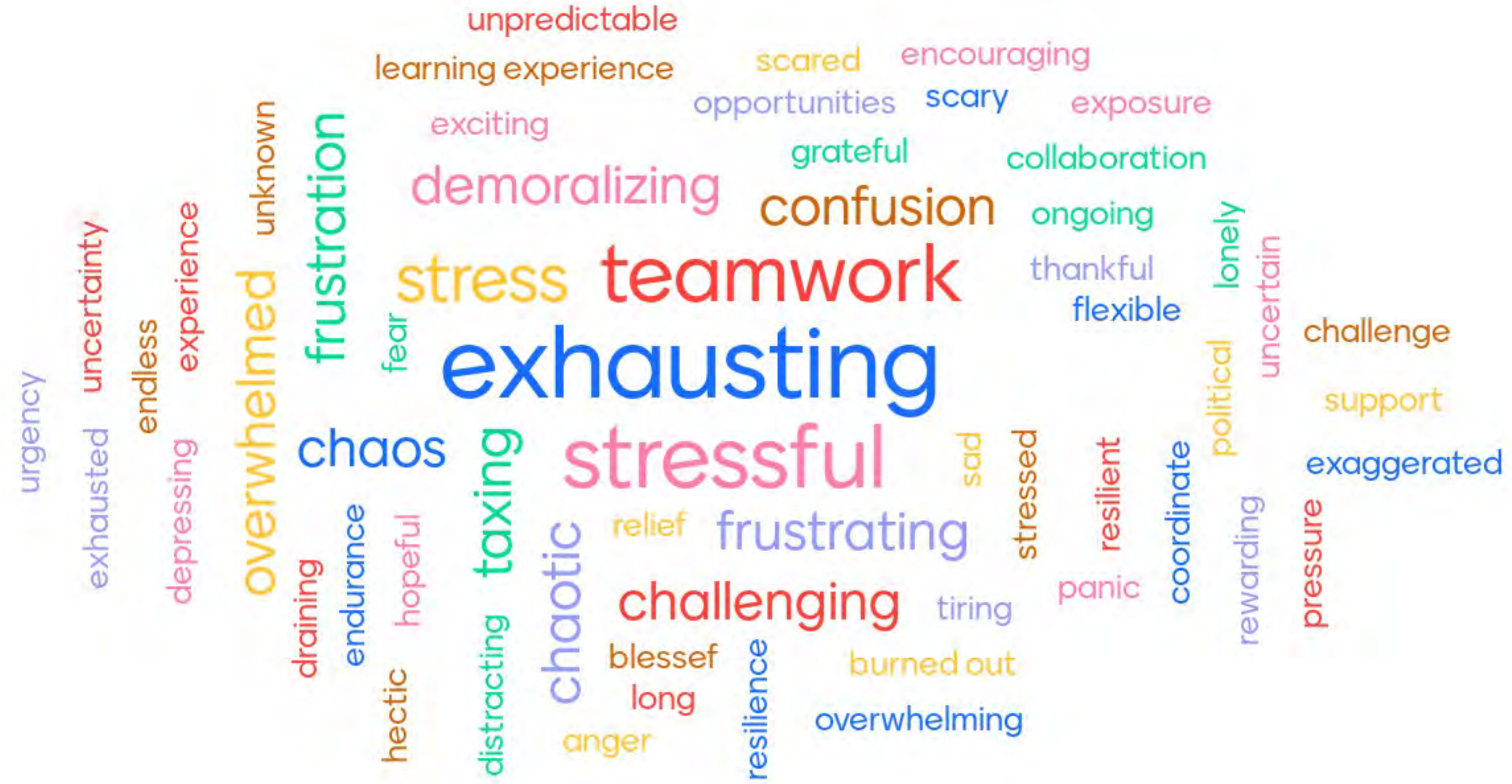
JAMES BURKE

PICTUREQUOTES.COM





# When you think of "COVID response", what words would you use to describe your experience?



## TOOLS IN THE TOOLBOX

We need as many as we can find until we find what works for us...



# TRAUMA

- We can all agree this has been a stressful and traumatic experience.
- Need to be careful of assumptions that everyone feels this way.
  - What makes something stressful?
  - What makes something traumatic?



*"It is not stress that kills us, it is our reaction to it."*

*-Hans Selye*

# IT'S ALL ABOUT STRESS

Positive Stress=Eustress

Negative Stress=Distress

(*not dangerous unless it is **prolonged or intense***)

- Stressor = stimulus
  - Stress = arousal in response to a stimulus.
- 
- We are physiologically hardwired to react to threats. Fight/flight/freeze.
  - Several factors determine our response to stress including: genetics, socialization, life experiences.
  - Our reactions are a *nonspecific response* of the body to any demand.

## KNOWLEDGE: DEFINITIONS

**CRITICAL INCIDENTS** are unusually challenging events that have the potential to create significant human distress and can overwhelm one's usual coping mechanisms.

**Question:** What critical incidents have happened during this prolonged event?

**CHRONIC OR CUMULATIVE STRESS** is a consistent and long term sense of feeling pressured and overwhelmed over a prolonged period of time.

**Question:** What are the sources of ongoing chronic stress in your personal or professional life?

# HOW DO YOU KNOW WHEN YOU'RE STRESSED? SIGNS AND SYMPTOMS OF STRESS



## COGNITIVE

- Uncertainty
- Lack of focus
- Blaming
- Uncertainty
- Suspicion
- Sleep disorders



## PHYSICAL

- Fatigue
- Headaches
- Rapid Heart Rate
- Muscle tightness
- Grinding teeth



## EMOTIONAL

- Anxiety
- Fear
- Anger
- Depression
- Irritability
- Grief



## BEHAVIORAL

- Withdrawal
- Inability to rest/turn off
- Increased alcohol use
- Changes in socialization



## SPIRITUAL

- Questioning faith or beliefs
- Loss of faith "in humanity"
- Challenges to core beliefs

# STRESS IS INDIVIDUAL WHAT IS YOUR COVID STORY?

What is stressing me out may not be the same thing that is stressing you out.

Trauma, unresolved trauma, chronic and cumulative stress

Importance of TEAM

Importance of individual support as well as team support.

PERSONAL STRESSORS IN THE MIDST OF COVID-19 RESPONSE

Marriage/ Divorce

Lost jobs/ stress/ Relocation  
\$\$

Birth/Miscarriage / Infertility

Child care/ Elder care

Illness/disability/ death

Mental Health



# CUMULATIVE STRESS=COVID-19 STRESS

- Cumulative stress is unmitigated stress arousal that builds over time
- Cumulative stress: Three identifiable phases
  - a) Stress arousal
  - b) Energy conservation
  - c) Exhaustion



## BURN OUT

'WHEN THE MOST PASSIONATE PEOPLE ON YOUR TEAM GO SILENT, YOU SHOULD BE WORRIED'

World Health Organization (WHO) defines burn out as:

“**chronic** work place stress that has not been successfully managed”.

