Mental Health of the Health Care Workforce During COVID-19 and Disproportionate Impact on Communities of Color

NASEM Webinar 3 – December 14, 2020

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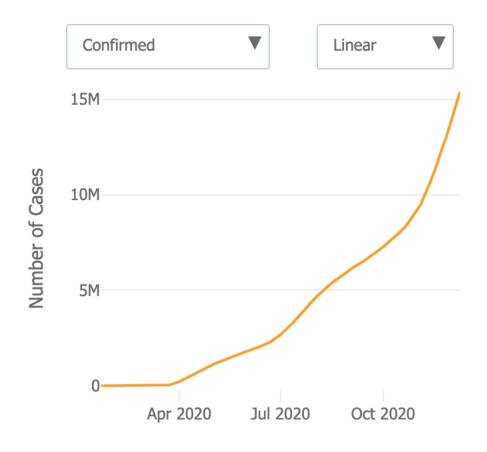


UNITED STATES

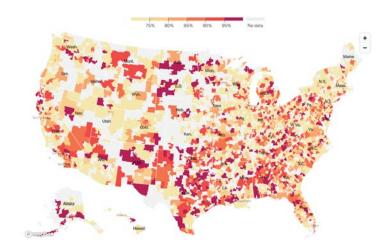
Yesterday's data (12/10/2020)

NEW CASES: **221,267** DEATHS: **3,124**

The first case of COVID-19 in United States was reported 322 days ago on 1/21/2020. Yesterday, the country reported 221,267 new confirmed cases and 3,124 deaths.

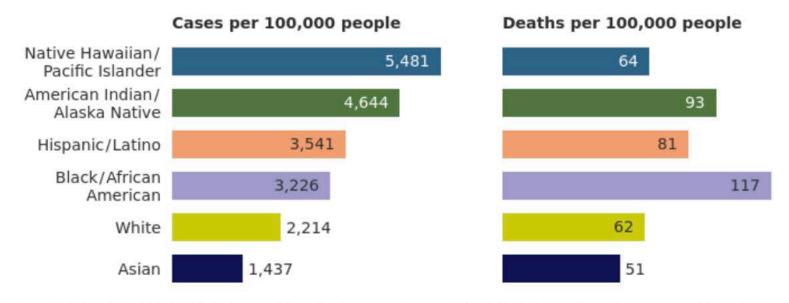


- More than 15 million COVID-19 cases in US in past 10 months
- Over 200,000 new infections a day
- Over 100,000 hospitalized
- 3,124 deaths = the leading cause of death in US
- Intensive care beds critically short for 100 million



Racial/Ethnic Disparity in Infection + Mortality

In the **United States**, through December 8, Native Hawaiians/Pacific Islanders were most likely to have contracted COVID-19. Black/African American people were most likely to have died.



Notes: Nationwide, 51 of 56 states and territories report race/ethnicity information for cases and 50 of 56 report race/ethnicity for deaths. Graphic includes demographic data from all states and territories that report, using standard Census categories where possible, and scaled to the total US population for each Census category. Race categories may overlap with Hispanic/Latino ethnicity. Some rates are underestimated due to lack of reporting of race and ethnicity categories for COVID-19 cases and deaths.



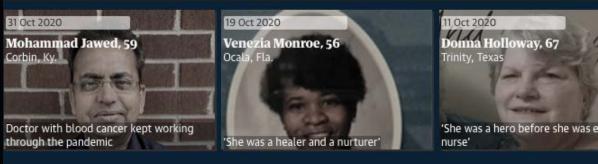


US Healthcare Workers with COVID-19

- More than 263,970 have contracted COVID-19, 892 died
 (CDC 12/10/2020 death status only available for 75%)
- ? Failure to effectively track and report deaths
- 1445 workers died after contracting COVID on the job (Kaiser Health News+ Guardian Lost on the Frontline)
- More frequently exposed to COVID+ patients, lack sufficient PPE, work in high risk settings like nursing home, live in densely population communities, residences



October



September









Confirmed deaths by occupation Confirmed deaths by race and ethnicity % of total deaths **Total deaths** Select an occupation **Coroner: 1 confirmed death** Diag. clinician: 8 **White: 105** Social worker: 12 Black: 74 Technologist: 16 Asian/Pacific Islander: 50 First responder: 22 Nurse: 96 Hispanic: 38 Cleaner: 6 **Native American: 7 Administrative: 17** Unknown/Other: 4 Support: 51 Physician: 36



