




WELLBEING: MENTAL HEALTH AND RESILIENCE

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Reponses to pandemia Covid 19

- Stress Reactions (distress)
- Behavior changes
- Mental Disorders

Stress Reactions (distress)

- Isolation
- Decreased Sense of Safety
- Somatic Symptoms
- Sleep problems

Behaviour changes

- Medicines, alcohol use, smoking
- Work/Life Balance
- Domestic/interpersonal Violence
- Restricted every day activities

Mental Disorders

- Depression
- PTSD
- Anxiety
- Grief reaction (pathological)

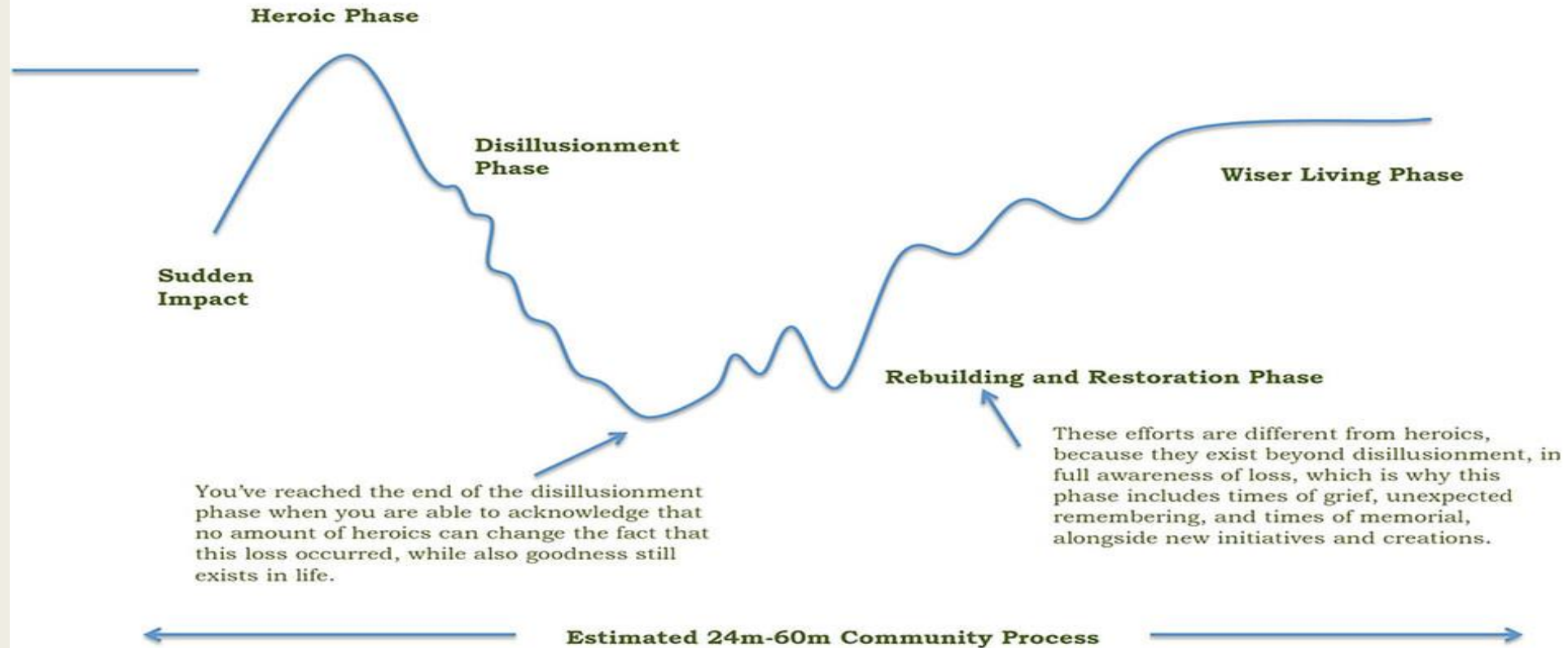
Psychology of pandemic

- Fear, anger, blame (authorities, immigrants)
- Shortage of knowledge (prophylaxis and treatment)
- Non-specific symptoms
- Potential for isolation and quarantine (economic problems)
- Misinformation
- Medically unexplained symptoms (overloaded health care system)
- Additional request for health care (in a same time restricted access to care)

