### Welcome! We will begin shortly

**Audio**: To choose your audio connection, click on the audio icon at the bottom of the screen

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### Supporting the Mental Health and Treatment Needs of Individuals Experiencing Homelessness During COVID-19

March 25, 2021 3:30-5:00pm ET



### Disclaimer

The **Homeless and Housing Resource Center** is a program operated by Policy Research, Inc. and developed under grant 1H79SM083003-01 from the Substance Abuse and Mental Health Services Administration (SAMHSA), U.S. Department of Health and Human Services (HHS). Interviews, policies, and opinions expressed are those of the authors and do not necessarily reflect those of SAMHSA or HHS.





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  - Kip Opperman
  - Jennifer Giroux
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  - Subtitles can be moved within the window and re-sized
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### **Webinar Instructions**

- All participant lines will be muted
- A recording will be available on the HHRC website
- Download webinar documents: <a href="https://hhrctraining.org/">https://hhrctraining.org/</a>
- Questions: Please submit your questions using the Q&A feature
- Evaluation browser will redirect following the webinar
- Certificate of Participation (no CEUs are offered)



# Learning Objectives



- Describe the impact of the COVID-19 pandemic on the behavioral health needs of individuals experiencing or at imminent risk of homelessness.
- Identify equitable and culturally appropriate service delivery practices for persons experiencing homelessness and individuals in non-congregate shelters during COVID-19.
- Recognize emotional and physical signs of stress associated with being an essential worker and increase the knowledge of and engagement in self-care activities.



### Presenters

- Kevin James, Project Associate, SAMHSA HHRC
- Dave Iverson, MD, Director of Psychiatry, Colorado Coalition for the Homeless, Denver, Colorado
- Eowyn Rieke, MD, MPH, Blackburn Medical Director, Central City Concern, Portland, Oregon
- Walter Bailey, Peer Counselor at the Imani Center, Central City Concern, Portland, Oregon
- Laura Leone, DSW, MSSW, LMSW, Integrated Health Consultant, National Council for Behavioral Health





# **Introductory Poll Question**

Getting to know our participants







### Where We've Been

- COVID-19
- Racial Injustice
- Natural Disasters
  - Active hurricane season
  - Wildfires
  - Winter storms
- Shared Grief



# What We Know: Adverse Behavioral Health Effects due to COVID-19



- COVID-19 is exacerbating adverse mental health symptoms
  - Increase in symptoms of depression and anxiety disorders
- COVID-19 is disproportionately impacting the mental health of communities of color, young adults, and youth
  - Increase in suicidal ideation among young adults, persons of color, unpaid caregivers, and essential workers
  - Youth mental health is worsening and is the highest among those who identify as multi-racial and LGBTQ+
- COVID-19 has increased the number of persons who have started or increased their substance use



### Stay Encouraged!



#### • Learn from what we've endured:

- Expand access to care through telehealth and other treatment modalities
- Unify and encourage other members of our communities
- Strive to be culturally and linguistically competent to tailor services for all ethnic and cultural groups
- Be an ally for Black, Indigenous, and people of color, persons with a behavioral health condition and other participants we serve





"The time is always ripe to do right" – Dr. Martin Luther King Jr.







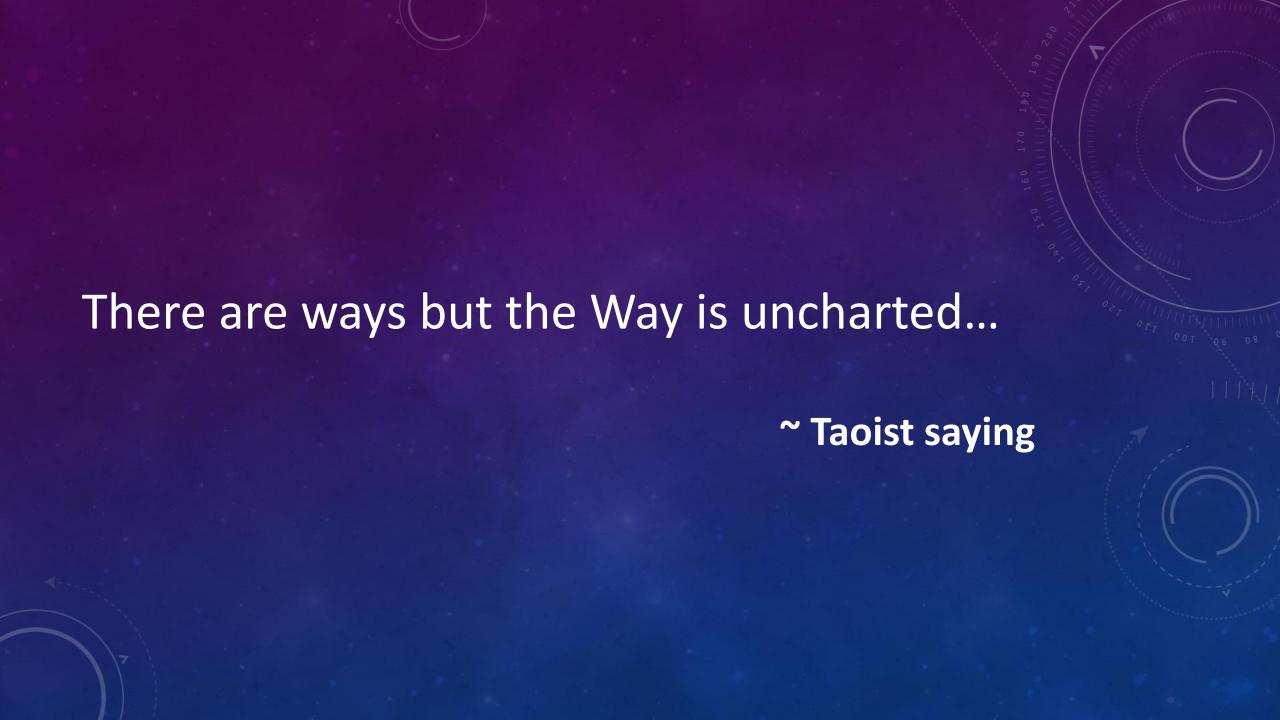
"The best way out is always through."