Can result in:

Exhaustion

Cynicism

Diminished Performance

## TRAUMA/ STRESS RECAP

Can lead to temporary *impairment of function*

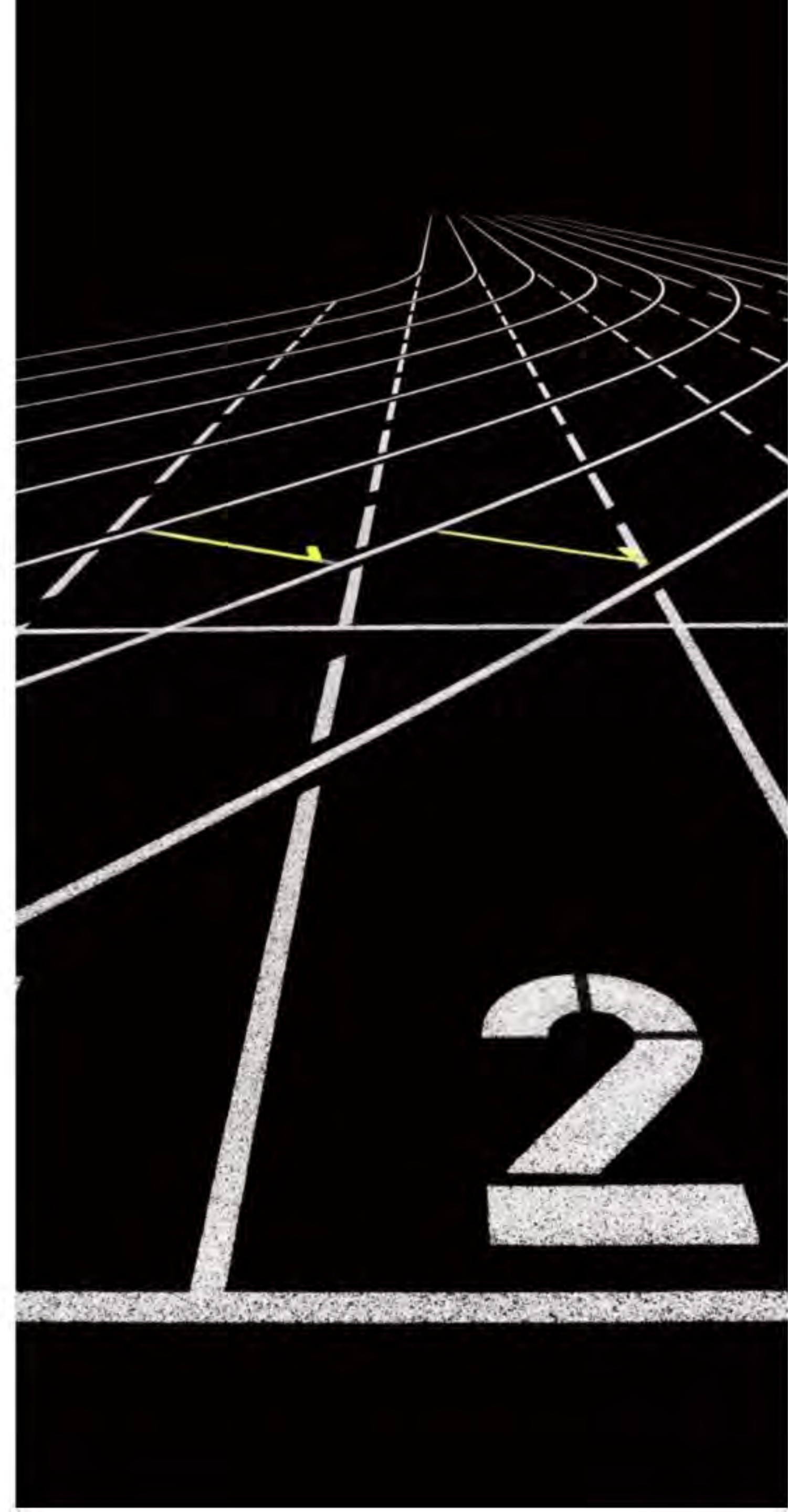
*Is dangerous over time* if it is not resolved

“You are experiencing normal reactions to an abnormal event”.

Normal response of normal, healthy, people to a terribly abnormal event.

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“You can run a sprint  
You can run a marathon  
But you can’t sprint a marathon”





HOW TO MANAGE STRESS

## EXAMPLE OF REFRAMING: A LOSS BECOMES A WIN

- Sheriff undercut – lost all credibility/authority
- Bashed my head against the ‘proverbial’ wall for months
- Manage Expectations/Change Focus
  - Developed great relationships with municipal law enforcement

# WHAT IS MINDFULNESS?

## Mindfulness is:

- a mental state achieved by focusing one's awareness on the **present** moment, while calmly acknowledging and accepting one's feelings, thoughts, and bodily sensations without judgement.
- simply observing in the present moment to become aware of internal thoughts and feelings and external surroundings.
- allows one to be more at ease, focused, open to the good, and less reactive to the challenges that come in our daily lives.
- the opposite of mindful is being on autopilot.

## EXAMPLE OF 'PRESENT/MINDFULNESS'



- Elite gymnasts/athletes under immense pressure
- 'Proprioception' – recognition of body within spatial area
- Amazingly dangerous work
- Must be mentally 'in the right place'
- 'Googlies'
- Admission of 'not being there' takes tremendous strength
- We are seeing this more and more
- Mental health is becoming normalized



# FIVE FREE MINDFULNESS APPS

- **Insight Timer**
- **Smiling Mind**
- My Life Meditation
- UCLA Meditation
- Healthy Minds Program



# BE THE CHANGE



*“Be the change you wish to see in the world.”*

-Often attributed to Ghandi

Self-Compassion as a balanced concept.

# What strategies have been most effective for you to manage stress?

Breath work

Physical activity

Accomplishing smaller tasks

Meditating and journaling

Grounding techniques

Don't really believe in stress

The Calm App

Mindfulness, fitness, family

Time off

# What strategies have been most effective for you to manage stress?

Exercise Family

Go for a walk

Volunteer

Vacations

Getting away from it all. Hiking, camping.

Fresh air

Sharing with team members

Walk the dogs

Antidepressants

# What strategies have been most effective for you to manage stress?

Be with my kids

Leave work at work

Fitness, family

Physical activity - running

Solitude

Time by myself

Therapy

Exercise

Therapy

# What strategies have been most effective for you to manage stress?

Relaxation exercises

Self reflection writing

Outdoors

Friends

Exercise

Processing with coworkers

Horse riding

Talking to friends

Hobbies

# What strategies have been most effective for you to manage stress?

Time with friends

Soending time with my children and family

Pets

Outside activity

Focusing on my faith

Getting people back to work

Walk

Binge watching Netflix

Stop multitasking

# What strategies have been most effective for you to manage stress?

EAP

Outdoors. Travel. Family.

