

# Mental Health Care for Health Workers: Stress Management

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# Outline of presentation

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- Health, mental health and stress
- Causes of stress among health care workers
- Work related Stress
- Impact of stress among health care workers
- Managing and coping with stress

# W.H.O.'s definition of Health and Mental health



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**Health** is defined as “a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.”

**Mental health** is defined as “a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community.”

*There is no health without mental health*

# Intrinsic and instrumental value of MH

## CONNECT

- Have positive relationships
- Contribute to communities
- Get a sense of belonging
- Empathize with others

## FUNCTION

- Apply cognitive skills
- Gain an education
- Earn a living
- Make healthy choices
- Learn new skills

## COPE

- Deal with stress
- Adapt to change
- Adopt new ideas
- Make complex choices
- Understand and manage emotions

## THRIVE

- Realize our own abilities
- Feel good and find purpose in life
- Think about our well-being and that of others

# Measuring stress (PSS-4) Cohen et al (1983).

	Never (0) (4)	Almost never (1), (3)	Somet imes (2) (2)	Fairy often( 3) (1)	Very ofte n(4) (0)	
1. In the last month, how often have you felt that you were unable to control the important things in your life?			2			
2. In the last month, how often have you felt confident about your ability to handle your personal problems?			2			
3. In the last month, how often have you felt that things were going your way?		3				
4. In the last month, how often have you felt difficulties were piling up so high that you could not overcome them?			1			
TOTAL SCORE					8	



# What is Stress?

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- *"Everyone knows what stress is, but nobody really knows." (Hans Selye)*
- Stress is the psychological, physiological and behavioural response by an individual when they perceive a lack of equilibrium between the demands placed upon them and their ability to meet those demands, which, over a period of time, leads to ill-health. S. Palmer (1989).

# Stress

- Stress is worry or mental tension caused by a difficult situation.
- Demands Vs Resources
- Pressure Vs Ability to cope



# Stress

## Stressful events

- Daily hassles
- Minor threats such as arguments and uncertainty about the future
- Major life events
- Traumatic events

## Types of stress

### Positive stress/Eustress

- Healthy
- Motivates
- Ensures speed
- May enhance decision making and creativity

### Negative stress/Distress

- Acute stress or episodic stress
- Chronic stress or toxic stress





# The Stress Response

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## The Mammalian Stress Mechanism

- The entire nervous system
- Blood enzyme factors VII, VIII, IX and X liver.
- The vascular endothelium,
- “Tissue factor” that is produced by cells in extravascular tissues
- Alarm/Adaptation/Exhaustion response

# Effects of stress

## Threat

- Individual
  - Health
  - Wellbeing/quality of life
  - Functioning/goal achievement
  - Self-esteem/confidence
- Workplace/organisation

## Stress may affect our:

- Emotions/Feelings
- Thinking
- Behaviour
- Bodily changes

# Physical effects stress

## Bodily effects (WHO 2020)



### Acute effects

### Long term effects

- High blood pressure (hypertension)
- Uncontrolled blood sugar
- Obesity
- Asthma
- Stomach ulcers
- Eczema and other skin disorders
- Migraine
- Chronic back pain



# Effects of stress

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## ■ Thinking

- Difficulty in concentration & making decisions, forgetfulness, sensitivity to criticism, poor judgement, anxious or racing thoughts
- Cognitive distortions

## Emotional

- Anger, irritability, anxiety, depression or sadness, shame, guilt, envy..



# Behavioral effects

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- Constant fidgeting and tiredness
- Eating changes
- Sleep changes
- Drinking and smoking
- Avoidance of particular situation
- Withdrawal from others
- Inactivity and neglecting responsibilities

