Wellness & Self-Care

McLean Pollock, PhD
Assistant Professor, Psychiatry & Behavioral Sciences
Existing emotional health, wellbeing, and self-care resources at Duke

1. Self-directed resources – both broad and general: Library of Well-Being Resources
2. Guided – focused resources, such as Chaplain Services, Caring for Each Other, and Conversations with Colleagues
3. Specialized – individual, emotional support
Library of Well-Being Resources

Toolkits

**Well-Being Pyramid**
Find your health system entity’s Well-Being Pyramid, a tool for quickly and easily identifying support needs.

**COVID Communication Primer**
A graphic adaptation by Dr. Nathan Gray of tips produced by VitalTalk.

**COVID-19 Resource Guide for Parents and Families**
Created with the Duke Child and Family Study Center, this guide contains talking tips, fun activities, and more.

**Duke Health and Well-Being: Tools for Resiliency**
Mindful awareness, chair yoga, three good things, and more.

**Duke Health and Well-Being: Resources for Hospital Workers**
Emotional Toll of Current Crises

1. Chronic stress – COVID-19, economic devastation, racism and social injustice, universal uncertainty
2. Inability to access previous coping strategies
3. Emotions and needs of colleagues, patients/clients, friends, and self
1. See fewer options
2. Reactive and reduced empathy
3. Rejection of advice and suggestions
We All Need Support

• Debrief with your peers or loved ones
  ▪ Consider what kind of support you need from them

• Emotional support
  ▪ Emotional Support and Well-Being Line
  ▪ Personal Assistance Service
  ▪ Conversations with Colleagues
  ▪ Caring for Each Other
  ▪ Duke Psychiatry Behavioral Health Assessment and Treatment Services
Individual Self-Care Strategies

• Acceptance
• Find the strategies that are right for you
  ▪ Maintaining social connections
  ▪ Set boundaries with the news
  ▪ Breathe
  ▪ Complete a small, to-do task
• Try other wellness strategies
  ▪ bit.ly/dukewellsupport
• You are not alone
Sleep

Meg Danforth, PhD
Clinical Associate, Psychiatry & Behavioral Sciences
It is a basic survival mechanism not to sleep deeply when we are in danger!
Managing Episodic Insomnia

1. Avoid Social Jet Lag
Managing Episodic Insomnia

1. Avoid Social Jet Lag
2. Protect the Bed-Sleep Connection
Managing Episodic Insomnia

1. Avoid Social Jet Lag
2. Protect the Bed-Sleep Connection
3. Quiet an Active Mind
Chronic Insomnia involves difficulty sleeping and daytime symptoms occurring at least three times per week for at least three months.
Cognitive Behavior Therapy for Insomnia (CBTI) should be the first-line treatment for adults with chronic insomnia (American College of Physicians, 2016)

• Brief (4 sessions), Behavioral (non-medication), Evidence-Based therapy
Accessing CBTI during COVID-19

1. Individual Telehealth Therapy with a CBTI provider

To make an appointment, call 919-684-0100.
Accessing CBTI during COVID-19

1. Individual Telehealth Therapy with a CBTI provider
2. App-based Treatment
   CBT-I Coach—free!
1. Individual Telehealth Therapy with a CBTI provider
2. App-based Treatment
   CBT-I Coach—free!
3. Self Help Books
   Quiet your Mind and Get to Sleep
   by Colleen Carney and Rachel Manber
Managing Stress By Asking for Help
A Lens Toward Anxiety & Traumatic Stress

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UCLA-Duke National Center for Child Traumatic Stress
Stress Reactions & Emotional Responses

• Fear
• Irritability
• Difficulty concentrating
• Feeling angry / cynical
• Intrusive or recurrent disturbing thoughts
• Sleep problems
• Feeling emotionally detached
• Physiologically hyped
• Guilt
• Grief
• Sadness
• Helpless or feeling no control over what is happening
• Hopelessness

• Chronic exhaustion
• Social withdrawal
• Physical ailments (chest tightness, GI distress, pain)
• Diminished self-care
• Feeling down or depressed
• Avoiding reminders of difficult experiences
• Increased monitoring of physical symptoms
• Second thoughts about career choice
Risk as a Continuum for Stress to Trauma

- Alicia Lieberman, PhD, UCSF, Child-Parent Psychotherapy, 2010
I’m being exposed to COVID-19 (w or w/o PPE).

