



# Northeastern Family Institute

Bringing Vermont Children, Families, and Communities Together

## The Family Center: Outpatient Mental Health

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## NFI VT COVID-19 Emotional Well-Being Ideas

### General Ideas to Address Emotional Well-Being:

1. Language is an important vehicle for change, for comfort, and for the transferring of ideas:
  - ⇒ Instead of the phrase, “social distancing” try to use “physical distancing”.
  - We need, especially now, to prioritize social and emotional connections.
2. Our children/adolescents need our support. However, the most effective way to deliver services and care for them is to support and bolster caregivers, important adults in their lives, professionals, and members of our workforce. Adult self-care and wellbeing are acts of altruism and social justice (better capacity to care of others).
3. Focus on facts: COVID-19 is scary and concerning, and it will affect us all, although disproportionately. Elders, those with pre-existing health/mental health conditions and those from marginalized/ subjugated populations will fare worse. It is our obligation to reach out to those communities.
4. There is an abundance of great information and fact sheets available through NCTSN, Harvard Center for the Child, SAMSHA, AOE, DMH, CDC, Neurosequential Network, YouTube, podcasts, Trauma associations etc.
5. Stress is contagious, but so are connections, calmness, kindness and compassion. While COVID-19 will bring trauma, grief and tragedy, it is an unparalleled opportunity for resilience, community building and relational health. We can control the spread of panic, the explosion of anxiety, and the fear prevalent to the pandemic by maintaining social connection, committing small acts of kindness, and through exercise, altruism, self-distraction, limiting media, and good sleep etc. (more on this below).
6. Helplessness is one of the most common and profound artifacts of trauma and excessive stress. While complex, antidotes/solutions to feeling helpless center on taking action, even very small ones. It is not the amount that you do, but the act of “doing” (e.g. movement, texting someone, donating to charity, volunteering, counseling a scared person). “Short moments of action, many times a day” will help.
7. Unlike most large-scale community crises where *many* people are impacted, the COVID-19 pandemic affects *everyone*. By its very nature, this crisis is everyone’s crisis. Although no one is immune, and things can feel out of control, we can mitigate its effects with:
  - ⇒ Good planning, adherence to structure and routines, by taking action, by making certain things predictable (e.g. work/school time, mealtimes, exercise regimes, break times, connection times)
8. High levels of stress negatively affect our cognitive ability. Our judgement, memory, common sense, ability to inhibit and delay gratification are all compromised. The higher our stress, the less able we are to help others and ourselves. Higher levels of stress evoke our survival and self-protective impulses; we are prone to fight-flight-freeze and less likely to tend/befriend, socially engage and be altruistic.



## How to Address Emotional Well-Being for Adults (caregivers, workforce, leaders, colleagues)

Ways to Self-Regulate (calm our nervous systems):

1. 'Bottom-Up' Processing/Activities: The the most effective and sustainable ways to calm ourselves and minimize stress are through somatic (body based), repetitive, movement orientated activities. These include yoga, martial arts, exercise, sports, singing, dancing, humming, breathing and mindfulness activities, walking, pet care, stretching, nurturing physical contact:
  - ⇒ Frequency and dosing: ideally one longer block of movement/exercise per day (30 minutes or more) and then short, intermittent and regular movement every hour! Even 5 minutes of each hour can help to reduce stress and prevent the buildup of tension. It is essential to prevent the buildup of stress as this makes it harder to moderate it later. "Short moments of action, many times a day"
2. Connection, Collaboration, Compassion: "Doing With, Being With" is an ethos necessary to embrace our personal and collective well-being. We are a social species and we need each other, especially during times of adversity and suffering. This is the time to talk more, consult more, give more; it is a time to accept more from others and to be more connected. Compassion is the action part of empathy; it is critical to feel the feelings of others and it is a gift to try to do something about it. Crises, although painful, are remarkable opportunities for connection.
  - ⇒ Frequency and dosing: Regular social, professional, caring contact should be happening throughout the day. It need not be lengthy and it can be a combination of in person conversation (with appropriate physical distancing), check-ins, social media contact (as long as this is not the only type) and letters. Letting people know that they matter to you, that you are thinking about them etc. is protective and stress reducing. "Short moments of action, many times a day".
  - ⇒ Keep your inner circle closer and your outer circle larger: It is natural to want to connect more with family and close friends, with mentors, colleagues, teachers and advisers. Keep doing this, and do it more. Talking and processing together during times of stress is a healthy human impulse. Expand your outer circle (those more casual connections, people whom you do not have as intimate contact) as this is a great time to check-in, reach out and reconnect. Altruism and compassion practices feels good to those receiving it and those providing it, it is a reciprocal process. It is our moral obligation to reach out to those without social supports, whether they be a student, client, coworker etc.
3. Structure, Routines and Rituals: We thrive, particularly in adverse times, with structure and routine; these are comforting and they give us a sense of control and predictability. This is particularly important when the COVID-19 crisis has led to such significant disruption and uncertainty in our lives. While we cannot predict the many turns this virus will take, nor understand precisely the challenges to our own well-being, we can incorporate a level of fidelity to our routines. Rituals, like mealtimes, exercise, planned breaks, regular meetings, etc. are grounding and comforting.
4. Boundaries and Limits: With more people working at home, and concerns about rising levels of domestic violence, child abuse and substance use, there is a real threat to "work-life balance" at this time. There is a temptation to work longer and harder. For people still going to work ("essential workers"), the balance is profoundly challenging as well. In many ways, those at work sites are shouldering our nation's infrastructure (e.g. first responders, healthcare, food services, cleaning services, and drivers) and are uniquely at risk. It is essential that we all maintain our balance and set limits where possible to maintain our own health.
5. Validation, Empathy and Reflective Listening: When we are scared, concerned, and/or panicky, there is an increased need for empathy and validation. During this time of crisis, we need to authenticate other people's experience, and honor their vulnerabilities. To feel truly understood, and connected to others, we have to "step into the darkness" with them. High levels of stress and adversity can feel lonely, and empathy and validation