# Mental health problems and stress

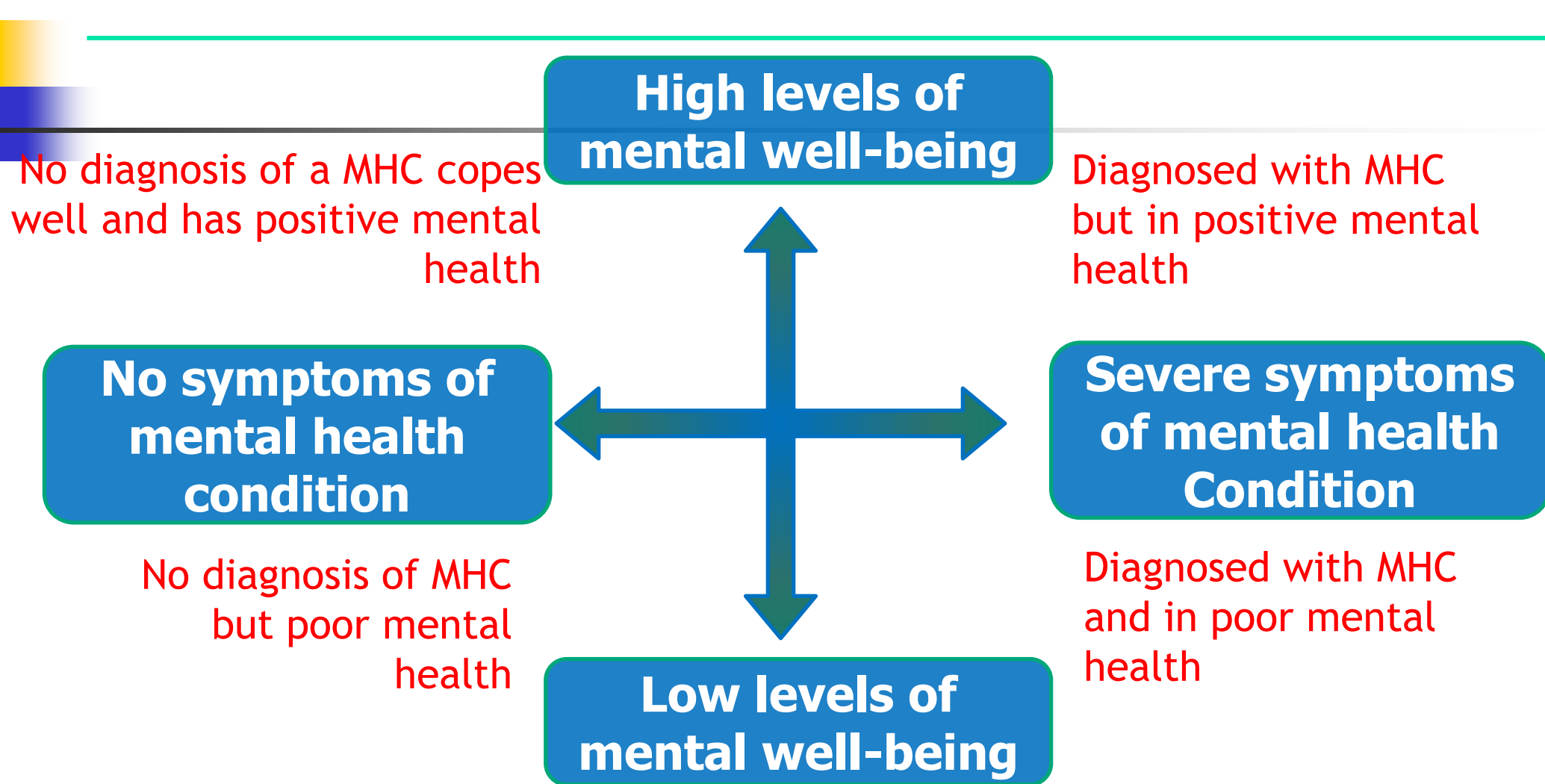
## Mental health

- Refers to “a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community.”
- Mental health is about how we **cope, connect, functioning and thriving**

## Mental illness

- Refers to a wide range of conditions that affect the way we **think** (thoughts), the way we **feel** (mood) and the **way we behave** (actions) that causes disturbance observable by others.

# Mental Health/Well-being Vs Mental illness/disorders



# Why bother mental health of health workers

- Mental health is a public health concern.
- Mental health concerns are often unrecognized and unacknowledged.
- Mental health is associated with a stigma thus leading to poor access to care.
- Access to mental health care has benefits
  - reduced absenteeism,
  - reduced turnover intention,
  - increased productivity,
  - decreased non-psychiatric medical costs with positive effects to the employer.
- Employees with depression can decrease the morale of their colleagues, suggesting the benefits of taking swift action to support staff with mental health challenges (Putnam, McKibbin, & Wachs, 200)





# Work Related Stress

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- General work related stress
- Work stress given special conditions
- Physician related



# General work related stress

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- Shortage of health workers, heavy work load, high patient over load, working overtime, role conflicts and unrealistic work demands for high-quality work.
- Personal threats, such as penalty or disciplinary actions which may result in efforts to cover up any medical errors leading to further stress
- Institutional culture including leadership styles, relationships with colleagues and leaders,
- Bureaucratic systems and strive for personal power which may engender a “survival of the fittest” culture:



# General work related stress

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- Communication problems within the organization and lack of an effective voice in decisions that affect them and their work
- Inadequate support, supervision and recognition of their work
- Lack of autonomy and responsibility
- Inadequate training, skills preparation for the work and lack of clarity in roles
- Inadequate resources such as medication and health care materials and referral arrangements
- **Institutional**



# Reflection?

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- BHF/Health workers
  - Politicians, Lawyers, Religious leaders
  - Administrators/Managers
  - Various cadres, nurses, doctors, pharmacists, Allied Health Professionals, Students
  - Different levels
  - Academicians, Researchers, Clinicians
  - Different specialities



# Other factors

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## ■ Decision making

- Need to make complex and complicated decisions
- Serious, potentially fatal consequences of a wrong decision
- Receiving contradictory information resulting into conflicts/uncertainty
- Constant evaluation

## ■ Work environment

- Frequency of incoming signals related to patient load and setting
- Possibility to postpone decisions
- Need for rapid task execution
- Strictness on the decision making
- External time pressure on the output level



# Other factors

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- Cognitively aversive –
  - Disastrous consequences such as patient suicide
  - Malpractice litigation and Council investigations
- Conflict dimension
  - Cooperation with staff
  - Colleagues and support in the display of knowledge and career advancement.
  - Decisions about fitness for work for others and making informed recommendations.
  - Care for people who are known to you



# Other factors

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- Daily routine such as sleep/eating and rest are affected
- Daily exposure to suffering/pain and death
- Unconventional means of access to care, self diagnose, self treat and self-prescribe
- Stigma, fear of confidentiality, mental illness on records, taught to be tough
- Shanafelt described the “physician personality.” as perfectionism, hard workers, demand a lot of themselves. difficulty relaxing or allocating time for themselves, and exaggerated sense of responsibility to patients bordering to martyrdom.



# Expectations

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*"A good doctor is also one who is attentive, analytical, brave, calm, cooperative, creative, decisive, energetic, ethical, friendly, gracious, humorous, investigative, knowledgeable, mature, nurturing, observant, passionate, responsible, reassuring, selfless, skillful, trustworthy, vigilant, and wise"*

- Family, social, economic expectations
- Human being with social, physical., emotional and spiritual needs
- “*The perception from the societal view is not matching reality,*”
- Health workers can suffer from severe mental illness.





# Common mental disorders

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- Adjustment disorders with anxiety, depressive symptoms, conduct problems or mixed symptoms
- Anxiety disorders
- Obsessive compulsive and related disorders
- Depressive disorders
- Stress based trauma (Acute stress and post traumatic stress disorders)
- Sleep disorders
- Alcohol and substance use disorders
- Self harm, suicide and homicide
- Child abuse and domestic violence
- Exacerbation of existing mental illness such as depression, anxiety, bipolar disorders and schizophrenia

# Common mental disorders among Health workers in COVID-19 response

- Li et al. 2020 found that half of the responders identified at least **mild depression** and one-third reported **insomnia** whereas 14% of physicians and nearly 16% of nurses described moderate or severe depressive symptom.
- Li et al 2020 found significant differences in **vicarious traumatization** between frontline nurses and non frontline nurses in China
- Li et al 2021 in a review of 65 studies involving Healthcare workers found a pooled prevalence of 21.7% for **depression**, 22.1% for **anxiety disorders** and 21.5% of **PTSD**
- Shah et al found rates of **depression, anxiety, insomnia, distress and burnout** in 53.6%, 44.3%, 41.1%, 31.0% and 45.8% among HCWs in Kenya respectively.
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# Severe mental illness

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- Schizophrenia and other related disorders
- Bipolar and related disorders
- Depressive disorders
- Alcohol and substance related disorders
- Dementia

(Look out for Atim et al 2023)



# Impact of Work related stress

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- Impact on the individual
- Impact on family and social life
- Impact on the quality of care



# Work related stress

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- Professional quality of life (ProQOL) is the quality one feels in relation to his or her work as a helper.
- Positive and negative aspects of doing one's job influence one's professional quality of life.
- Professional Quality of life
  - Compassion Satisfaction
  - Compassion fatigue
    - Burnout
    - Secondary Traumatic Stress



# Work related stress

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## Compassion Satisfaction

Is when one is doing their job well, when they are satisfied with their relationships with co-workers or when feeling that their work has social value

## Compassion Fatigue:

- Emotional exhaustion, depersonalisation and lack of personal fulfilment at work as a result of continuous exposure to occupational stressors when helpers are unable to refuel or regenerate.