- I am going to be infected.
- I might get someone I love sick.
- Someone I love might die because I brought COVID-19 home.

Terrified
Irritable
Sad
Lonely

Wearing as much PPE as I can.
Washing hands, clothes, mask repeatedly.
Not sleeping well.
Distancing from loved ones.

Less patience with children
Distant or isolated from family and friends
More easily frustrated with colleagues

Center for Pediatric Traumatic Stress, 2020. healthcaretoolbox.org/tools-and-resources/covid19.html
What Does Traumatic Stress Look Like? (PTSD)

- **Re-experiencing**
  - “It pops into my mind.”
  - “Feels like it’s happening again.”
  - “I get upset when something reminds me of it.”

- **Alterations in cognition or mood**
  - Feeling very scared, angry, guilty, or ashamed.
  - Thoughts: “All people are bad” / “The whole world is a scary place.”

- **Avoidance**
  - “I block it out, try not to think about it.”
  - “I try to stay away from things that remind me of it.”

- **Increased arousal**
  - “I’m always afraid something bad will happen.”
  - “I jump at any loud noise.”
  - “I can’t concentrate, can’t sleep.”

It is not unusual to have some or all of these reactions during an unfolding stressful situation like the pandemic and racist violence.

Center for Pediatric Traumatic Stress, 2020. healthcaretoolbox.org/tools-and-resources/covid19.html
• Gauge your own reactions
• You may wish to complete an evidence-based assessment – now or later – to check on your own stress reactions.

• What is this tool?
  ▪ Assesses current traumatic stress reactions in adults
  ▪ Caveat: Based on a validated tool* – adapted by Kassam-Adams et al. 2020 for use during the evolving pandemic situation

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Center for Pediatric Traumatic Stress, CHOP, 2020. healthcaretoolbox.org/tools-and-resources/covid19.html
Rate Your Stress Reactions
Acute Stress Disorder Scale (ASDS) adapted for COVID-19

1) Have you felt numb or distant from your emotions? 
2) Have you ever felt in a daze?
3) Have things around you ever felt unreal or dreamlike?
4) Have you ever feel distant from your normal self or like you were watching it happen from outside?
5) Have you been unable to recall important aspects of things that happened?
6) Have memories of things that happened kept entering your mind?
7) Have you had bad dreams or nightmares?
8) Have you felt as if you were reliving things that happened?

Please consider how you have been feeling recently, related to COVID-19.

1=Not at all   2=Mildly   3=Medium   4=Quite a bit   5=Very much

Center for Pediatric Traumatic Stress, 2020.
healthcaretoolbox.org/tools-and-resources/covid19.html
Rate Your Stress Reactions
Acute Stress Disorder Scale (ASDS) adapted for COVID-19

Please consider how you have been feeling recently, related to COVID-19.

1=Not at all   2=Mildly   3=Medium   4=Quite a bit   5=Very much

9) Do you feel very upset when you are reminded of things that happened? 9) ____
10) Have you tried not to think about it? 10) ____
11) Have you tried not to talk about it? 11) ____
12) Have you tried to avoid situations or people that remind you of it? 12) ____
13) Have you tried not to feel upset or distressed about it? 13) ____
14) Have you had trouble sleeping? 14) ____
15) Have you felt more irritable? 15) ____
16) Have you had difficulty concentrating? 16) ____

Center for Pediatric Traumatic Stress, 2020.
healthcaretoolbox.org/tools-and-resources/covid19.html
Rate Your Stress Reactions
Acute Stress Disorder Scale (ASDS) adapted for COVID-19

1=Not at all  2=Mildly  3=Medium  4=Quite a bit  5=Very much

Please consider how you have been feeling recently, related to COVID-19.