Media

- Timely and accurate information vs dissimulation of fear and distress

Phases of Collective Trauma Response



Provoking factors

- Unexpected events
- Conspiracy theories
- Inadequate resources
- Loss of faith in leaders & institutions
- Restrictions of civil rights
- Death of children/vulnerables population

Vulnerability

Pre- Disaster	During Disaster	After Disaster
Socio-economical factors	Duration and severity	Job loss
Age	Injury	Social support loss
Culture	Home loss	Relocation
Social support	Displacement	

Impact to families

- Younger population are less vulnerable, but effective communication and clarification are essential
- Greater risk in elderly
- Effect of social distancing (virtual schools/offices, change in household structure, possible loss of work/finances)
- Family disruption, distress, violence, alcohol consumption

Family response

- Approved information (trusted sources)
- Communication within the families (common understanding)
- Healthy eating and physical activities
- Good hygiene
- Rest, sleep, calm
- Stay connected (family, friends)
- Additional attention to persons/friends with special needs

Family response (cont.)

- Maintain routines
- Scheduled activities (work, rest)
- All to gather activities
- Discuss expectation with children (explain media information, ask about they expectations, educate about hygiene, keep calm)
- Outside contacts (virtual)
- Support for elderly (avoid contacts, pre-plan support (medicines, food), more virtual contacts (phone), ask for advice)

Psychological First Aid

- SAFETY
- CALMING
- SELF/COMMUNITY EFFICACY
- CONNECTEDNESS
- HOPE/OPTIMISM

Hobfoll, S. E., Watson, P., Bell, C. C., Bryant, R. A., Brymer, M. J., Friedman, M. J., et al. (2007). Five essential elements of immediate and mid-term mass trauma intervention: empirical evidence. *Psychiatry*, 70(4), 283–315– discussion 316–6

SELF CARE

- Sleep, Nutrition, Hydration
- Calming strategies
- Stay informed
- Use Media (approved information, provided by authorities)
- Existing situation is “for now normal”
- Develop routines (work, rest)

CONNECTIONS

- “Physical Distance with Increased Social Connection” (Social Distancing)
- Technologies (caution with screen time)
- Exercise, connect with family, friends
- “We are in this together”

LEADERSHIP

- Anticipate, identify, support
- Keep calm, «Put on your oxygen mask first»
- Clear communication – what, when, how?

Birkeland, M. S., Nielsen, M. B., Knardahl, S., & Heir, T. (2015). Time-lagged relationships between leadership behaviors and psychological distress after a workplace terrorist attack. *International Archives of Occupational and Environmental Health*.

HOPE

- This will end, some countries do well, went back to normal
- Vast majority of people will do well
- Find new meaningful actions
- Call on previous disasters

Burnout syndrome (causes)

- Emotionally difficult job (medics, military etc.)
- Monotonous work
- Work at night
- Lack of satisfaction
- Large amount of work
- Conflicts at work
- Lack of possibilities for education/personal development
- Personal conflicts

Burnout syndrome (signs)

- Low energy
- Helplessness
- Sleep disturbances
- Headache
- Exceptional use of alcohol, medicines
- Low productivity at work
- Negative attitude to colleagues, clients
- Explosivity
- Weight loss
- Suspicion
- Depression, suicide thoughts, attempts

«Healthy» conflict vs mobbing

«Healthy» conflict	Mobbing
Clear roles and responsibilities	Unclear roles
Cooperation	Boikot, non-cooperation
Common goals	Unknown result
Clear interpersonal relations	Non-clear interpersonal relations
Healthy organizational structure	Lack of organisation
Episodical discussions, confrontations	Long time systematic non-ethical relationships
Open and outspoken attitude	Ambiguous attitude
Open conflicts and discussions	Hidden actions, denying conflict situation
Honest communication	«Around» communication, avoidance of communication

Bossing

- Favoritism
- Manipulations, intrigues
- Non predictable reactions leads to low initiative from workers
- Suspicions if someone shows initiatives
- Unknown roles, responsibilities
- Non-ethical actions, public punishment of colleagues
- Imitation of work (a lot of meetings, discussions without meaningful reasons)
- Non-goal directed activities
- Oral instructions, no consequences
- Main goal – to keep system, personal role in the system

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Thank you!