Impact on Emotional Wellbeing of Health Care workers

- Short term
 - Fear, anxiety for self and family, role change
 - Anger and frustration
 - Anguish and grief
 - Separation
- Longer term
 - Burnout, worsening mental health conditions
 - Post Traumatic Stress Disorder (PTSD)



Impact of SARS-CoV-2 on Mental Health of Hospital Workers

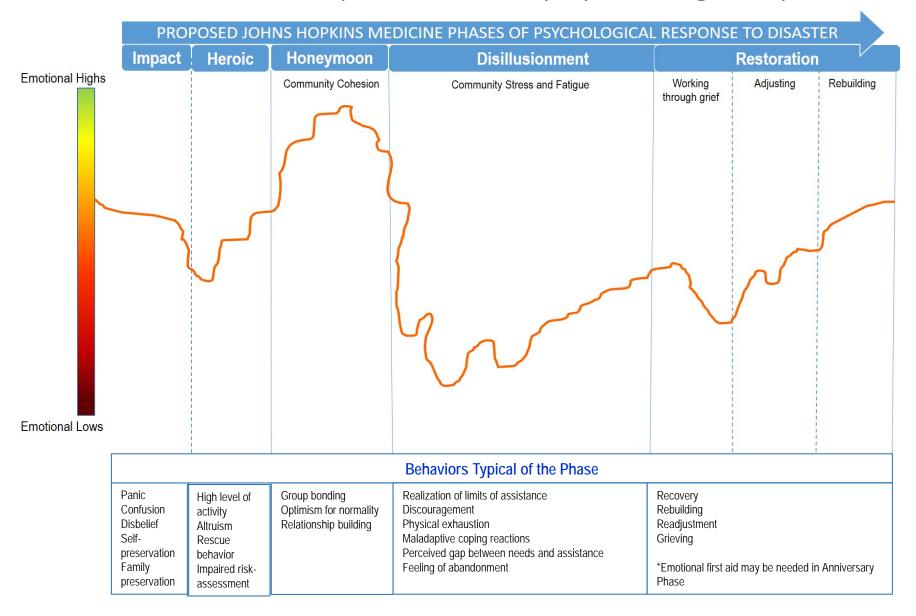
Problem	Prevalence (%)
Depression	13.5 - 44.7
Anxiety	12.3 - 35.6
Acute Stress Reaction	5.2 - 32.9
PTSD	7.4 - 37.4
Insomnia	33.8 – 36.1
Work Burnout	3.1 - 43.0

Risk Factors

- Direct exposure
- Nurse
- Frontline
- Low social support
- Less work experience

Sanghera J Occup Health 2020

Disasters follow predictable psychological patterns



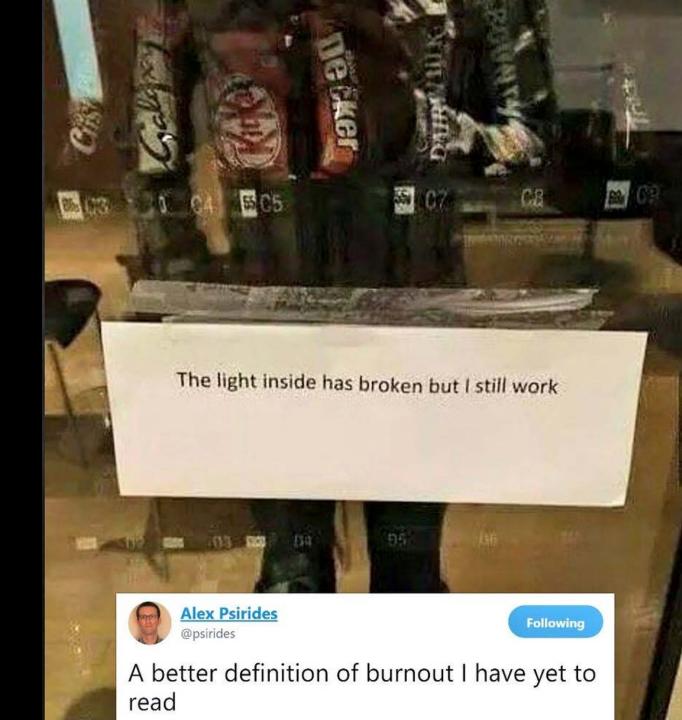
"We don't feel like heroes anymore"

- Numerous sick calls / call outs
- Multiple leaves of absence, early retirement
- Incivility: blaming, anger, anxiety, emotional outbursts
- Verbalizing fatigue, despair, burnout
- Performance issues



"How are you coping?"