17) Have you become more alert to danger?  
18) Have you become jumpy?  
19) When you think about it, do you sweat or tremble or does your heart beat fast?  
20) Thinking about all of these reactions together, how much are they bothering you or getting in the way of your work, relationships, or other parts of life?

SCORING: Am I having significant reactions?

Sum of items 1 to 19 ≥ 56 and/or Rated item 20 ≥ 3

Consider seeking treatment

Center for Pediatric Traumatic Stress, 2020. healthcaretoolbox.org/tools-and-resources/covid19.html
Do I Need to Seek More Help?

- Are self care and stress management strategies not enough?
- Are you having reactions to stress in ways that you are not coping with so that you’re usual functioning is impaired? Have you talked about it with a friend or family?
- Do you already have underlying anxiety, depression, or other mental health difficulties?
- Have you or someone you care about been seriously hurt or died as a result of COVID-19 or racial violence?
- Are there past adverse experiences or traumas in your background making these reactions more complicated?
Prevention: Providing Protective Factors During A Pandemic

**Clinical / Treatment**
- Persistent distress or risk factors.
  - Arrange psychosocial and mental health support.

**Targeted**
- Acute distress or a few risk factors present.
  - Provide extra support and anticipatory guidance.
  - Monitor ongoing distress and refer if needed.

**Universal**
- Most individuals/families are understandably distressed but coping well.
  - Provide general support — help family help themselves.
  - Provide information regarding common reactions.
  - Screen for indicators of higher risk.
Universal (Prevention/Protective) Interventions

FOR: Staff that are distressed, mostly resilient, with coping strengths and resources

- Provide general support, help families help themselves, provide info regarding common reactions.
- Screen for risk and to determine who needs additional support/referral
- Focus on strengths
- Stress management
  - Physiological grounding, breathing, relaxation skills, mindfulness, gratitude
  - Self-Care
  - Psychological First Aid (National Child Traumatic Stress Network)
    1) Connect & Engage 2) Safety/Comfort 3) Stabilization
    4) Gather Info on Needs & Concerns 5) Practical Assistance 6) Connect Social Supports
    7) Coping info 8) Link Collaborative Services
Targeted Intervention (Intermediary)

**FOR:**
- Staff with acute distress, who have additional risk factors, &/or have few coping strengths or resources
- Provide extra support specific to symptoms, coping needs, & cultural beliefs
- Team leads in high impact zones should check in with teams and have a key POC team member assigned
- Use social/family connections
- Monitor your distress level and refer to more intense mental health services if have symptoms or get worse
- **Skills for Psychological Recovery** ([National Child Traumatic Stress Network](https://www.nctsn.org))
  1) Build Problem Solving skills
  2) Managing Reactions
  3) Healthy Social connections
  4) Promote Positive Activities
  5) Promote Helpful Thinking
- Acute Stress Interventions
  - Personal Assistance Services (PAS)
  - Psychiatric outreach to frontline workers
  - Talking to our primary care providers
  - Helplines and hotlines
  - Seeking a therapist for a short-term intervention
Clinical Treatment Interventions – “We Can Help”

FOR:
- Staff with significant or worsening distress, posttraumatic stress symptoms, multiple risk factors and few/no coping strengths or resources
  - Exhausted internal resources: stress/emotions/behaviors are getting too difficult to manage
  - Have experienced a trauma or loss
  - Preexisting conditions exacerbated
  - Acute Stress Disorder
  - Anxiety Disorders/Adjustment Disorder
  - Depression
  - PTSD
  - Suicidal thinking
  - Substance use
  - Grief/complicated bereavement
  - Stress without a diagnosis

Mental Health Treatments (Evidence-based)
- Therapy
- Medications
Mental Health Treatments for Anxiety and Traumatic Stress Disorders (Evidence-based)

• Therapy
  ▪ Cognitive-behavioral therapy e.g. (Cognitive Processing Therapy)
  ▪ Dialectic behavioral therapy
  ▪ Acceptance & commitment therapy
  ▪ Interpersonal/psychodynamic therapy
  ▪ Biofeedback

• Medications
  ▪ Specific disorders (certain anxiety disorders, PTSD in adults)
  ▪ Symptoms (physiologic reactivity; irritability)
    ▪ SSRI
    ▪ Antihistamines (hydroxyzine)
    ▪ Beta blockers (propanol)
    ▪ Benzodiazepines for panic disorder
How & When Do I Obtain Mental Health Referrals – for others I care about, including my staff?