~ Robert Frost



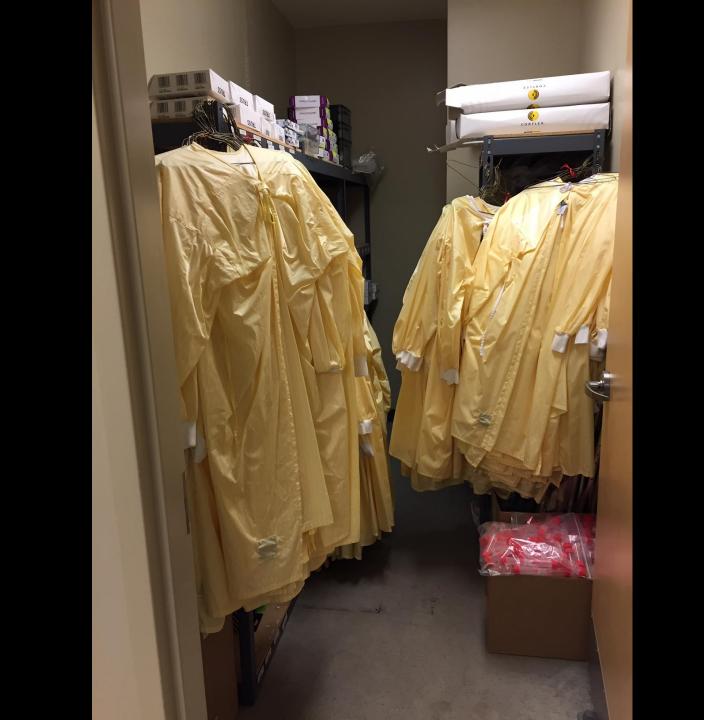














### ORGANIZING... INCIDENT COMMAND STRUCTURE

- Branch Directors (MH, Medical, Logistics, etc.)
- Set Priorities
- Safety for clients; safety for staff members
- Legalities, ethics
- Daily Check in, Check out meetings
- Communications
- On call coverage; staff expansion

- BH in "supporting role"
- "More people died of not-Ebola than Ebola"
- Stretch out Rx's safely
- Explore the acute changes to the BH system
- Be flexible, ready for anything
- Care for, support, our colleagues
- Self-care







### COMMUNITY PARTNERS

- Denver Health and Hospitals
- Denver Rescue Mission
- Salvation Army
- Army National Guard
- Mayor's Office, City Council
- CO Dept Public Health and Environment
- DDPHE

- The Gathering Place
- St. Francis Day Shelter
- Catholic Charities
- Denver Joint Task Force
- Denver Road Home
- Denver HOST
- National Coalition for the Homeless