"I'm not coping, I'm surviving"



"Colorblind Policy"

 Race-neutral governmental policies that reject discrimination in any form in order to promote the goal of racial equality

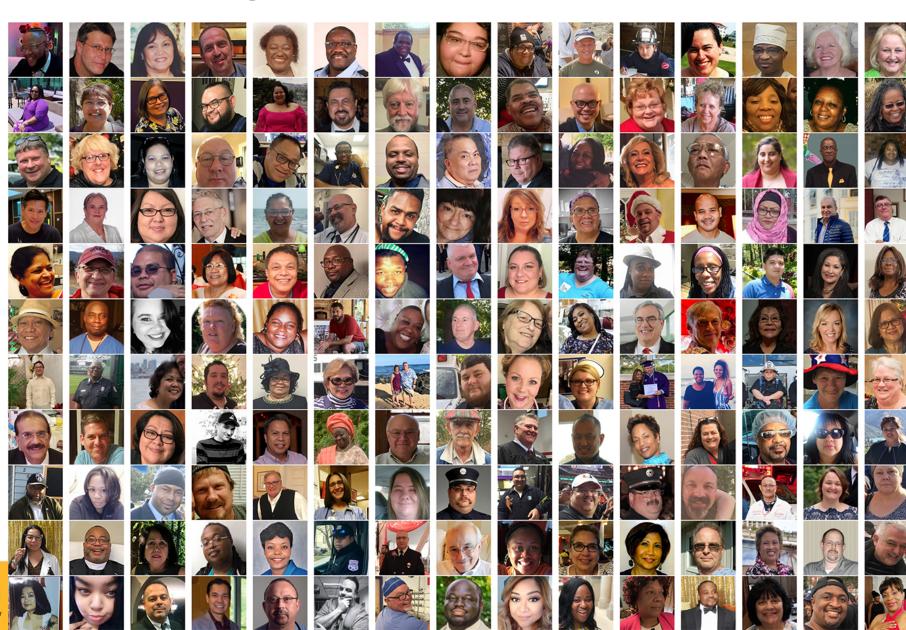


- When legislators don't consider pre-existing disparities, there's a risk of exacerbating them
- Policies don't work for everyone: primarily white Americans are able to benefit from them
- E.g. COVID-19 Rental Assistance;
 Cessation of mass transit

Challenges to Reaching Workers of Color

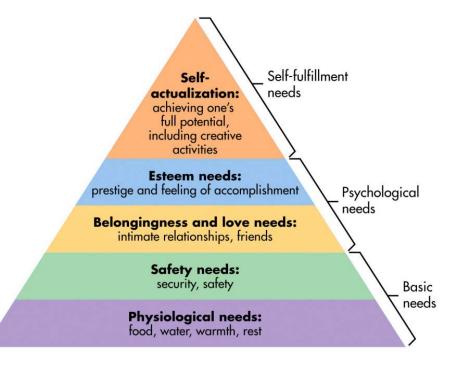
CHALLENGE

- Description
- Health Literacy
- Channel
- Language
- Trust
- Culture



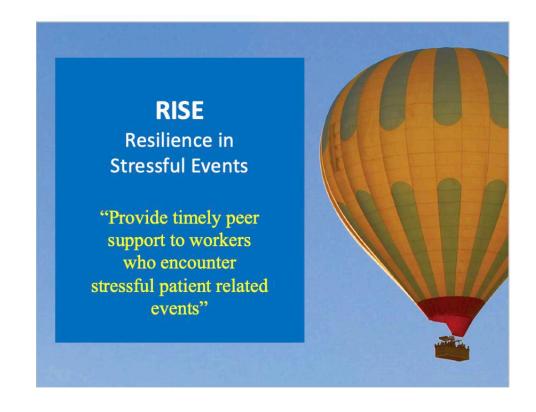
MESH (Mental, Emotional + Spiritual Help)





RISE (Resilience in Stressful Events) Peer Support Program

- 35 volunteer health care workers trained in psychological first aid
- Confidential, on-call 24/7
- In-person and virtual encounters with individuals and groups, proactive rounds
- 51 additional responders trained
- 3192 staff supported 3/15 12/5