• If signs of significant distress and unexpected problems coping are present, reach out to encourage the individual to accept information about how to obtain professional support.
  ▪ With kindness and compassion, ask if they have connected to team leads and supervisors.

• In emergencies, reach out to team leads, call for backup to get access to a professional if you are worried about high risk behavior:
  ▪ Expresses intentions to harm self or others
  ▪ Remains highly emotionally dysregulated after 20+ minutes (not just grief-stricken)
  ▪ Is intoxicated, unable to care for self, or is otherwise impaired

Adapted Brymer & Bursch, 2020; T Runyan, 2020
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Managing Stress, Asking for Help, Accessing Resources

Addressing Symptoms of Depression in the Age of COVID-19

Nicole Heilbron, PhD
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Over the last 7 days, how often have you been bothered by:

- Having little interest or pleasure in doing things?
- Feeling down, depressed, or hopeless?
Stress Reactions & Emotional Responses

- Fear
- Irritability
  - Difficulty concentrating; indecisiveness
- Feeling angry / cynical
- Intrusive or recurrent disturbing thoughts
- Sleep problems
- Feeling emotionally detached
- Physiologically hyped
- Feelings of guilt or worthlessness
- Grief
- Helpless or feeling no control over what is happening
- Hopelessness

- Fatigue or loss of energy
- Social withdrawal
- Physical ailments (chest tightness, GI distress, pain)
- Diminished self-care
- Feeling down or depressed; sadness
- Loss of interest or pleasure in activities once enjoyed
- Changes in appetite — weight loss or gain unrelated to dieting
- Increase in purposeless physical activity (e.g., hand-wringing or pacing) or slowed movements and speech (actions observable by others)
- Recurrent thoughts of death or suicide
When to Consider Seeking Help

• You feel overwhelmed or uncertain about your ability to cope and manage your personal and/or professional responsibilities, achieve your goals, etc.

• You experience significant changes in your behavior or mood.

• You find that people close to you are expressing concerns about you or your behavior.

• You are taking uncharacteristic risks, using excessive alcohol or drugs, or feel out of control.

• You have thoughts of wanting to die, feel hopeless or trapped, find it difficult to identify reasons for living, or feel unbearable pain or a sense that you are a burden on others.
Duke Resources & Services

- Duke COVID-19 Emotional Support & Well-Being Line
  - 919-681-1631

- Duke Personal Assistance Services (PAS)
  - 919-416-1727

- Duke Department of Psychiatry & Behavioral Sciences
  - 919-684-0100 (Adult Care; 18+)
  - 919-385-3232 (Pediatric Care)

- Duke Counseling and Psychological Services (CAPS)
  - 919-660-1000 (For university students; undergraduate, graduate, professional)

- DukeReach
  - 919-681-2455
Phone-Based Crisis Support Services

- National Suicide Prevention Lifeline
  - 1-800-273-8255 (TALK)
  - [https://suicidepreventionlifeline.org/](https://suicidepreventionlifeline.org/)

- Disaster Distress Helpline/Linea de Ayuda (SAMHSA)
  - 1-800-985-5990
  - Text TalkWithUs or Hablanos to 66746 for support via text

- Hope4NC Helpline
  - 1-855-587-3463 (FIND)
Other Resources

- Reach out to a trusted friend or family member
- Contact a minister, spiritual leader or someone in your faith community
- Contact your primary care provider or other health care provider
- Seek information and resources from national organizations:
  - American Psychiatric Association (APA)
  - American Psychological Association (APA)
  - National Institute of Mental Health (NIMH)
  - National Alliance on Mental Illness (NAMI)
  - Mental Health America (MHA)
  - Substance Abuse and Mental Health Services Administration (SAMHSA)
  - National Child Traumatic Stress Network (NCTSN)
  - National Center for Posttraumatic Stress Disorder (PTSD)