List making, being outside, socializing with family & friends

Lighting weights



- Collectively
- Individually



LET'S NAME WHAT WE'VE LOST

- What parts of the fabric of society have been lost, unattended, impacted?
  - Small businesses
  - Schools
  - Charitable organizations
  - Faith Communities
  - Milestones
  - Sporting Events
  - Politics

WHAT HAVE WE LOST? COLLECTIVELY

# HOW IS STRESS/GRIEF EXPRESSED IN SOCIETY?

## ↑ Rates of overdoses (CDC, 2020)

- Overall 18.2% (36.9% Hispanics)
- Deaths due to overdoses (Opioid up 98% in Western States, Cocaine up 26.5%, Meth/Stimulants up 34.8%)

## ↑ Food insecurity (71% up to 93% in low-income households, Sharma et. al.; October 2020)

## ↑ Anxiety and depression. According to one CDC report, which surveyed adults across the U.S. in late June of 2020, 31% of respondents reported symptoms of anxiety or depression, 13% reported having started or increased substance use, 26% reported stress-related symptoms, and 11% reported having serious thoughts of suicide in the past 30 days. **These numbers are nearly double the rates we would have expected before the pandemic** (Gordon, 2021; AMA)

# ADOLESCENT MENTAL HEALTH

- Mental health visits as well as changes in hospitalization rates for eating disorders, suicidality, substance use, and other mental health condition
- We found an increase in the proportion of mental health–related emergency department visits during the months of July–December 2020 ( $p < .01$ ). *There was a 62% increase in eating disorder visits between 2018–2019 and 2020* ( $p < .01$ ).
- <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8421028/>

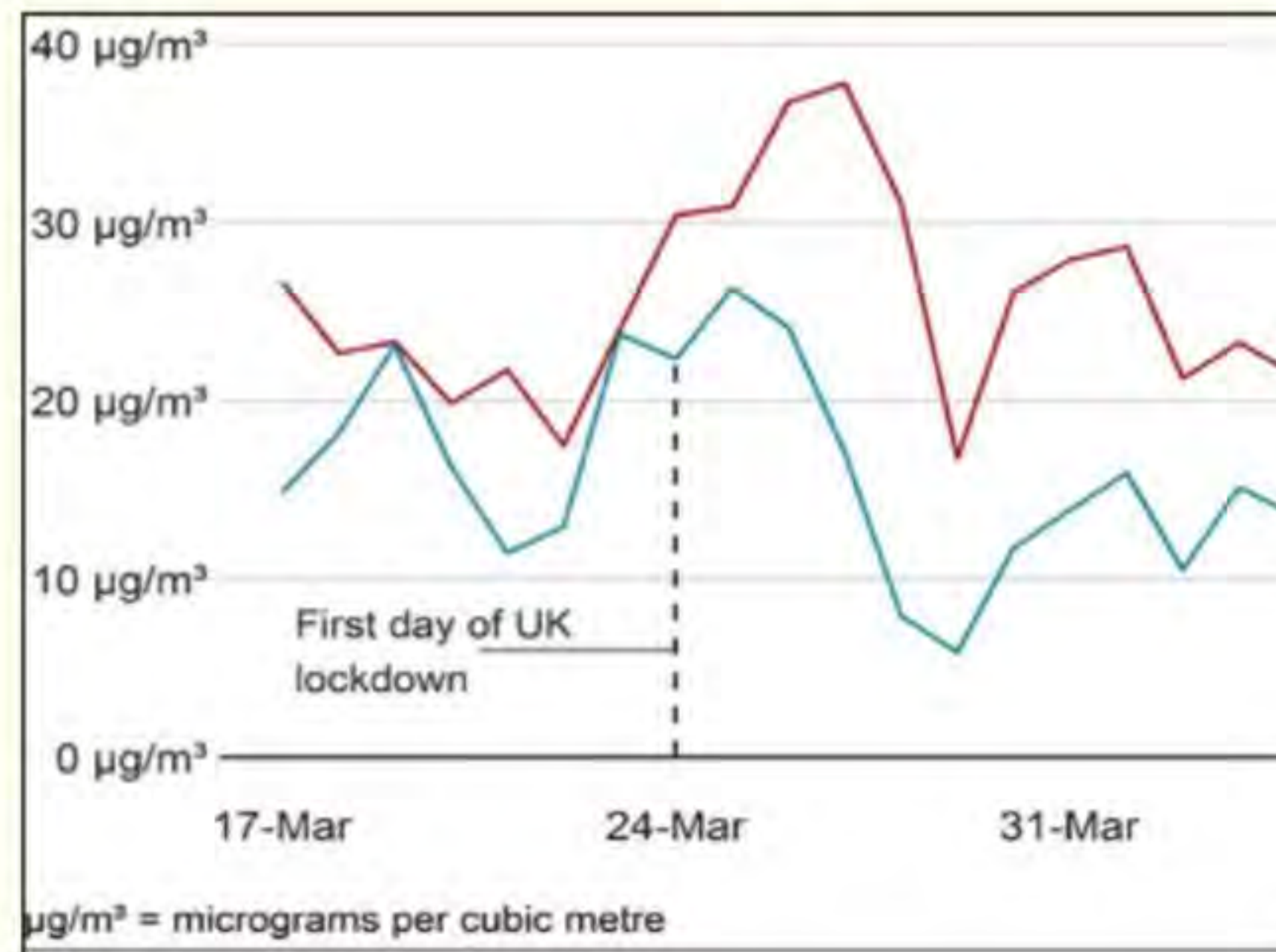
# HOW IS STRESS/GRIEF EXPRESSED IN SOCIETY?

## New Diagnoses Mentioned in Literature

- COVID Stress Syndrome
- COVID Disregard Syndrome
- “Coronasomnia”
- COVID “long-hauler”
- Prolonged Grief Disorder: A syndrome in which people feel stuck in an endless cycle of mourning that can last for years or even decades.

## BUT....SOME BENEFITS

- Carbon Dioxide Emissions down approximately 30% in 5 of the top producing countries ( Europe, Italy, France, UK, Spain); [Impact of COVID-19 on the social, economic, environmental and energy domains: Lessons learnt from a global pandemic \(nih.gov\)](#)
- World energy demand down 3.8%
- World oil demand down 5%



WHAT HAVE WE  
LOST:

**PROFESSIONALLY**

What systems, protocols, and processes have been compromised during this time of COVID-19?

What training and education was delayed or never started?

What work do you need to catch up on?

How have relationships with partners changed?

Were you asked to do anything traditionally outside the scope of Emergency Management?

- What has been lost, unattended, or impacted?
  - Health
    - Delayed or foregone healthcare
  - Community
  - Faith/Spirituality
  - Volunteering
  - Rest/Vacations
  - Relationships
    - Personal and Professional
  - Milestones

WHAT HAVE  
WE LOST?