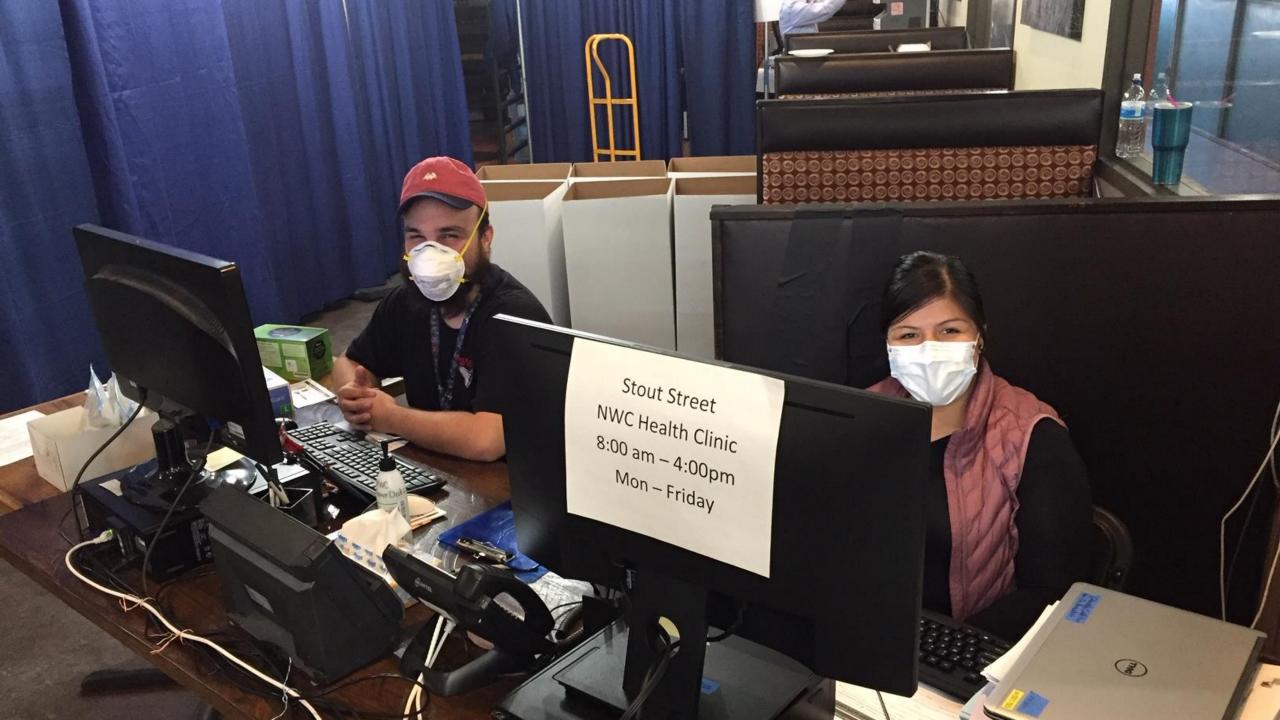














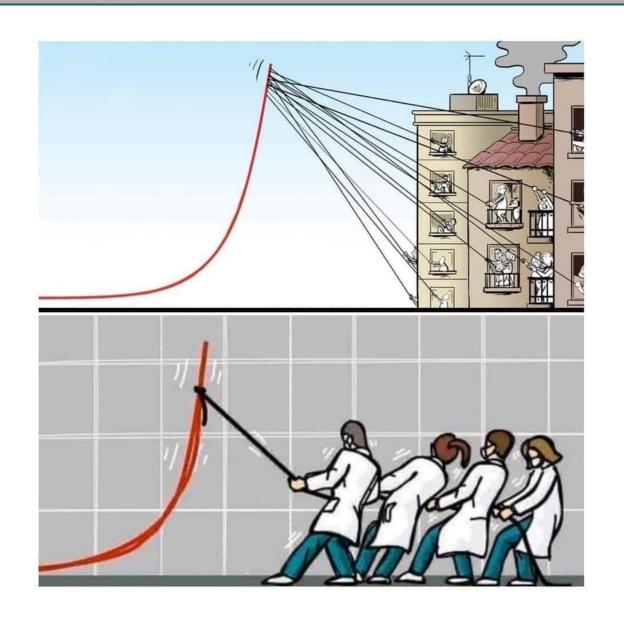












# NUMBERS

### CCH, general:

- 18,000 people served annually, CCH
- 3,200 housing units managed
- 4,000 homeless each night in Denver
- Stout Street Health Center 13, 000 served, annually

### COVID-19:

- National Western Complex 700 beds
- Denver Coliseum 300 beds
- Seven COVID Hotels:
- 80 155 beds Activated Respite (AR)
- Length of stay at AR average 9 days
- 664 beds Protective Action



