



Safe Start Washington

A Phased Approach to Recovery

SAFE START WASHINGTON

Governor Jay Inslee, in collaboration with the Washington State Department of Health, has established a data-driven approach to reopen Washington and modify physical distancing measures while minimizing the health impacts of COVID-19.

This approach reduces the risk of COVID-19 to Washington's most vulnerable populations and preserves capacity in our health care system, while safely opening up businesses and resuming gatherings, travel, shopping, and recreation. The plan involves assessing COVID-19 activity in the state along with health care system readiness, testing capacity and availability, case and contact investigations, and ability to protect high-risk populations. Governor Inslee announced in his press conference three Safe Start advisory groups with focus on health systems and public health, social supports, and economic readiness.

"These groups include a diverse group of voices, from community leaders in labor, business, government and nonprofit organizations," Inslee said during a press conference Tuesday. "They represent a broad cross-section of Washingtonians from east and west of the Cascades, different generations and a focus on different impacts from the pandemic on our state."

Each advisory group constitutes a forum for the community to consult with the governor's office and state agencies on next steps as Washington moves forward. The members of these community leader groups are in touch with communities around the state and will inform decision-making.

The three-community leader advisory groups will be led by state cabinet officials:

- Public Health and Health Care System led by Department of Health Sec. John Wiesman
- Safe Work and Economic Recovery led by Department of Commerce Director Lisa Brown
- Social Supports led by Department of Social and Health Services Sec. Cheryl Strange

These groups do not substitute for legislative involvement. Cabinet leads and the governor's office staff will report out to the local elected officials and the Legislature on the progress and status of the state's efforts.

Read more about the three groups on the [governor's Medium page](#).

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May is Mental Health Awareness Month

Since 1949, Mental Health Awareness Month has been observed in May in the United States. The goal throughout the month is to reach millions of people in the United States through the media, local events, and screenings to raise awareness and educate about mental health.

Be Kind to Your Mind - Tips to cope with stress during COVID-19

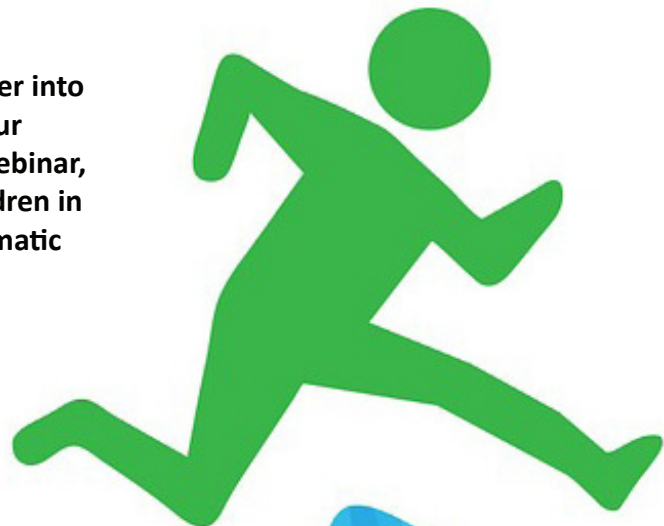
1. PAUSE. Breathe. Notice how you feel
2. TAKE BREAKS from COVID-19 content
3. MAKE TIME to sleep and exercise
4. REACH OUT and stay connected
5. SEEK HELP if overwhelmed or unsafe

MENTAL WELLNESS AND RESILIENCY: ADJUSTING TO LIFE AND ADDRESSING CHALLENGES DURING COVID-19

We may know that there will be an end to quarantines and stay at home orders, but the uncertainty and the dramatic change to our daily lives has added stress to almost everyone. There are ways to recognize and to deal with what you may be experiencing.

1. Understand what is happening
2. Focus on what you can control
3. Connect with others
4. Find some ways to do self-care and maintain positive mindset
5. Do not give up! Tomorrow is a new day.

Stay tuned for a webinar that will delve deeper into this topic and offer more ways to improve your mental wellness during this time. Until the webinar, utilize this great resource for those with children in the home written by The National Child Traumatic Stress Network.



ON KEEPING A GRIP

By Jim Mullen

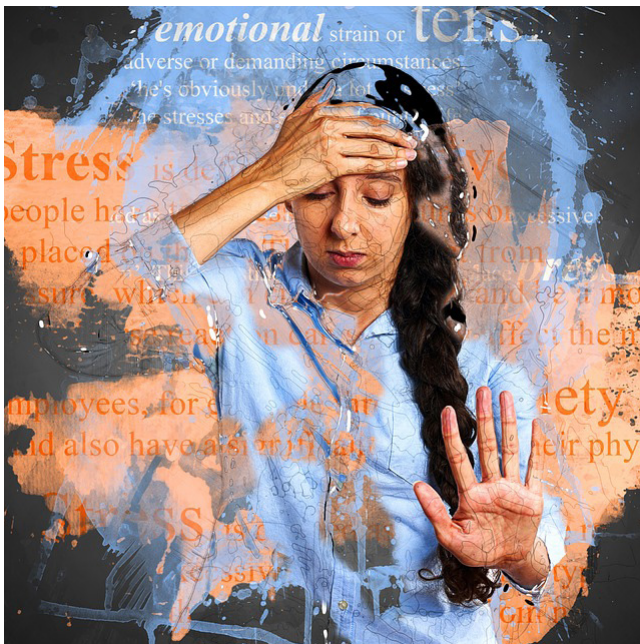
This topic is challenging for an untrained layman (like me). Still, expressing oneself is said to be therapeutic.