PERSONALLY



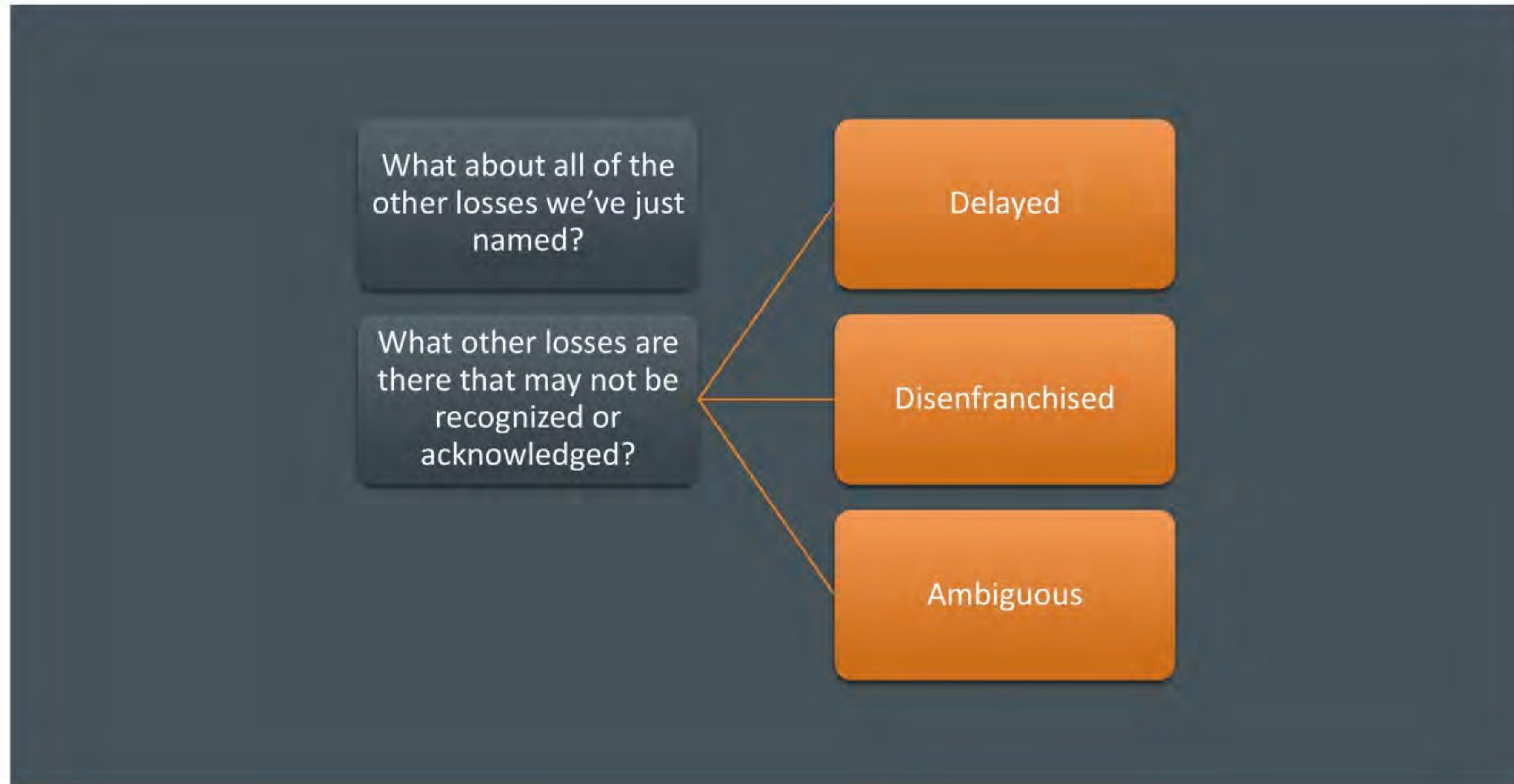
# ALL ROADS LEAD TO GRIEF

Once we've named all of these things....

How do we manage them?

We need to grieve them...

Why has this been so hard during COVID?



## COMPLICATED GRIEF

### ■ Delayed Grief:

- People who put off funerals, or services for people who died during COVID
- People who chose not to have the rituals at all
- Those who couldn't or didn't "take the time" in the midst of the loss to grieve

## COMPLICATED GRIEF AND COVID-19

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## ■ Disenfranchised Grief

- The person grieving isn't recognized, the relationship is stigmatized, the mechanism of death is stigmatized, or the loss isn't seen as worthy of grief.
- Roles of staff drastically changed—were asked to serve role of family as opposed to staying in the clinical role.
- Pod cast: Life Kit: NPR Kenneth Doka The importance of mourning losses (even when they seem small). June 14, 2021 14 minutes long
- <https://www.npr.org/2021/06/02/1002446604/the-importance-of-mourning-losses-even-when-they-seem-small>

COMPLICATED  
GRIEF AND  
COVID-19

# COMPLICATED GRIEF AND COVID-19

## ■ Ambiguous Grief:

- Loss of role
- Loss of relationships
- Loss of authority
- Loss of meaning and purpose
- Loss of joy in work

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## WHAT HAPPENS?

What happens if we don't recognize, name, identify, and manage complicated grief?

It comes out sideways—ALWAYS

- Anger/increased scrutiny of public officials
- Misdirected and misguided
- Scapegoating



## Integration

To name and then claim:  
-where we are  
-what we've lost  
-what we've neglected/not attended  
-what we're grieving,

in order to:

**HONOR** where we  
**ARE**



# TO HONOR: WHAT DOES THIS MEAN??



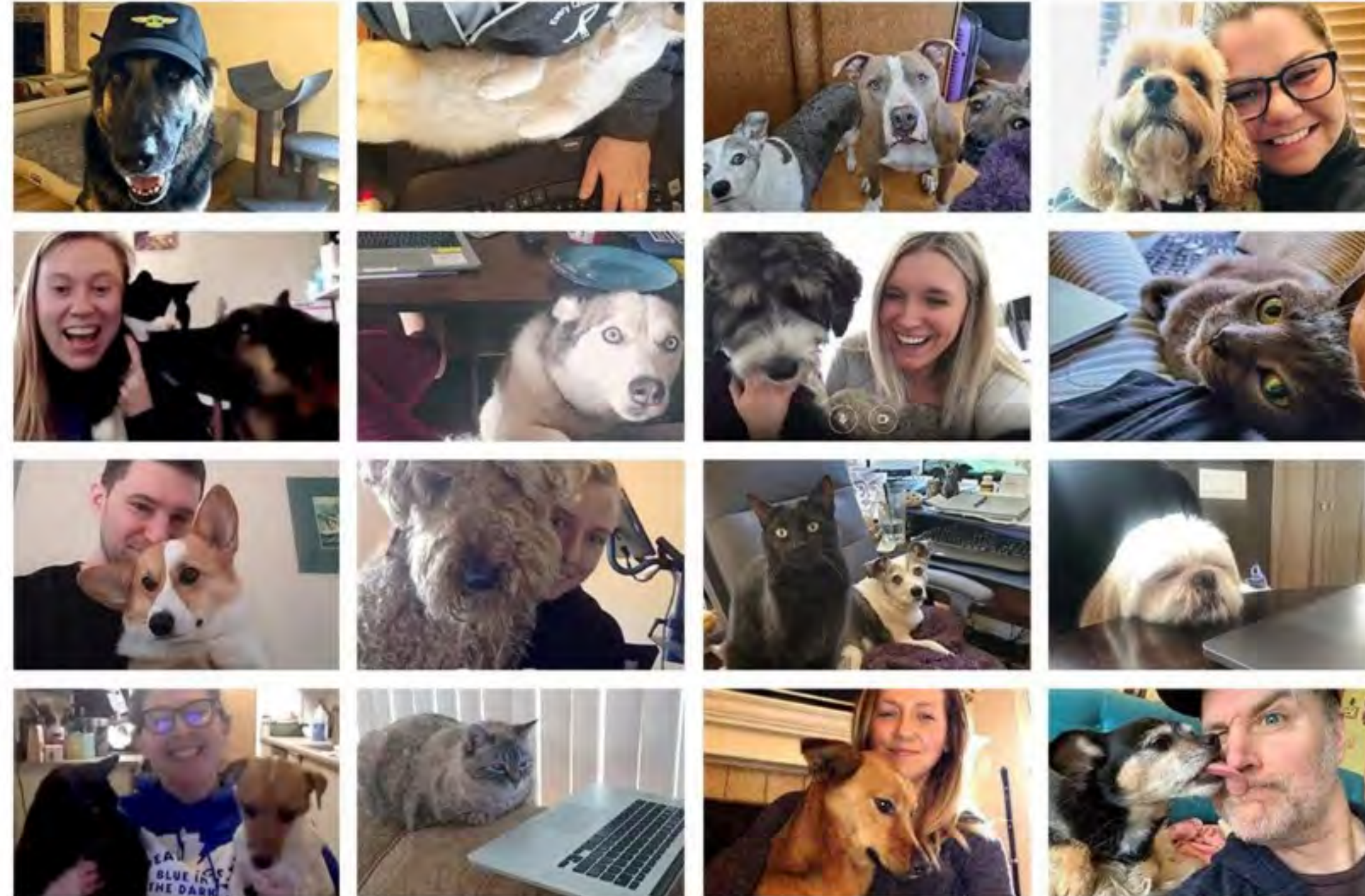


- Where has trust been broken?
- Where do we need to ask for forgiveness?
- What relationships need to be repaired, re-established, re-connected?
  
- How have you changed?
- What strengths have you identified?
- Where have we been flexible, creative, and innovative?
- How have we been resilient?
- How can these move us forward into a new transition?

HONORING THE  
LOSSES AND  
RECOGNIZING  
GROWTH

# HUMANIZATION OF WORK

CHANGE OF MINDSET.  
“PANDEMIC EPIPHANY”  
“GREAT RESIGNATION”





EXPECTATION OF EXCELLENCE IN LEADERSHIP COMMUNICATION

# POST TRAUMATIC GROWTH

Recognize and embrace new opportunities

Stronger relationships with loved ones

Cultivate inner strength

Gain a deeper appreciation for life

Changed or evolved spirituality

RECOVERY

THE QUALITY  
IMPROVEMENT  
PROCESS



# WHAT'S A QUALITY IMPROVEMENT PLAN?

- A formalized, quality improvement process, designed to return to pre-event levels and to PREPARE to be more RESILIENT for the next event
  - A key component: 'return to pre-event levels'
  - What does this mean?
    - Replenish the stockpile
    - Fix the equipment
    - Repair anything that is broken
    - In the ICS world, equipment and personnel MUST recover in a CAMP prior to demobilization. This ensure resources are prepared to return to pre-event status.
  - **Do we do this for ourselves?**
  - **What does this say about agencies that don't undertake this process?**

## NUMBERS TO NIBBLE ON....

- @ 3,000 health departments in the US
- @ 3,000 emergency management agencies in the US
- 3,935 short-term acute care hospitals in the US
- 1,345 critical access hospitals in the US
- 735 psychiatric hospitals in the US
- 398 long-term acute care hospitals in the US
- @ 16,000 'nursing homes' in the US
  - (Flip the fraction, carry the 2, dangle the participle.....) = **28,413 'entities'**

# 28,413 ENTITIES

- Let's say each one did 1 After Action Report regarding Covid-19....
  - 28,413 AAR's (did that in my head....)
  - The average AAR contains 4-5 Corrective Actions
  - That's 142,065 Corrective Actions
  - The typical corrective action 'elements' are:
    - Personnel
      - 90% of this category relates to either 'needing more' or 'better trained'
    - Equipment and Systems
    - Planning
    - Training



