

I'm Scared?

The most frequent concern of health care providers is usually the fear of infection of their family and friends and the consequences of the disease on their own health.

Additional stressors for health care workers include: isolation or quarantine; perceived mistrust or fear by others; treating ill colleagues; and fatigue.

Stressors for health care officials and scientist include trying to develop protocols and practices for dealing with an unknown disease. At the start, very little information may be available. The situation may appear very chaotic and confusing. As more information becomes available, there may be changes in directions to health care workers and to the public.

A sense of uncertainty, especially if there is a high mortality rate, and working in a constantly changing environment produces a host of stressors. No one wants to give out misinformation, but science will not initially provide all of the answers in the case of a pandemic.

So, it is absolutely to be expected that you would be scared.

What Kinds of Reactions Can Be Expected?

Fortunately most reactions will be relatively short-term and will dissipate with time. But in other cases they will continue over a considerable time.

Some reactions may dissipate over time, only to reemerge by a trigger such as an anniversary date of the event (e.g., a year later) or by sounds, smells or visual cues that remind one of the actual event.

Physical Reactions: Coping with the ongoing stress of being infected by a serious disease, or possibly infecting others, can result in a number of physical reactions: people may



have an upset stomach, feel nauseous, experience heart palpitations or excess sweating. Some may take more sick leaves and feel generally unwell. Many will experience feeling very tired or fatigued and have difficulty sleeping often due to nightmares.

Emotional Reactions: Along with a sense of fatigue, health care providers may find themselves crying, feeling anxious and a sense of helplessness.

It is very common for persons to be angry about the disease outbreak or pandemic and the climate of uncertainty that may exist. Persons may experience mood changes or mood swings, or a sense of sadness and grief. It is not unusual for health providers to have a sense of guilt, to self-blame or feel that they could have done more.

Longer term reactions can include depression, apathy, and hypervigilance (always being on edge, not able to relax). In extreme cases persons may have suicidal tendencies.

Cognitive Reactions: Health care providers often may have difficulty concentrating, feel confused and have difficulty making decisions. Memory loss is always associated with traumatic events as the parts of one's brain that accommodate short-term memory are often deactivated as the brain concentrates on survival.

Behavioural Reactions: Changes in behaviour are not uncommon as people try to cope with the impacts of coping with a serious disease. Irritability, angry outbursts, increased risk-taking, blaming and restlessness are common. It is not unusual for people to turn to drugs or alcohol as a means of coping.

Some people may withdraw from others close to them, and may throw themselves into their work. They may feel disconnected from family and friends who have not experienced

working directly with patients who have been infected, feeling they, "Don't understand."

Health care providers often feel helpless and may try to regain a sense of control over their lives by trying to control what others are doing; becoming over-protective of their family. As a result of these changes, families and spouses or partners may experience high levels of stress and breakdowns in normal functioning.



It is also difficult for many to adjust to the fear of others who are worried about being infected. Close friends and colleagues may not want to be physically close if you have been working in a health care centre which is treating patients who have been infected.

Spiritual Reactions: Dealing with the potential risk of infection from a serious disease can have a profound impact on people's spirituality. If there is a high rate of death, some people may abandon their faith, while others may turn to faith. Some may experience a loss of trust and become more cynical.

What is Helpful?

Communication is all important; the right communication, at the right time can make an important difference. Here are some key principles to follow when issuing communications during a pandemic or disease outbreak.

Promote a Sense of Safety: Remember that most health care providers are worried about infecting their families and friends and becoming infected themselves. Provide informed directions on how best to protect others and themselves. Update information as soon as new information becomes available and provide regular briefings – even if it is to say that nothing has changed.

Make sure that everyone has a “buddy” to look after their back.

Be Calm: Uncertainty is frightening and chaos and confusion often follow. Messages should be clear and delivered in a calm voice and in a quiet environment.

Provide a Sense of Self- & Community Worth: Health care providers will be working in a changing, and perhaps frightening environment to provide services to those infected with an unknown disease or serious outbreak. Messages should remind health care providers of the value and importance of their work and thank them for their efforts.

Promote Connectedness: Acknowledge that others may have irrational fears of being infected and may distance themselves. Reinforce the importance to remain connected to others. Setting up 24/7 crisis lines staffed by mental health nurses or social workers can provide support to health care providers when it is most needed.

Provide a Sense of Hope: Health care providers need to know the truth and the reality. But it is important to stress that pandemics and disease outbreaks do have an end, that most people survive, and people are working to find solutions.

What Can I Do?

Based on studies of health care providers the following are simple, but helpful support strategies when coping with a pandemic:

- Find out as much as possible, from a reliable source, about the disease.
- Practice daily positive thinking.
- Appreciate each other’s kind thoughts, good deeds and special talents.
- Invite other health care providers to share meals or quiet time with you.
- Share concerns and issues with reliable and trustworthy staff.
- Stay connected with family and friends, even if only by phone, e-mail, or social media.

Psychosocial Considerations for Health Care Providers when Responding to a Pandemic

This information is general in nature; always check with doctors or trained professional to answer specific questions.



“I was not prepared for what I saw...or did”

What is a Pandemic?

The World Health Organization describes a pandemic as a worldwide spread of a new disease. COVID-19, a coronavirus, was declared a pandemic by the World Health Organization (WHO) on March 11 2020. “This is not just a public health crisis, it is a crisis that will touch every sector,” said Dr. Tedros Adhanom Ghebreyesus, WHO director-general.

It is important to stay current and to listen to the regular briefings from the Provincial Health Officer and Centres for Disease Control. It is equally important to avoid accessing social media sites which carry inaccurate information.

Who is Affected?

Everyone will be affected to one degree or another. There are the patients themselves and their families and friends, the worried well (some who may be in quarantine or isolation), first responders such as paramedics or police, government officials and, of course, health care providers.

Health care providers may include laboratory staff; nurses, doctors, practical nurses, public health personnel, and health support staff including receptionists, cleaning staff and hospital volunteers.