are social connection interventions. Reassurance can also be comforting, yet it is most effective when it occurs after validation and empathy.

6. 'Top Down' Processing/Activities: These are of value, but typically less so than the previous ones stated in this list (particularly #1 and #2). These include more cognitive based strategies like positive self-talk (e.g. "this crisis will end", "I am a strong person"), self-instructing, ("take 5 deep breathes), and use of logic and reason.
7. Avoiding, Distancing, Distracting and Detaching...with Intention: In small doses, and when done deliberately, it is regulating and calming to just disconnect and inhibit our thoughts about the stress we are experiencing. The impulse to escape is normal. Watching TV (not the news), listening to music, immersing in a hobby are all appropriate ways to sublimate stress by removing it from consciousness. For those living in more crowded conditions, it is important to get time alone, away from others when possible. Walks aside, away from others, is still allowed and advisable for many who need time alone.
8. Limit Exposure to News, Blogs etc. about COVID-19: It is important to keep up on the news, both for your own/family's protection and for your role at work. Yet, *portion control* is critical. Simply put, too much exposure to the news can intensify stress, harm sleep and eating cycles and contribute to negative moods. Be informed, but not immersive about all the details around us.
9. Silver Linings/Meaning Making: For every human crisis, the act of 'meaning making' is a critical component of our recovery and posttraumatic growth and learning. We will all be seeing, and hearing about, unimaginable acts of heroism and humanity, as well as witnessing painful levels of despair, selfishness and maliciousness. Dilemmas become profound during times of crisis; some people die and suffer and many people build resilience, connection, determination and hope.

### **How to Address Emotional Well-Being of Children and Adolescents:**

Everything stated above is particularly relevant and applicable to children and adolescents. Additionally:

1. Be Honest but Developmentally Sensitive: Depending on the age, and more importantly, developmental stage of the youth, provide clear, unambiguous information about the crises. Answer questions directly, yet gauge what the child, client, student needs. Be careful about saying more than the youth can integrate in the moment. Remember, stress limits cognitive ability (e.g. retention).
2. Reassurance: Reassurance is helpful; however, it is of greatest value once a child/adolescents feelings, fears, etc. have been validated. Blanket reassurances can often promote a sense of discomfort and disconnection. It is fine to share your own concerns about COVID-19 with our youth, provided they are more generalized and you feel grounded and non-reactive about them.
3. Provide Guidance and Leadership: In times of excessive strain, children and adolescents look to us for our maturity, our capacity to relieve distress, and to help make decisions. Continue to set firm limits and remember that kids 'do as we do, not as we say', especially in times of stress. Role model calm.
4. Protect and Prepare: Caregivers and professionals must constantly assess how/when to protect a child/adolescent and when to prepare them for life's challenges. The COVID-19 crisis is an opportunity to do both; we do not want to over-protect or prevent our youth from developing the skills necessary to address their own stress, nor allow them to become overburdened. This can be a delicate balance best resolved by consulting with others, communicating with colleagues/co-parents etc.
5. Be prepared to "Speak the unspeakable": If someone the child/adolescent knows dies from the virus, we must be direct and clear. Depending on the stage of the child/adolescents development, accurate, courageous conversations about the permanence of the death, the impact on family and community must be framed and articulated.