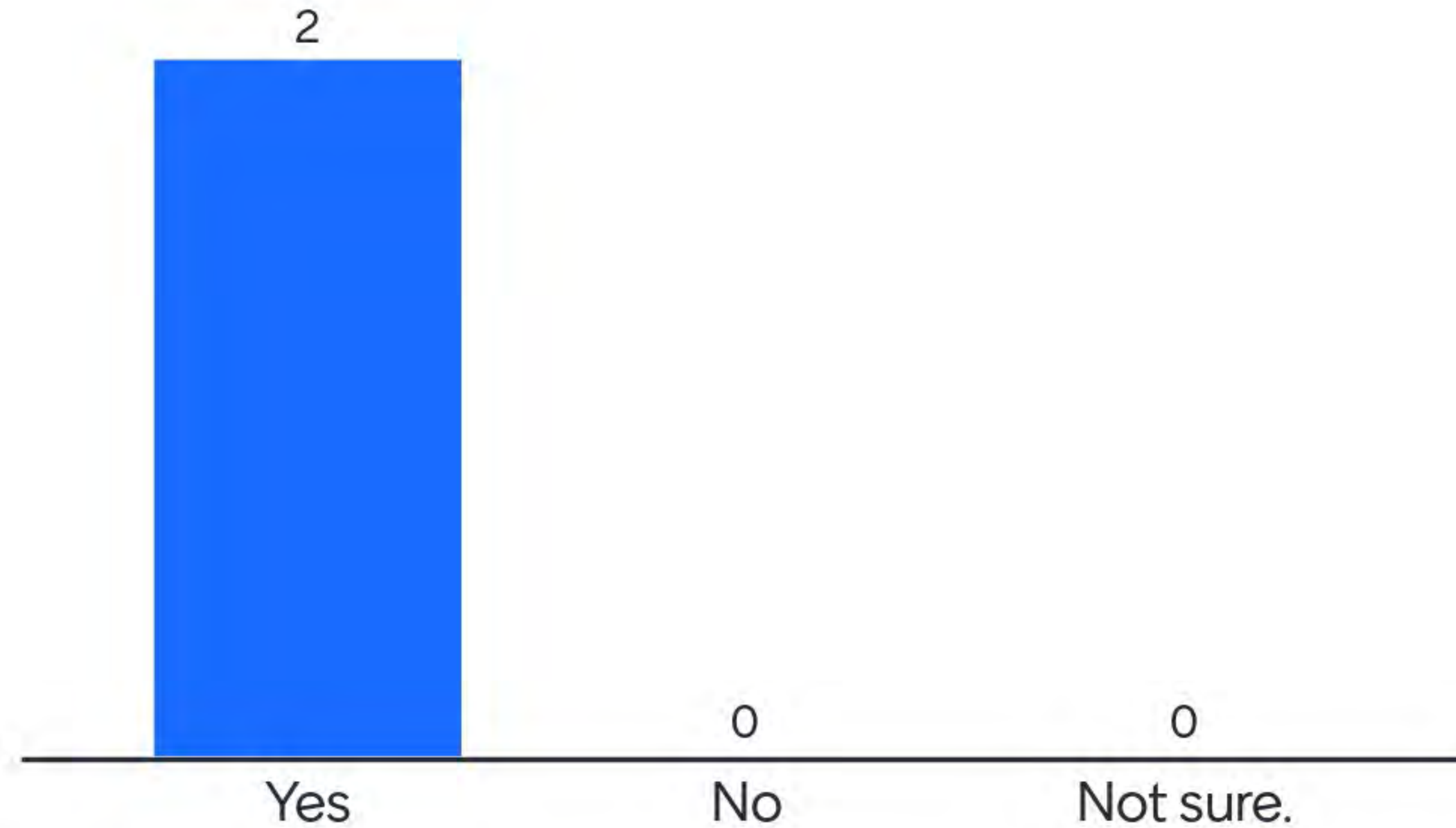
# IMPROVEMENT PLAN THEMES

- We replace what we used, we fix what we broke, we update plans, we train, we test
- Do we EVER stop and focus on US? Do we fix ourselves? Do we replenish what we used? Do we make sure we get back to pre-event levels?
- We focus on equipment, technology, and getting better on a professional level
- We DON'T fix ourselves personally, and THEN we're expected to;
  - Return to our normal jobs (that were neglected or unattended)
  - Continue in our pandemic response
  - Implement all of the other corrective actions
    - But we're still broken.....
- **Out of those 142,065 Corrective Actions, less than 1% focus on staff recovery and healing....**



US Surgeon General: “We have a choice in how we move forward”.

**My employer is supportive of the need for intentionality (time and resources/safe space to process) in moving through this transition period.**



# TRANSITION

*“In the aftermath of chronic stress or adversity, individuals typically undergo a transition period that involves readjusting to a state of relative safety and adapting behaviors accordingly.”*

[How to Build Resilience During the Post-Pandemic Transition | Psychology Today](#)

## TRANSITION PHASE: UNIQUE FEATURES

- Uncertainty
- “Standing in the spaces” between who and how we are supposed to be pre-pandemic vs. post-pandemic.
- Fear
- Anxiety about “getting it right”

## TRANSITION: RE-FRAME EXPECTATIONS

“... this next six months or so as this transition period, where we’re going to have to figure out how to be together again.”

...that the time it will take individuals to adjust to a “new normal” is dependent on their level of anxiety.

*“If you’re an anxious person by nature, this is going to be much harder,”* he said.

[Transition out of COVID-19 pandemic impacting mental health: Here’s how to help | WRIC ABC 8News](#)

# THINGS TO CONSIDER DURING THE TRANSITION

40 million US adults have an anxiety disorder

50% of those with depression also have an anxiety disorder

*"If you're not socially anxious, be good to those who are."*

- ...new habits have been developed over the course of the coronavirus pandemic to evolve with health and safety measures, which are now changing again.

...those who preferred the controllability of video chats as opposed to face-to-face interactions *might have trouble adjusting back to being physically in front of people*

...individuals will have to readjust to being closer than six feet away from people and not having a mask or plexiglass barrier to separate them. (Expanding our personal bubble again)

[Transition out of COVID-19 pandemic impacting mental health: Here's how to help | WRIC ABC 8News](#)

# ONE STRATEGY: PSYCHOLOGICAL FLEXIBILITY

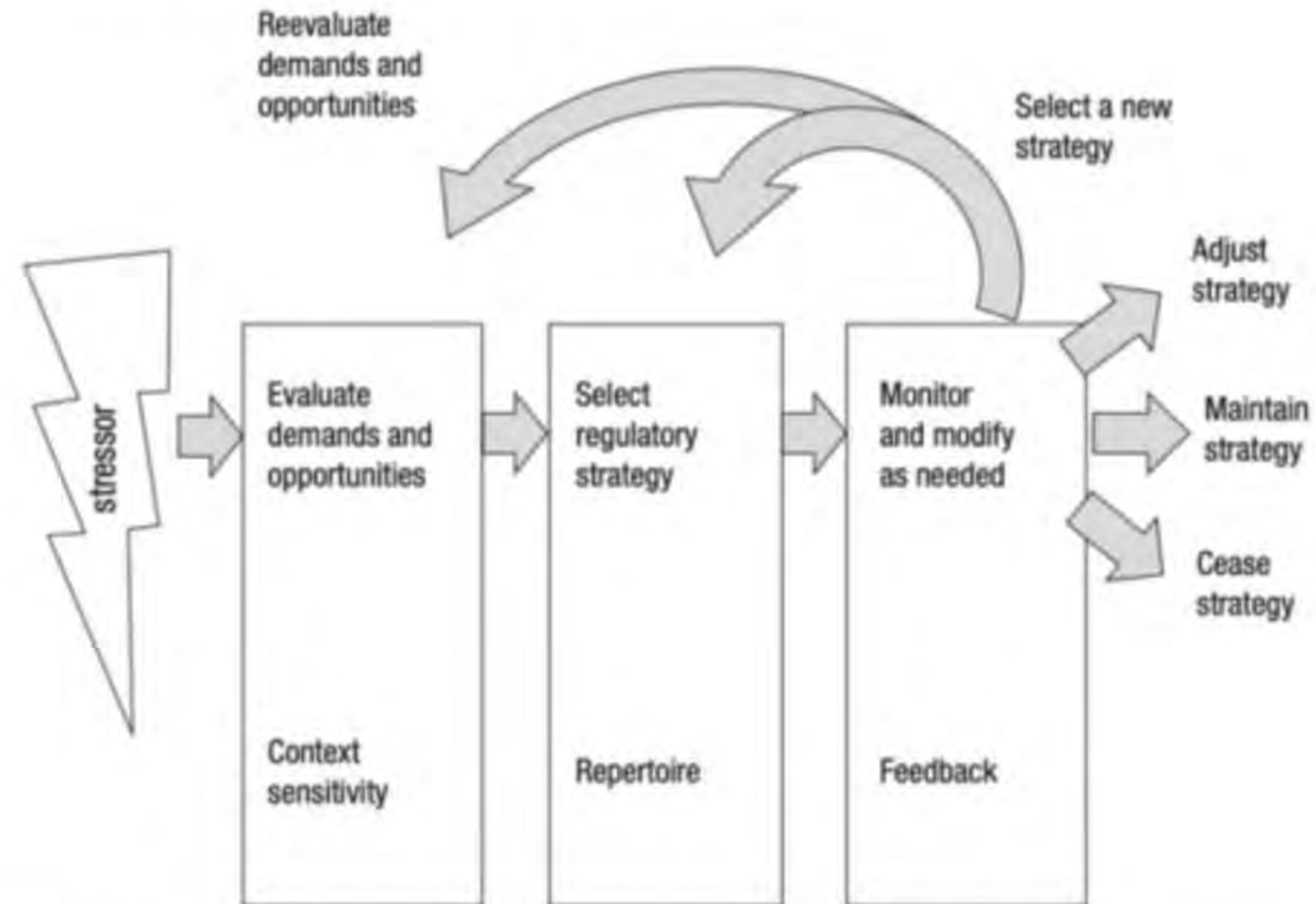
*Psychological flexibility is an **important and modifiable predictor of resilience** and has even been proposed as an explanation for how **resilience works**.*