# Signs and symptoms of compassion fatigue



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- Neglect of self-care
- Struggling with images and stories that can't be forgotten
- Exhaustion
- Disrupted sleep,
- Anxiety
- Headaches
- Stomach upset
- Irritability
- Numbness
- Decreased sense of purpose
- Emotional disconnection
- Self-contempt
- Difficulties with personal relationships

# Work related mental health effects

## Vicarious traumatisatisation

- is the profound shift in world view that occurs in helping professionals when they work with individuals who have experienced trauma.
- Sympathy for survivors of trauma exceeds the normal response and leads to psychological symptoms

## Secondary traumatic stress

- Psychological distress a person can experience as a result of exposure to information about primary trauma suffered by another person.
- **Characterised by**
  - Intrusion
    - Unwanted memories, flashbacks and night mares
  - Avoidance of reminders of trauma
  - Arousal symptoms
    - hypervigilance





# Occupational burnout

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- Syndrome of physical and emotional exhaustion, depersonalization, cynicism, detachment and reduced personal accomplishment that can occur among individuals as a result of long-term involvement in demanding situations
- Its more linked to the working environment where there is low job satisfaction, one feels powerless or feels overwhelmed at work.
- It is chronic work place stress that tends to go unnoticed or hasn't been successfully managed
- Does not mean our world view has been damaged or that there is loss of ability to feel compassion for others
- The difference between stress and burnout is a matter of degree.



# Moral Distress/Moral Injury

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- Moral distress" was first coined by the nurse-philosopher Andrew Jameton (1984) and was defined as the negative experience "when one knows the right thing to do, but institutional constraints make it nearly impossible to pursue the right course of action"
- There is perceived violation of one's own professional integrity and obligations and the concurrent feeling of being constrained from taking the ethically appropriate action.
- Moral injury first described in veterans as present when (i) there has been a betrayal of what is morally right, (ii) by someone who holds the legitimate authority and (iii) in a high-stakes situation(Shay 1990).



# Moral Injury

( Čartolovn et al 2021)

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- “Moral injury among health professionals results from the challenge of simultaneously knowing what care patients need but being unable to provide it due to constraints that are beyond our control”.
- Manifests as severe distress and functional impairments known as ‘moral injuries with wide range of biological, psychological/behavioural, social and religious/spiritual sequelae,
- Potentially morally injurious events(PMIEs) are defined as ‘perpetrating, failing to prevent, or bearing witness to acts that transgress deeply held moral beliefs and expectations’, which may leave long-lasting emotionally, psychologically, behaviourally and spiritually harmful impacts.
- Comes from need to fulfil their non-negotiable moral and professional principle ‘first do no harm



