

Behavioral Health Impacts of COVID-19 Fifth Wave

Background

A secondary disaster impact, or *disaster cascade*, is often related to or triggered by the initial impact of a disaster. It may be caused by **additional pandemic waves**, economic hardships (unemployment, bankruptcy, eviction, food insecurity, etc.), and social and political disturbances (violence, civil unrest, protests, etc.) The fifth wave of infections could trigger a *disaster cascade* broadly across the state in terms of behavioral health symptoms, but particularly among healthcare workers, public health personnel, essential workers, and others who have been directly involved in the pandemic response since early 2020.

- Disaster cascades come with increased risks for post-traumatic stress disorder (PTSD) and other significant behavioral health impacts, including depression and anxiety. Behavioral health experiences related to the fifth wave include many unknowns associated with the current course of the pandemic, a feeling of “here we go again,” and the sense of backtracking with regard to the pandemic ending which many believed was behind us.
- The variants may also contribute to excessive use of media to seek information and answers, to alleviate anxiety. As more is learned about the variants, new information and knowledge creates the potential for misinformation and disinformation.
- Parental stress remains higher than typical. Almost 30% of parents are experiencing negative mood and poor sleep quality, with a 122% increase in reported [work disruption](#).¹ Additionally, 86% of families are experiencing hardships, such as loss of income, job loss, increased caregiving burden, and illness within the household.
- Workplace stress remains higher than typical and is likely to increase due to uncertainty about returning to in-person work as cases of the Delta variant rise. For workers who are also parents, uncertainties related to their children returning to in-person school, and the potential for another year of virtual instruction create additional behavioral health impacts related to stress, anxiety, and depression.
- Disaster cascades also tend to impact marginalized communities or those with fewer access to resources in a highly disproportional and negative way. Please see our monthly forecasts for information on how socio-economic status, discrimination and other socio-cultural factors play a role in the experience of a disaster cascade.

¹ Gassman-Pines, A., Ananat, E. O., & Fitz-Henley, J., 2nd (2020). COVID-19 and Parent-Child Psychological Well-being. *Pediatrics*, 146(4), e2020007294. <https://doi.org/10.1542/peds.2020-007294>

What can we do to effectively manage the disaster cascade experience?

- Develop and maintain **boundaries** around work time and time off. If we **all** do this, it will become the norm and help sustain us.
- Focus on **process** over content. **How** you engage with and interact with others should be the focus, rather than the outcomes of the conversations.
- **Use the PEACE Model for active resilience practice.** Behavioral health research shows that focusing on the following can increase health and positive outcomes for many people during disasters and long-term recovery:

P	Process over content: Pay attention to how you are doing things.
E	Effort over outcome: Consider how you are doing (and how your family and children are doing), given the enormous, long-lasting impact of the pandemic.
A	Adaptability over rigidity: Think about how you can once again adapt to changes brought on by the fifth pandemic wave.
C	Connection over isolation: Connection to others and important values has never been more important.
E	Empathy over judgement: Try to be intentional about seeing someone else's point of view.

For leadership within any workplace or organization:

- Modeling is the most effective way to teach anything. Start by modeling healthy boundaries around “on,” “on-call,” and “off” time with work. “Off” time needs to be prioritized as a norm for everyone, including children and teens.
- This is a chance to demonstrate what we have learned about our own active coping skills, our internal strengths, and what is important to us in terms of our own resilience and the core values we live by.
- What percentage of “normal” is achievable or desired based on our expectations for the coming months and our lives in the context of COVID-19? What processes and pre-pandemic experiences would we intentionally choose to keep after the pandemic ends? Allowing ourselves the opportunity to identify those things can help increase a sense of hope. We can **choose** which changes to keep.
- **The need for kindness, patience, and thinking before you act has never been more important.**
- Microsoft did a [large-scale study](#)² on how folks are doing in the workplace and their expectations related to work. Key takeaways:
 - Approximately 41% of the global workforce is likely to consider leaving their current employer within the next year, with 46% planning to make a major pivot or career transition.

² <https://www.microsoft.com/en-us/worklab/work-trend-index/hybrid-work>

- Many business leaders are faring better than their employees. Sixty-one percent of leaders say they are “thriving” right now, **23 percentage points higher** than those without decision-making authority.
- Transparent, honest and clear communication **across all levels** within most organizations is recommended to reduce confusion and misinterpretation about challenges in the pandemic that are experienced by many.

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