Being flexible in the midst of a life stressor has been described as a sequence of three stages (Bonanno & Burton, 2013):

- Evaluating the demands of the situation or context
- Selecting a response or coping strategy
- Monitoring the success of an approach and modifying as needed (Bonanno et al., 2013)



# FOR ALL YOU 'LEFT-BRAINERS' OUT THERE....



Source: Bonanno & Burton, 2013; Figure adapted from (Bonanno & Burton, 2013; image reproduced with author's permission)

## BUILDING PSYCHOLOGICAL FLEXIBILITY: INTENTIONALITY AND PRESENCE

Resilience and Flexibility are facilitated by:

- Hope
- Optimism
- Grit
- Perseverance
- Mindfulness



# HOPE AND OPTIMISM

Both are about an individual's beliefs about the future.

- **Optimism** is a personality state
- **Hope** involves the will to effect positive outcomes and the ability to generate flexible problem-solving strategies.

(Rabinowitz et al., 2018).

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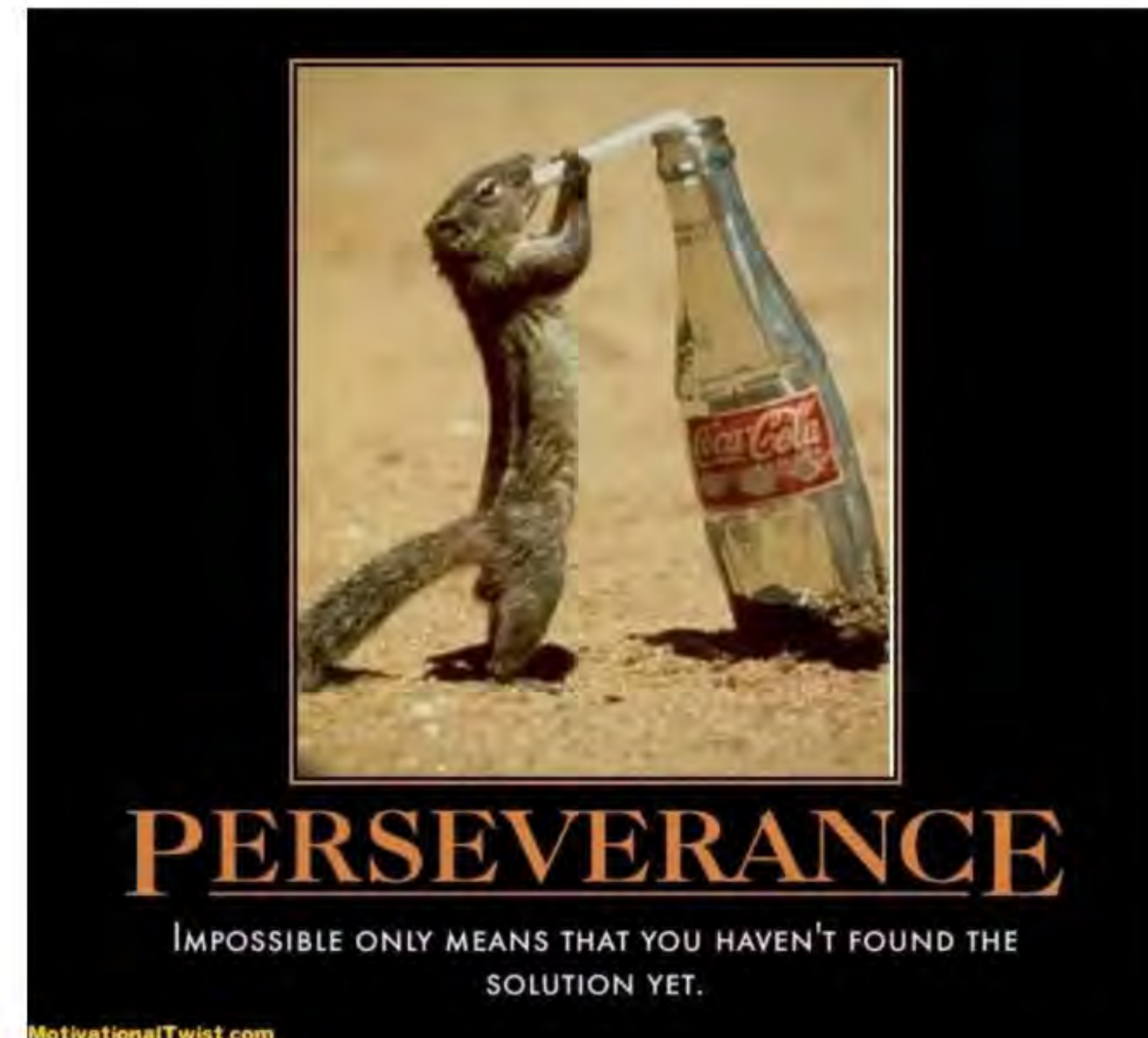


# GRIT AND PERSEVERANCE

Grit = **perseverance, persistence, and passion toward long-term goals.**

Grit enables individuals to engage in effortful activities including studying or exercising, particularly when practicing may not be intrinsically rewarding.