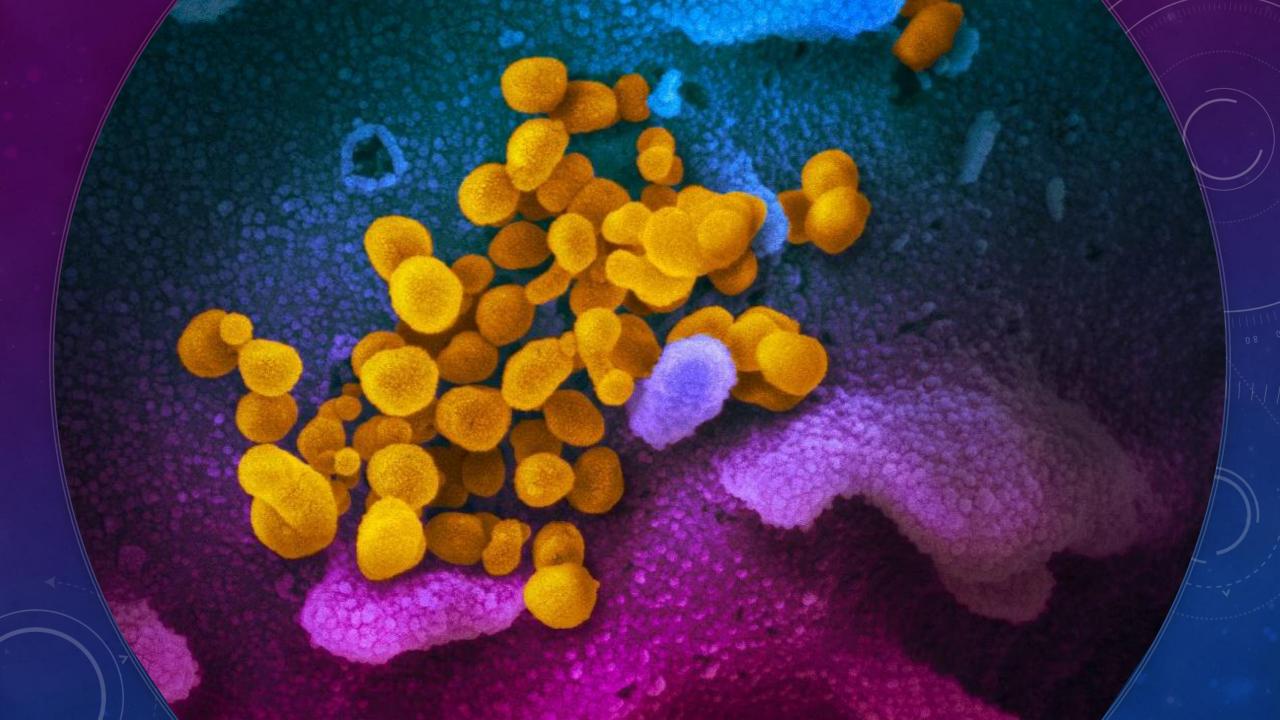


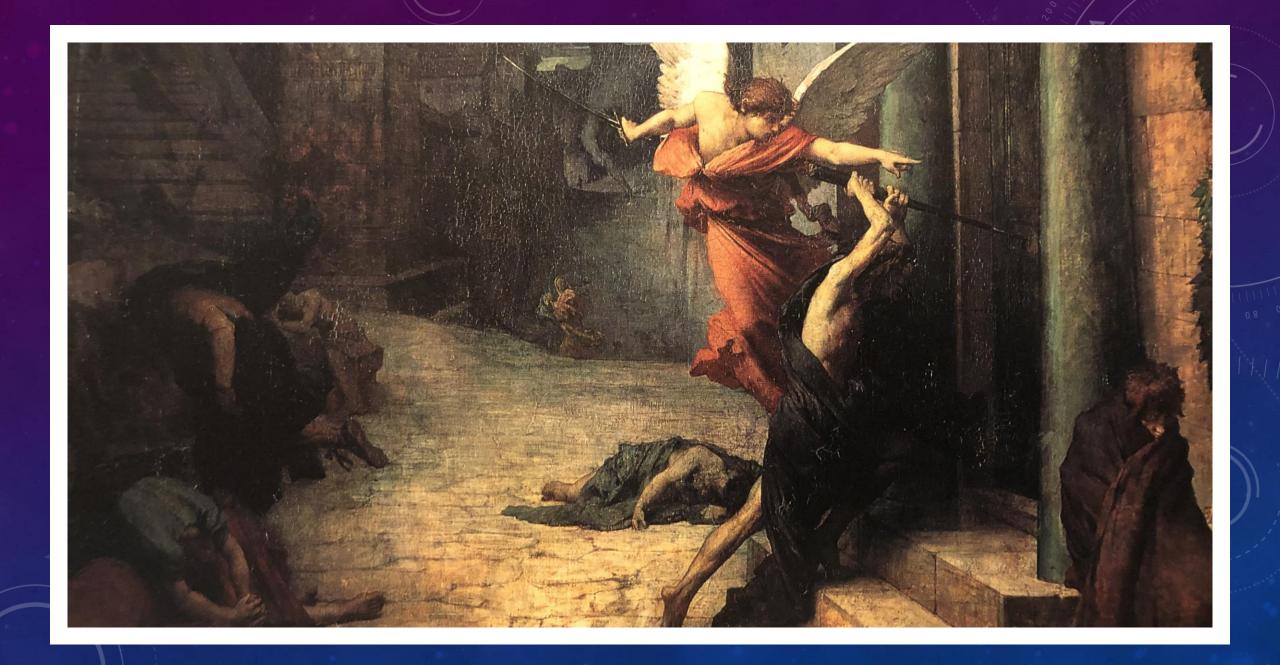
# RESILIENCE

- Face your fears
- Stay optimistic, but realistic
- Make use of supports
- Seek out role models
- Inner moral compass
- Practice spirituality in some form

- Seek meaning
- Accept what cannot be changed
- Stay physically, emotionally and cognitively fit
- Seek growth in adversity

(Southwick and Charney)