6. Expect Regression: Children/adolescents often regress during times of heightened stress; they return to earlier behaviors to promote their own comfort and they can present as more clingy, moody, irritable, dependent, bothersome, provocative and resistant. Patience, limit setting, taking breaks, moderating expectations, empathy, and validation are all important.
7. Maintain Limits and Consequences: While structure and routines are critical to follow, youth still need limits and consequences for poor decisions they have made.

**How to Lead During a Crisis**: Formal leaders and supervisors, in addition to “thought leaders” within our organizations and agencies are critical to successful crisis prevention, planning and responding. Below are some critical components of Transformative Leadership during a crisis:

1. Relational Leadership: As emphasized consistently here, *connections* are central to our recovery, to the positive adaptation to stress, and to the successful operation of our organizations. Relational Leadership refers to our capacity to “Connect and Lead”. Concrete skills in this area include: showing care and concern (e.g. ‘you matter to me’), challenging growth (e.g. help people ‘step up’), provide support, use of participatory management (e.g. ‘voice and choice’), and helping expand options (e.g. provide resources).
2. Decision Rules: As leaders, we must make decisions, but clearly and intentionally. Our workforce does not generally resist change, “they resist being changed” in ways that are overly authoritarian. When decisions are being made, leaders must be clear about the *process* of the decision-making; is it a democratic, consensus or authoritative decision-making process? Being “clear is kind”.
3. Be strong and vulnerable: Transformative Leaders are strong and courageous; they have integrity, and are tirelessly honest about what they know and what they do not know. Without this type of vulnerability, there is no legitimate strength. Remember that your body language and non-verbals (e.g. tone of voice) reveal a lot about how you feel, how you regulate stress, and how you are reacting to others.
4. Communicate early and often: Crises spur the need to ‘over-communicate’ but not overwhelm. Decide on a regular (whether daily or weekly) methods by which you communicate with other leaders and your workforce.
5. Self-awareness and Self-reflection: Self-awareness is a critical capability that leaders must develop. Cultivate information about yourself, your leadership style, etc. from your inner circle, colleagues, and mentors. In order to grow professionally and personally, we all need multiple “data points” about our performance. Without self-reflection, there is no growth.
6. Be Positive, Proactive and Honest: When things are bad, we have to tell people things are bad. However, being honest without a plan is leaving people without hope, action steps or ways to adapt to the difficult situation. State the problem, offer and elicit ideas about solutions. The proverb “all of us is better than one of us” speaks to the importance of collaboration. Leaders who radiate trust, hope and optimism lead others to feel positive, confident and purposeful.
7. Have Clear Values and a Mission: Values and a clear mission are like a lighthouse during a storm. They provide direction and guidance. Know your values, live the organizational mission.
8. Focus on Goals and Steps to Accomplish Them: Remain clear about the ultimate goal of your efforts and communications. Be clear about what you want to accomplish.
9. Projection, Ambiguity and Angst: Be prepared for some people on your workforce, as well as clients and students/caregivers to project intense feelings onto leaders. In times of strain, we often have illogical, untenable and unfair expectations of our leaders. Stress reveals fracture lines in our own attachment histories and we might become more dependent on leaders. Again, validate, connect, provide information and then challenge others when appropriate.

10. Siting with Discomfort: As leaders, we have to “hold the tension” endemic to crises; doing so often opens our hearts and minds to new ideas, better connections, positive changes, and the real pain we see and feel. We have to role model the “OK-ness” with just “holding our seats” (not acting on impulse) to gather, consider and reflect. Fluid, determined and firm decision-making can co-exist with sitting with tension at times.
11. Personal Well-Being: This is not the time for endless sacrifice or martyrdom. Your own well-being and the well-being of other leaders and the workforce is the single most important skill to combat this crisis. Transformative Leaders understand that their well-being is an act of altruism and social justice.

Please reach out to colleagues, mentors, family members, and friends, now more than ever before. Feel free to reach out to me, or colleagues at NFI, if I/we can be helpful (contact information above).

(Informed by Bruce D. Perry MD, PhD.; Alicia Lieberman, PhD.; Sandra Bloom, MD; Daniel Hughes, PhD.; Daniel Siegel, MD; Trauma Transformed; Inc.com; Brene Brown, LCSW; Peter Senge, Ken Epstein, LICSW, PhD.; NCTSN; SEARCH Institute; Parker Palmer, PhD., etc.)