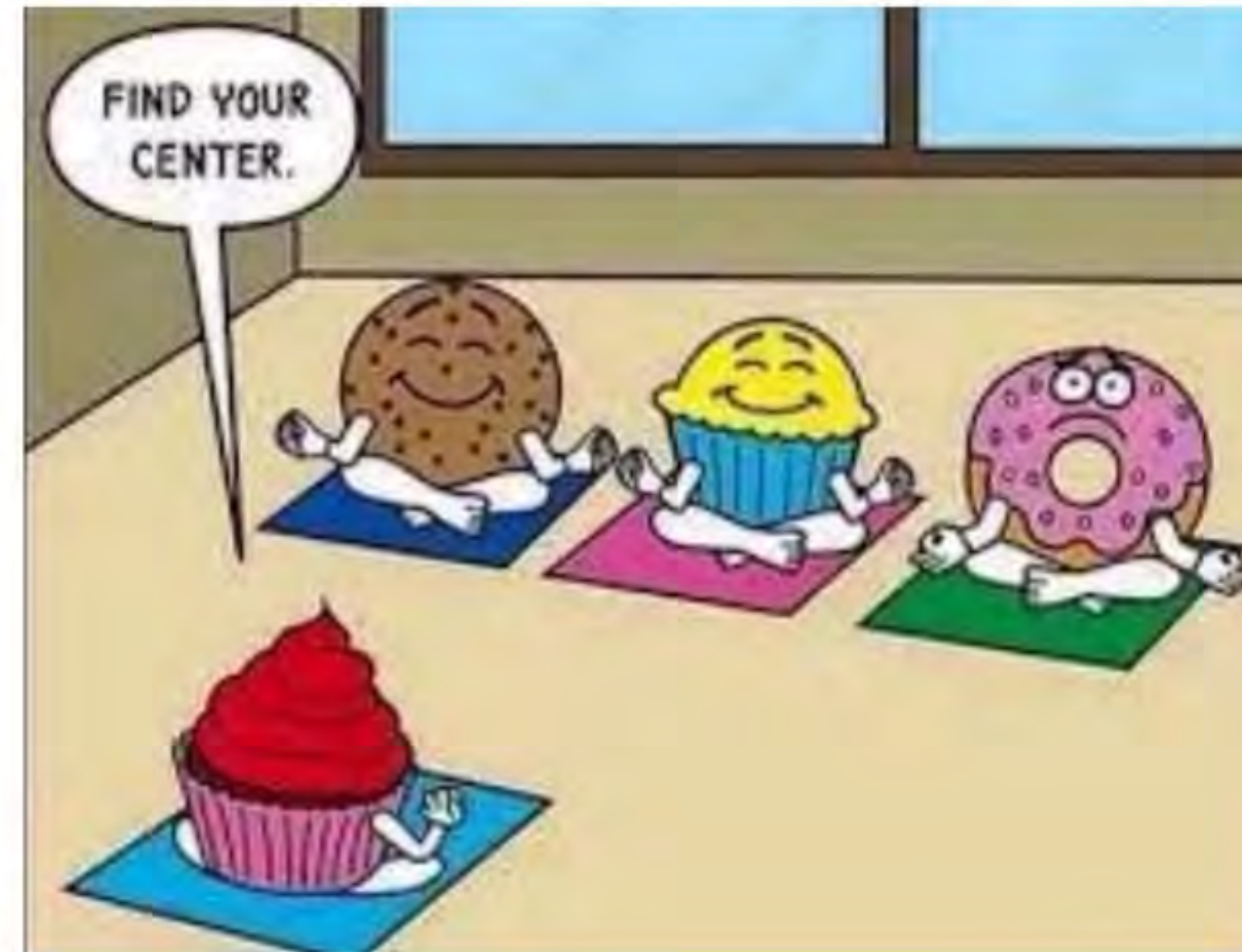
(Duckworth et al., 2011; Rabinowitz et al., 2018)



# MINDFULNESS

Mindfulness involves **the ability to be open and to observe rather than judge or “push away” thoughts and feelings.**

Being mindful enables us to appreciate our common humanity and to reflect on **the present moment with awareness, self-compassion, and perspective.**



Germer et al., 2013

## TOOL FOR MINDFULNESS: THE ONE MINUTE PAUSE (OMP)

Build the OMP into your day:

- Schedule Changes in your day
- Bathroom Breaks
- Work breaks
- Stress and tension
- Self-check your emotions

# ONE MINUTE PAUSE: MAKING IT A ROUTINE PART OF YOUR DAY

- Coffee time
- Starting the car
- Driving
- Showering
- People
- Dog Walks
- Family

Intentionality  
Mindfulness  
Presence

YOU ARE NOT  
ALONE

SUICIDE  
PREVENTION

**National Suicide Prevention Lifeline**

800-273-TALK (8255)

**Crisis Text Line**

Text HOPELINE to 741741

**Veterans Crisis Line**

800-273-8255 (press 1)

**Farmer Wellness Helpline**

888-901-2558

**TrevorLifeline (LGBTQ)**

866-488-7386

**County Crisis Lines:**

Use this directory



Thank  
you!

- International Critical Incident Stress Foundation

<https://icisf.org/covid19-resources/>

- US Department of Veteran Affairs

[https://www.ptsd.va.gov/covid/COVID\\_healthcare\\_workers.asp](https://www.ptsd.va.gov/covid/COVID_healthcare_workers.asp)

- Wisconsin Department of Health Services

<https://www.dhs.wisconsin.gov/covid-19/resilient.htm>

- Center for Healthyminds at the UW-Madison

<https://centerhealthyminds.org/well-being-toolkit-covid19>

## RESOURCES

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## REFERENCES

- Berg, Sara. 6 Things Doctors Wish Patients Knew about “coronasomnia”. (September 25, 2020) *American Medical Association*. <https://www.ama-assn.org/delivering-care/public-health/6-things-doctors-wish-patients-knew-about-coronasomnia>
- Boserup B, McKenney M, Elkbuli A. Alarming trends in US domestic violence during the COVID-19 pandemic. *Am J Emerg Med*. 2020 Dec;38(12):2753-2755. doi: 10.1016/j.ajem.2020.04.077. Epub 2020 Apr 28. PMID: 32402499; PMCID: PMC7195322.
- Burn-out an "occupational phenomenon": International Classification of Diseases (May, 28, 2019) *World Health Organization*. <https://www.who.int/news/item/28-05-2019-burn-out-an-occupational-phenomenon-international-classification-of-diseases>

## REFERENCES

- Fallek, Ronit MPA; Tattelman, Ellen MD; Browne, Terysia MPH;  
Kaplan, Randi LMSW; Selwyn, Peter A. MD, MPH CE: Original Research:  
Helping Health Care Providers and Staff Process Grief Through a Hospital-  
Based Program, AJN, American Journal of Nursing: July 2019 - Volume 119 -  
Issue 7 - p 24-33. <https://doi:10.1097/01.NAJ.0000569332.42906.e7>
- Kleiman-Lee, Kimberly, The Big Quit: Where are your employees going and why? (July 20, 2021) *Do I Dare? Leadership Redefined with KKL Podcast.*

# REFERENCES

- Taylor, Steven, Paluszek, Michelle M., Rachor, Geoffrey S., McKay, Dean, Asmundson, Gordon J.G., Substance use and abuse, COVID-19-related distress, and disregard for social distancing: A network analysis, *Addictive Behaviors*, Volume 114, 2021,106754, ISSN 0306-4603, <https://doi.org/10.1016/j.addbeh.2020.106754>.
- Youn, Soo. America's Workers are Burned Out. (June 29, 2021). *The Washington Post*. <https://apple.news/A10S8tR7kQ1KfuenLbO0uDg>