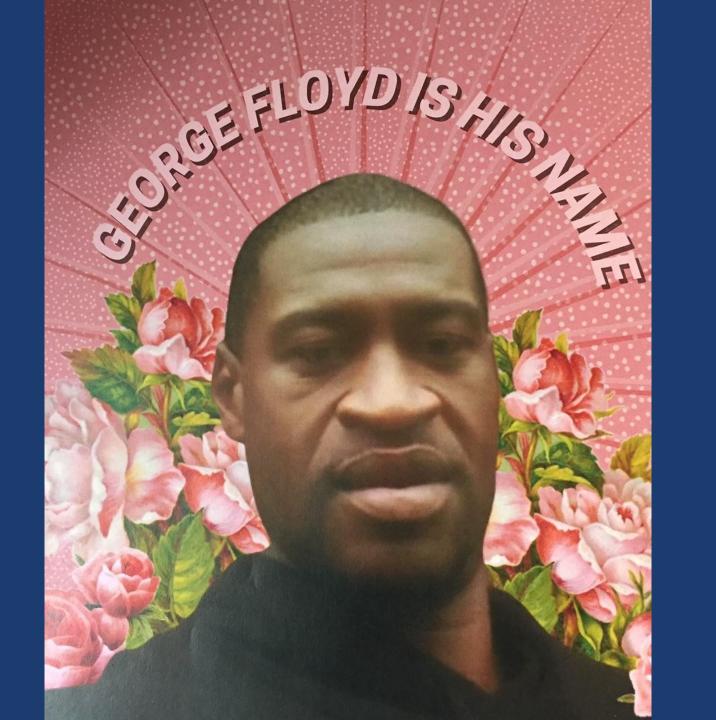


















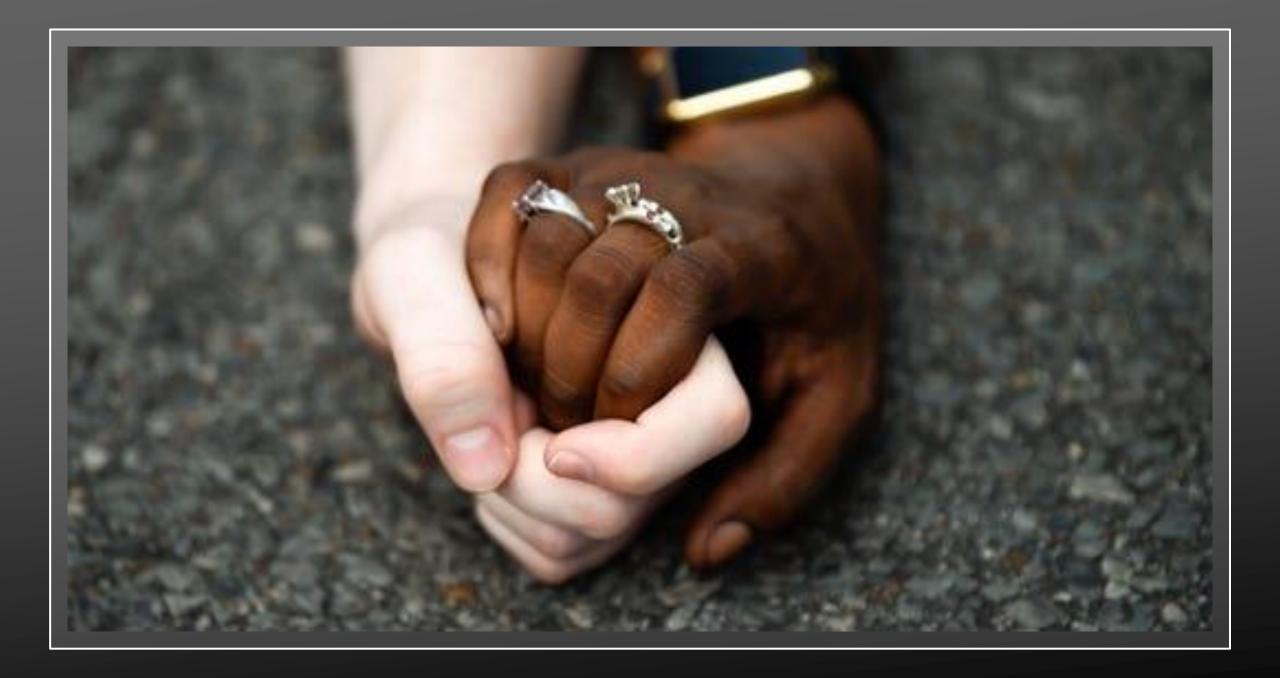


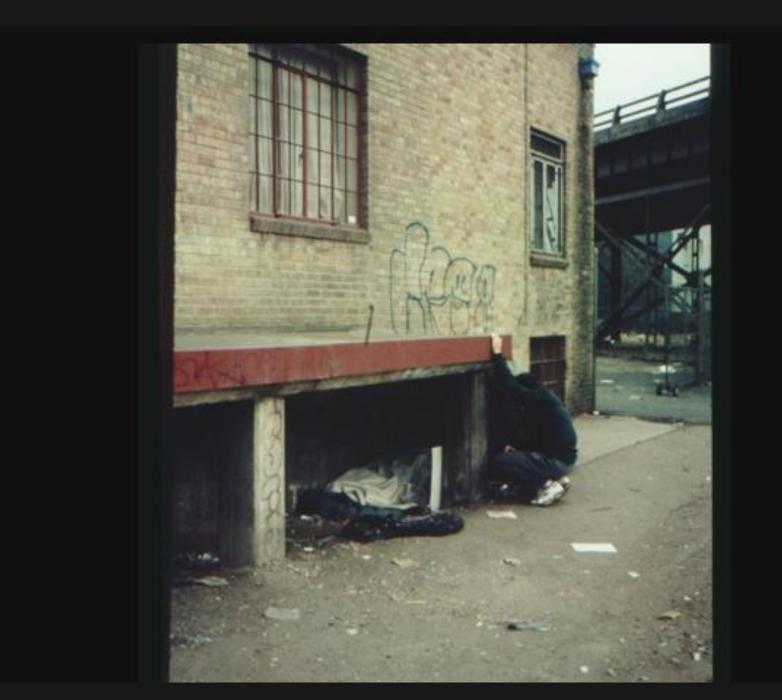
















# TELEHEALTH

#### **PLUSSES:**

- Allowed older employees and those with at-risk conditions to continue to serve
- Kept census at the Health Center down
- Lowered no-show rate
- More flexibility in connecting for both client and provider
- Improved, enhanced disclosures? Less inhibition, guardedness?

#### **MINUSSES:**

- Isolating
- New clients

   no 'eyes on'
- Crisis intervention
- Mental status exam, AIMS testing, etc.
- No groups













IN THE END ...and is going to be if it's not ok of THE END John Lennon



# Eowyn Rieke, MD, MPH

Blackburn Medical Director Central City Concern, Portland, Oregon

# **Walter Bailey**

Peer Counselor at the Imani Center Central City Concern, Portland, Oregon



# **Imani Center**









# Engagement



# Technology



# **Staff Support**



# **Unexpected Benefits**

# Wellness and Resilience for those who Support Individuals Experiencing Homelessness



#### The Role of Wellness and Resilience at Work

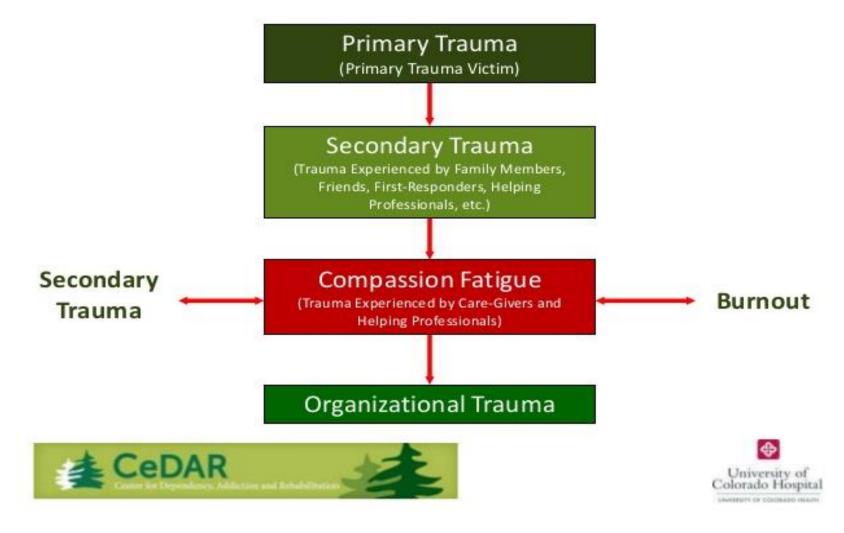


<u>This Photo</u> by Unknown Author is licensed under <u>CC BY-SA-NC</u>





#### Continuum of Traumatic Stress





## Prevalence in the Field

#### TRAUMATIC STRESS

Among 472 homeless service providers, 33% had PTSD symptoms (Schiff & Lane, 2019)

#### **COMPASSION FATIGUE**

Among 234 homeless service providers, 23% suffered from compassion fatigue, and decreased quality of life (Schiff & Lane, 2016)

#### SECONDARY TRAUMATIC STRESS

Among 122 homeless service providers, nearly half met criteria for moderate or Severe STS (Petrovich, Twis & Evans, 2020)