# Impact on the family

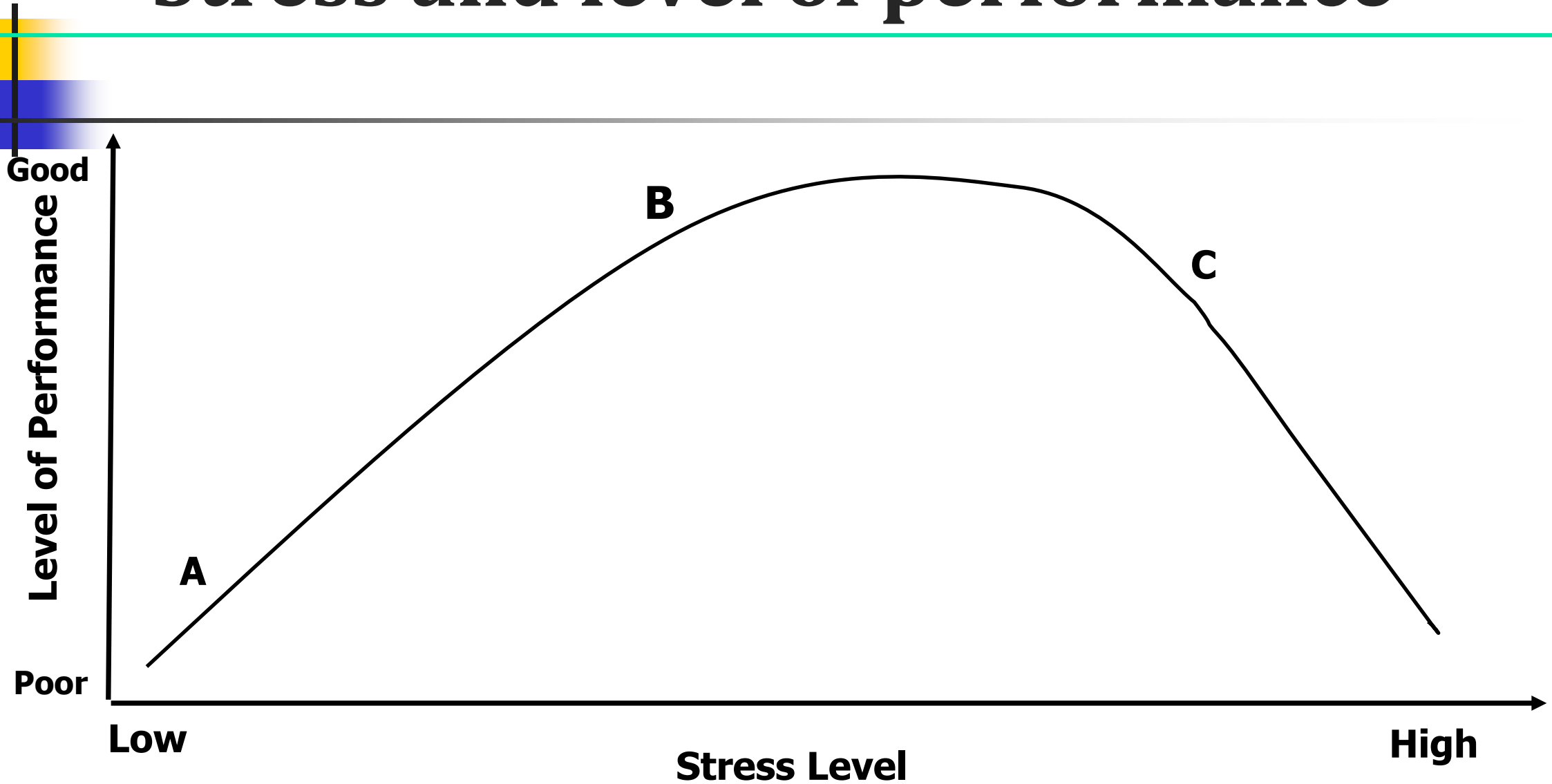
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- Family life may be affected by the busy work, emotional experiences, and negative experiences at work.
- Limited social networking for the HCPs.
- Less time to family leading to family quarrels and estranged relationships
- Release of negative emotions to spouse and children

# Impact of stress on work and performance

- Loss of interest and commitment to work
- Loss of quality in performance
  - High rates of misjudgments and accidents
  - Increased adverse effects
  - Breach of protocols and guidelines
  - Increased risk of infections
  - Compromised quality and safety of care
- Loss of punctuality, absenteeism, neglect of duty and reduced productivity
- Poor work relations/interpersonal skills
- High labor turnover rates
- Job and career dissatisfaction
- Other health related effects including hypothalamus-pituitary-adrenal axis dysregulation and inflammatory responses, physical and mental illness

# Stress and level of performance





# Stress management

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- Primary or preventive approach
  - To reduce work related stress
- Secondary or ameliorative approach
  - To alter how people cope with stressful conditions
- Tertiary or reactive approach
  - To treat stressed workers

Here is a list of situations that you might encounter and that might cause you stress. For each situation, please first decide whether the situation currently applies to you. If so, then please indicate how much of a problem the situation is for you by making an "X" on the five point scale "only a slight problem" to "a very big problem". If not, then make an "X" under "Does not apply to me".

1. I spend too much time with office work
2. We do not have enough single rooms for mortally ill patients
3. Some patients cling to me very strong
4. It happens that patients confront me reproachfully because the therapy shows no success
5. It happens that several patients lie dying at the same time
6. Sometimes I have to deal with aggressive patients
7. There are patients, who want to check everything I'm doing
8. I have patients, who personally doesn't contribute enough to their therapy
9. Sometimes I ask myself, if there is a benefit of my work
10. An unpleasant aspect of my work is the nightshift
11. Some relatives think that we are not able to provide optimal medical care for patients
12. The telephone is ringing permanently at our office
13. I see sometimes that my colleagues treat critically ill patients without empathy
14. I can not make autonomous decisions
15. I receive too little acknowledgement from my superiors
16. I have trouble/friction with colleagues
17. The sight of weeping patients make me sad
18. Some patients receive too little support from their relatives
19. I experience the progress of disease over a long period of time at some Patients
20. I have to do with patients expressing unrealistic treatment hopes
21. Sometimes I have to think of the children of incurable patients