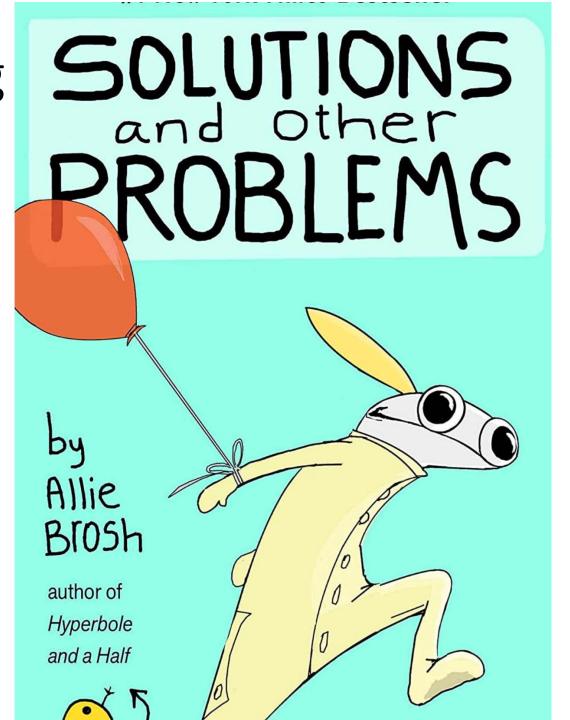


Information about training: https://www.marylandpatientsafety.org

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Challenges to Reaching Workers of Color

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SOLUTION

- Broaden marketing, website
- Increase channels e.g. plasmas, postcards, tailor messages
- Spanish messages + speakers
- Rounding, supervisors
- Hopkins Familia Resource Group
- Community outreach
- Chief Diversity Officer
- Vaccine Equity Group

Frontline Crisis Leadership Training Resources



To enhance well-being and resilience at the organizational and personal levels at Johns Hopkins Medicine by supporting our workforce, and by strengthening crisis leadership at the executive and frontline managerial level

Over 1000 managers trained

Training videos at

https://www.hopkinsmedicine.org/joy-at-jhm/office-of-well-being/covid/frontline-crisis-leadership.html

10 Principles of Crisis Leadership

- 1. Structure is the antidote to chaos
- 2. Listen before you speak
- 3. Information is the antidote to anxiety
- 4. Empowerment is the antidote for feeling powerless/out of control
- 5. People trust action not words

https://www.hopkinsmedicine.org/joyat-jhm/office-of-wellbeing/covid/frontline-crisisleadership.html

- Perceived support is the antidote for isolation
- 7. Cohesive groups do better in times of stress and challeng3
- 8. There is no such thing as an information vacuum
- Transparent, timely, truthful communication is essential to credibility
- 10. The moment of absolute certainty may never arise

Summary

- COVID-19 is the defining health crisis of our generation
- Disproportionate impact on workers of color
- Challenges to reaching workers of color
- Comprehensive institutional solutions needed
- Achieving equity requires conscious effort



Every storm runs out of rain.

REFERENCES

CDC Covid data tracker https://covid.cdc.gov/covid-data-tracker/#health-care-personnel

Lost on the frontline. KHN and the Guardia. https://www.theguardian.com/us-news/ng-interactive/2020/aug/11/lost-on-the-frontline-covid-19-coronavirus-us-healthcare-workers-deaths-database

Sanghera J, Pattani N, Hashmi Y, Varley KF, Cheruvu MS, Bradley A, Burke JR. The impact of SARS-CoV-2 on the mental health of healthcare workers in a hospital setting-A Systematic Review. J Occup Health. 2020 Jan;62(1):e12175.

Busch IM, Moretti F, Mazzi MA, Wu AW, Rimondini M. What we have learned from two decades of epidemics and pandemics: A systematic review and meta-analysis of the psychological burden of frontline healthcare workers. <u>Psychotherapy and Psychosomatics</u>. [In press].

Wu AW, Connors C, Everly GS Jr. COVID-19: Peer Support and Crisis Communication Strategies to Promote Institutional Resilience. <u>Ann Intern Med</u>. 2020 Apr 6:M20-1236

Wu AW, Buckle P, Bellandi T, et al. Supporting the Emotional Well-being of Health Care Workers During the COVID-19 Pandemic. <u>Journal of Patient Safety and Risk Management</u>. 2020 (June);25(3):86-90.

Everly GS, Wu AW, Crumpsty-Fowler CJ, Dang D, Potash JB. Leadership principles to decrease psychological casualties in COVID-19 and other disasters of uncertainty. <u>Disaster Med Public Health Prep</u>. 2020 Oct 22:1-10..

Johns Hopkins Frontline Crisis Leadership Training Resources https://www.hopkinsmedicine.org/joy-at-jhm/office-of-well-being/covid/frontline-crisis-leadership.html

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