#### BURNOUT

Among 259 service homeless service providers, 31% scored in high range for burnout (Smith, 2019)

- PTSD Symptoms, Vicarious Traumatization, and Burnout in Front Line Workers in the Homeless Sector (Schiff & Lane, 2019)
- Practice with people experiencing homelessness: an analysis of secondary traumatic stress in the workplace (Petrovich, Twis & Evans, 2020)
- Burnout and PTSD in Workers in the Homelessness Sector in Edmonton (Schiff & Lane, 2016)
- Compassion Fatigue, Coping and Turnover Among Homeless Service Providers (Smith, 2019)





## **Secondary Traumatic Stress**

- Physical and emotional stress responses to working with a highly traumatized population
- Symptoms mimic Post-Traumatic Stress Disorder
- Risk factors include:
  - –Exposure
  - –Empathy
  - Past trauma history and extent of resolution

Figley, C. R. 1995



## **Compassion Fatigue**

"State of tension and preoccupation with traumatized patients by reexperiencing the traumatic events, avoidance/numbing of reminders and persistent arousal associated with the patient"



Figley, C., 2002



## **Burnout – The Exhaustion Cycle**

- A syndrome of emotional exhaustion, depersonalization, and a reduced sense of personal accomplishment
- Develops as a result of general occupational stress; the term is not used to describe the effects of indirect trauma exposure specifically

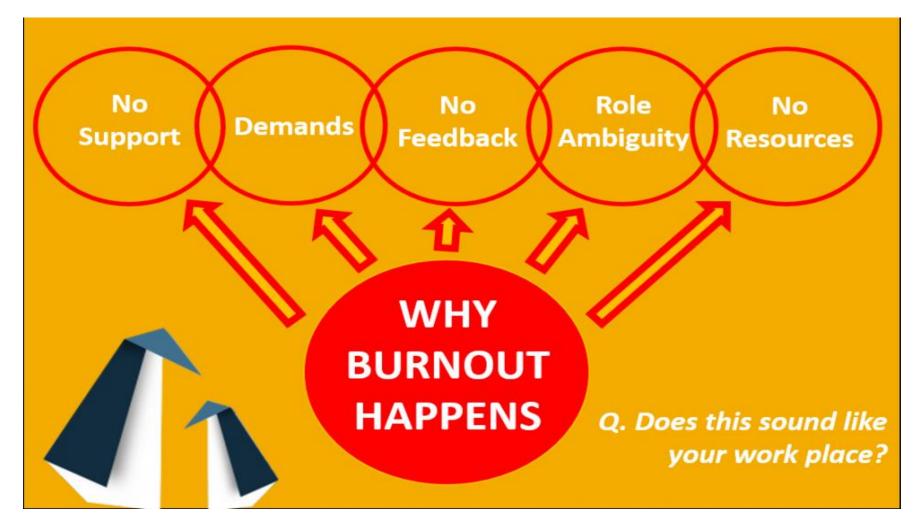
#### THE EXHAUSTION CYCLE



Source: National Child Traumatic Stress Network, Secondary Traumatic Stress Committee. (2011).



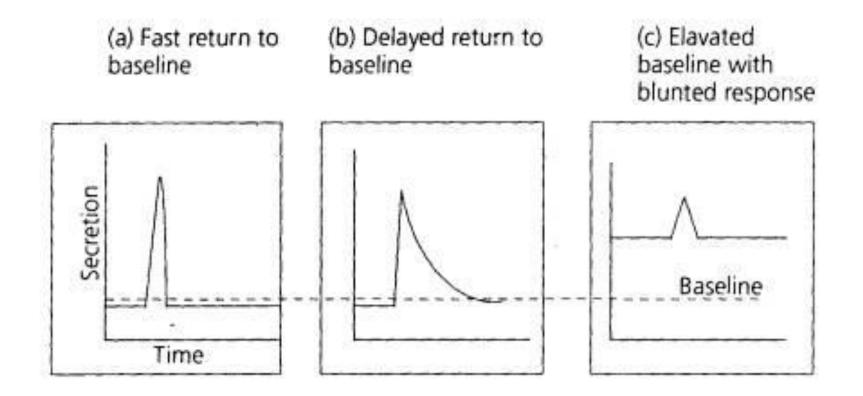




Source: http://blog.imonomy.com/prevent-employee-burnout-company-grows/



# **Stress Response**





#### **Reduce Stress**

- Causes:
  - Individual and Collective
- Effects:
  - Chronic adrenaline and cortisol
  - Higher blood pressure
  - Seems to impact insulin effectiveness
  - Psychological



## What We Bring to the Work

- Often have their own traumatic histories
- Seek to avoid re-experiencing their own emotions
- Respond personally to others' emotional states
- Perceive behavior as personal threat or provocation



## **Warning Signs**

- Thinking the worst in every situation
- Reacting disproportionately
- Never taking a vacation
- Forgetting why you do your job
- Decreased performance at work
- Constantly not getting enough sleep
- Increased arguments with your family
- Decreased social life



# Replace the Negative Culture with a Compassionate Culture for All

Staff

- Build Staff Relationships
- Teach Skills (e.g. de-escalation)
- Support

Clients

Consumers

Families

- Build Relationships
- Teach Skills (exec. function)
- Support



# **Compassion Resilience**

The ability to maintain our physical, emotional and mental well-being while responding compassionately to people who are suffering