# Stress Management

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- Institutional
- Individual measures/Self Care



# Self care

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- Physical Care
  - Social care
  - Mental care
    - Cognition/Thinking
    - Emotions/Feelings
    - Behaviors/Action
  - Spiritual care
- Calming methods
  - Problem Focused
  - Emotion focused



# Physical care

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- Diet/Nutrition
- Adequate sleep
- Exercise
- Rest/Hobbies/Nature/Warm baths
  - *"Illnesses do not come upon us out of the blue. They are developed from small daily sins against nature. When enough sins have accumulated, illnesses will suddenly appear." – Hippocrates*
- Medical check up and medication



# Calming methods

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- Breathing exercises
- Meditation
- Mindfulness
- Grounding/unhooking



# Problem Focused

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## Interpersonal and leadership skills

- Goal setting
- Time management
  - Daily routine and Schedule/Urgent/Important/Reduce Screen time
  - Delegate
  - Perfectionism
  - Procrastination
  - Say No
- Decision making
  - Daily routines
- Communication skills and setting boundaries
  - Be assertive
  - Setting boundaries
    - Be brief
    - Be respectful
    - Be steadfast and consistent
- Conflict resolution
- Problem solving techniques



# Dealing with negative thoughts

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- Reconcile with negative thoughts

- Talk to a trusted friend or family
- Meditation
- Practice breathing and visualization exercises.
- Speak to a therapist

- Shifting perspective/  
rational/positive/challenge

- As an outsider looker or giving advise to friend
- Options available
- Potential alternative scenarios
- Evidence to support your thoughts
- Explore worst case scenario, Learn to cope or co-operate with the inevitable

Express gratitude for Positive aspects of your situation

# Gratitude and mental health

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## GRATITUDE AND MENTAL HEALTH: A REVIEW

□ Gaurav Sharma\*  
Taruna\*\*

### ABSTRACT

*Through centuries, philosophers, writers, theologians deemed gratitude an essential quality for a well lived life. Adam Smith proposed that "Gratitude is a vital civic virtue, absolutely essential for the healthy functioning of societies" (Smith,1976). Contemporary psychologists treat gratitude as a moral virtue involving diverse social, moral & cognitive processes entailing the capacity to consider other's way of thinking and to autonomously wish to reciprocate (McConnell, 2014; McCullough, Kimeldorf, Cohen, 2008; Tudge, Frietas, & O'Brien,2015). Positive Psychology (Seligman & Csikszentmihalyi, 2000) pointed psychologists towards human strength and virtues inclusive of gratitude. The present review made an attempt to review the role and importance of gratitude in enhancing mental health of individuals. The present review provides the insight that gratitude helps to alleviate most of the prevalent mental health problems by actively increasing positive affect and overall perception of life. The present review and an increasing evidence base suggest that the gratitude be cultivated and nurtured among the individual's right from the early ages of life.*

**Keywords:** Gratitude, Mental Health



# Emotion focused

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- Deal with negative emotions
  - Talk to a friend or family member
  - Focus on gratitude
  - Journaling
  - Laughter
  - Face your problems
  - Day tight compartments





# Social Network

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- Variety
- Be creative: Class, gym, clubs, Foundations, Online
- Maintain
  - Appreciate
  - Give time
  - Be a good friend

<https://www.stress.org/how-to-deal-with-stress>



# Spiritual care

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## ■ Provides

- Sense of purpose and meaning
- Identifies value
- Connections
- Relinquishing control
- Support
- Health

## ■ Activated by

- Prayer or meditation.
- Journaling
- Positive affirmations/scripture
- Spiritual friend, advisor or mentor.
- Nurturing your relationships with others and community e.g volunteering, random acts of kindness



# What to avoid?

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- Drinking and substance use
- Spending too much time online
- Compulsive shopping,
- Overeating,
- Self-medicating

<https://www.stress.org/how-to-deal-with-stress>

# When to seek for help?

*Is seeking for help a  
sign of strength or  
weakness?*



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## And lastly

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- Hosea 4: 6 “My people are destroyed for lack of knowledge....”
- John 13:17 “If you know these things, you will be blessed if you do them”



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*Mwebale inho,  
mwebale inho!*