# **Compassion Satisfaction**

The ability to experience pleasure from doing the work



# **Building Compassion Resilience**

#### **Expectations**

- Realistic ones for yourself
- Realistic ones for others

# **Boundary Setting**

Know what you want/can say 'yes' to

#### **Staff Culture**

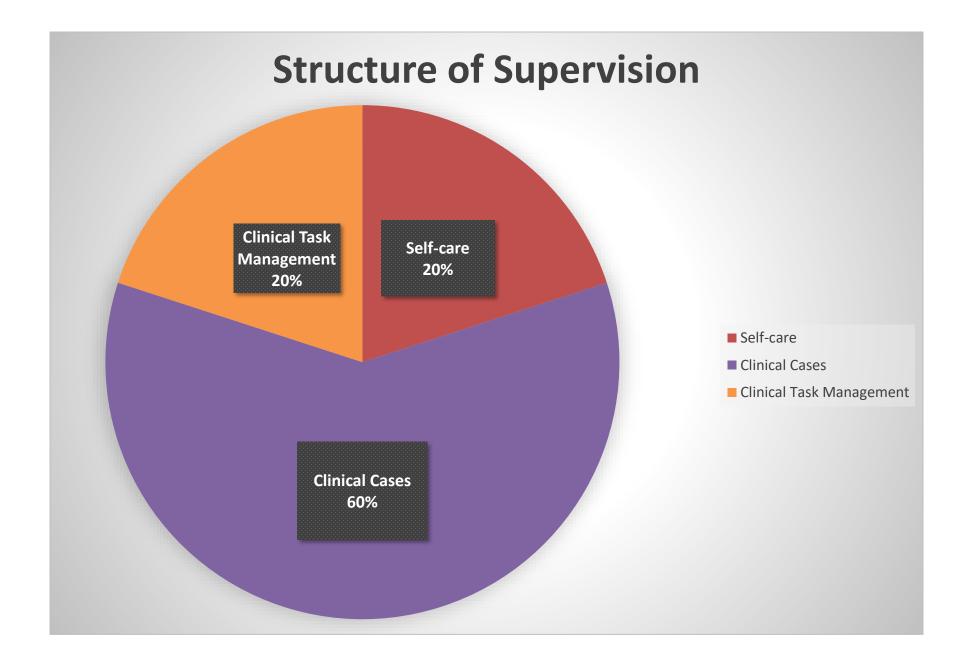
 Connecting with colleagues in a way that heals & helps

#### **Self-Care**

- Mind
- Spirit
- Strength
- Heart

https://compassionresiliencetoolkit.org











## The ABCs of Self Care

#### Awareness

- Of your own experiences
- Of your thoughts and feelings
- Of resources and support

#### **Balance**

- Professional Boundaries
- Work, play, rest
- Types of work

#### Connection

- To yourself
- To others
- To a bigger perspective the bigger picture





#### What is a Self Care Plan?

- A 'Self Care Plan' refers to the activities that you have identified as important to your well-being and that you have committed to do on a regular basis to take care of yourself
- There is no "one-size-fits-all" self-care plan, but there are some general principles that will help you manage your self-care:
  - Take care of your physical health
  - Manage your stress and reduce it where possible
  - Honor your emotional and spiritual needs
  - Nurture your relationships
  - Find balance in your personal and work life



# **Compass Model of Wellness**



#### **HEART**

**Relationships**: the ability to create and maintain healthy connections with others in your life **Emotions**: the ability to express your emotions and receive others' emotions in a healthy way



#### MIND

**School/Work**: the ability to get the most out of educational, volunteer, and employment opportunities **Organization**: the ability to manage time, priorities, money, and belongings



#### **SPIRIT**

**Core Values:** the development of a personal value system that supports your sense of meaning and purpose **Rest & Play:** the ability to balance work and play to renew yourself



#### **STRENGTH**

**Stress Resilience**: the ability to deal positively with the challenges of life

Care for My Body: the ability to build healthy habits around your physical well-being, and to end unhealthy habits



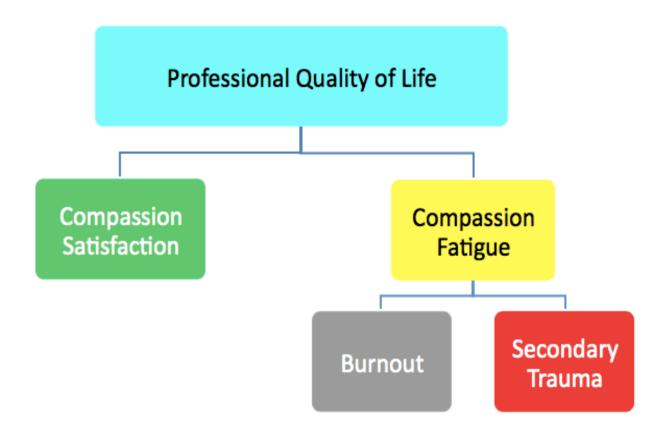




### **ProQOL**

Part of the implementation tools: Professional Quality of Life Scale

http://progol.org



Copyright Beth Hudnall Stamm (2009)



# **Provider Resilience App**



#### Provider Resilience 4+1

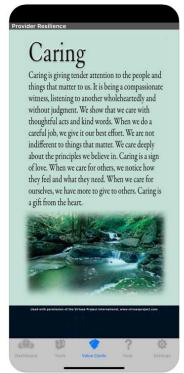
National Center for Telehealth & Technology

\*\*\*\* 4.7, 9 Ratings

Free









Source: https://www.health.mil/About-MHS/OASDHA/Defense-Health-Agency/Operations/Clinical-Support-Division/Connected-Health/mHealth-Clinical-Integration



#### **Wellness and Resilience Interventions**

- Improved Nutrition
- Exercise
- Good Sleep Habits
- Breathing exercises
- Visualizations / Guided Imagery
- Progressive Muscle relaxation
- And more!





# **Improved Nutrition**

- Eat low
- Eat color
- Shop the outside aisle
- Divide your plate
- Consider your portions

Principle:

Eating better helps us feel better.





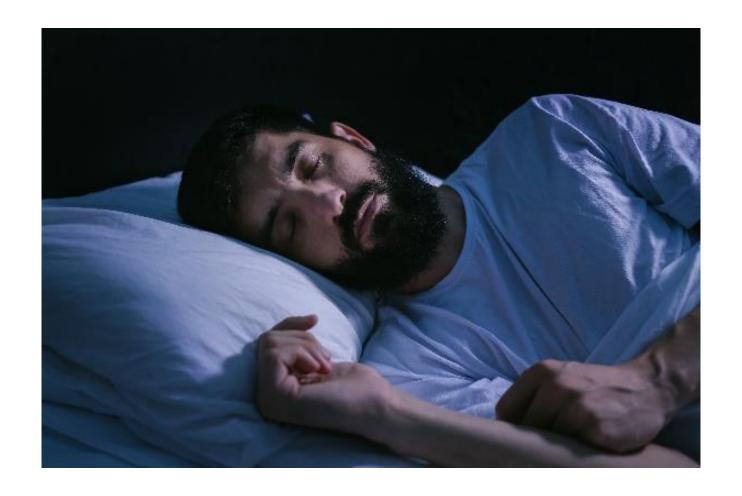
## **Success in Motion!**

- Incorporate chair exercises
- Walk while talking
- Joint staff/participant walking competitions with pedometers
- Create walking "tracks" in your building
- Mark out walking trails in the neighborhood
- Form partnerships with local YMCA's or fitness centers
- In home exercises: climbing stairs, walking in place etc.





# **The Benefits of Sleep**





# (SELF-SOOTHING)

Self-soothing is a quick and effective way to reduce the intensity of negative emotions.

Sight

Low lighting Soothing colors Sleeping masks Coloring books Pinterest Collages

#### ouch

Soft things Cuddle things Massage Hot/cold shower Heated/weighted blanket

#### Sound

Calming noise ASMR videos Nature sounds Guided meditations Binaural beats

#### Smell

Aromatherapy Fresh air Candles/insense Comforting smells



Strong flavors Warm drinks

Eat slowly Nostalgic flavors

www.blessingmanifesting.com



#### **Grounding Exercise**













Hold a pillow, stuffed animal or a ball

Place a cool cloth on your face, or hold something cool such as a can of soda

Listen to soothing music

Put your feet firmly on the ground

FOCUS on someone's voice or a neutral conversation

5-4-3-2-1 Game

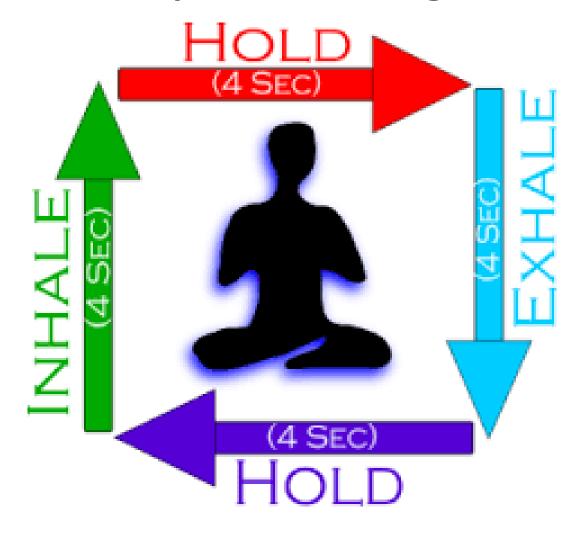
### **Diaphragmatic and Other Breathing**

- The diaphragm is the most efficient muscle of breathing. It is a large, dome-shaped muscle located at the base of the lungs. Your abdominal muscles help move the diaphragm and give you more power to empty your lungs.
- Called deep breathing, diaphragmatic breathing, abdominal breathing, belly breathing, and paced respiration. When you breathe deeply, the air coming in through your nose fully fills your lungs, and the lower belly rises.





#### **Square Breathing**





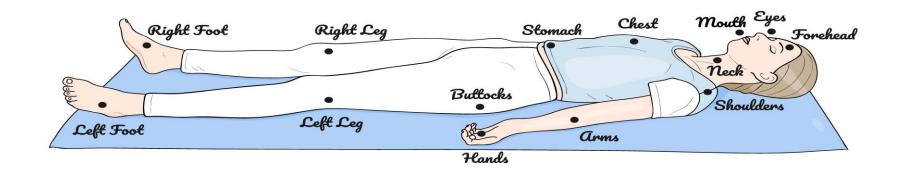
## **Guided Imagery**

- Sometimes called guided meditation, visualization, mental rehearsal and guided self-hypnosis.
- A gentle but powerful technique that focuses the imagination in proactive, positive ways, involving as many of the 5 senses as possible.
- Examples:
  - -https://youtu.be/ar\_W4jSzOIM
  - https://youtu.be/WBYYFbStfHM



### **Progressive Muscle Relaxation**

- The practice of tensing, or tightening, one muscle group at a time followed by a relaxation phase with release of the tension.
- Doctors have used progressive muscle relaxation in combination with standard treatments for symptom relief in a number of conditions, including headaches, cancer pain, high blood pressure, and digestive disturbances.



Progressive Muscle Relaxation







## **Key Takeaways**



Differences between secondary trauma, compassion fatigue, burnout, and stress



Impact on personal and professional life



Ways to incorporate options for wellness and resilience at work



Consider what next steps you can take





# Laura Leone, DSW, MSSW, LMSW Integrated Health Consultant National Council for Behavioral Health LauraL@TheNationalCouncil.org





## **Questions and Answers**

Please submit your questions to the presenters using the Q&A feature. The presenters will address as many questions as time permits.







# **Evaluation and Certificate**

# https://pra.typeform.com/to/isqUioq7

Zoom should redirect you and the link will be sent via email

Please complete evaluation if you would like a certificate of participation



## Thank You!

SAMHSA's Homeless and Housing Resource Center provides high-quality, no-cost training for health and housing professionals in evidence-based practices that contributes to housing stability, recovery, and an end to homelessness.

#### **Contact Us:**

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518-439-7415x4