Here goes:

In 2005, as the survivors of hurricanes Katrina and Rita found refuge in other states, Washington State began to search for locations to house potentially thousands of people with many critical needs. Among the sites that could have been quickly converted to temporarily house survivors was a wing of Western State Hospital.

There was immediate pushback from some of our local colleagues. Apparently utilizing a hospital-like setting to temporarily house survivors whose lives had been turned upside down and who needed a place to regroup would “stigmatize” those survivors, at least in the minds of those narrow-minded (but otherwise reasonable and competent) local officials. As it happened, the facility was not needed.

That episode illustrates that even among supposedly responsible people there lurks the notion that there is something shameful about any association, however obliquely, with mental health. At best that is short-sighted. At worst it is a self – deception that can lead to needless tragedy. During any crisis of long duration, the emotional and physical stamina of responders is a major priority for any emergency manager: taking care of ourselves so we could take care of those with whom we work is much more challenging. And we, unlike most of our citizens, signed up for this type of role.



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Financial, professional, personal and health anxieties clearly trouble many of us. Though we may react to these pressures in different ways, few of us are exempt. We see the news reports of dedicated healthcare and response personnel who have “broken” under the stress of the pandemic. The burden of caring for others, while caring for themselves became unendurable.

Technology has become an increasingly important asset in maintaining a healthy psychological equilibrium. With work relationships suspended; interactions with co-workers are limited, except where technology allows.

Beyond work relationships, the pandemic’s influence on our psyches is increasingly evident in the concern one feels about the virus’ intrusion into the health and lives of those we care most about. Oddly, as we hear that people whom we know have become ill, or worse, have succumbed, we become aware that the list of those whom we care about was a lot longer than we suspected. And that is distressing, too.

Daily “prompts” about infection and death counts feed an increase in anxiety and one’s sense of impending disaster. There are regular reminders of the emotional toll on health care workers and other frontline responders. You can find a media outlet to make you angry and depressed about the government’s restrictions on normal activity, or one that reinforces angst that nowhere near enough is being done. Motorists are driving more recklessly, with more rolling stops and rapid lane changes at higher than even normal speeds. The pandemic’s subtle negative impact can be seen everywhere.

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Other, more visible examples of stress inducers, however well intentioned, abound. Advertisements constantly remind that you can still buy a car, order a sweater online, and that “we” are all in this together. Inspirational messages with just a hint of marketing intent (like the slowly building applause for our frontline responders) while initially moving and heartwarming are becoming depressingly repetitive. I mean, we get it!

Not as well-intentioned are our boorish, constitutionally illiterate fellow citizens who think it is ok to wave weapons at lawmakers, or risk everyone else’s health to feed their appetite for displaying their own irresponsibility and lack of humanity.

It is futile to attempt to ignore these inputs completely, although the mute button and some good books help. The media must chronicle these events, and as citizens, we should be following the news. In addition to constantly bombarding our emotions with tragic vignettes, can’t just one 10 - minute news block be devoted to what else is happening in our world?

At some point, we will need to recover. Following other “physical” disasters, the absence of a planned recovery system usually results in a scramble for jurisdictions to return to as much “normalcy” as is feasible, given whatever devastation has occurred. The mental health of those affected in such cases is still a concern, but healing seems less challenging because at least the ground has ceased to move, or the wind has ceased to blow, or the fires have

been suppressed. There is a reason to believe that the danger has passed, so “let’s get things back to where they were before” has real appeal. “Rebuilding” seems possible.

COVID-19 is different. We do not yet know where “it” is, or where or when “it” will reappear, or if additional mutations will continue to confound our health system and attack our collective sanity. But we should know enough to prepare for what comes next, before “next” arrives.

We are not helpless, in any case. It may be possible for a more stable transition to the new normal that we only speculate about now. Fear of the unknown is far more dangerous to mental health than is candid confrontation with a new reality armed with thoughtful plans, and the collective wisdom of us all.

Planning for our future “normal” while experiencing the present can help us remain healthy. Being uncertain is no disgrace, being fearful and anxious right now seems more like a sign of sanity. “Look thoughtfully ahead” is this layman’s therapeutic recommendation.

MENTAL WELLNESS AND RESILIENCY:

ADJUSTING TO LIFE AND ADDRESSING CHALLENGES DURING UNCERTAIN TIMES

By Ryann Leonard, PhD

Feeling fatigued? More impatient than normal? Are you finding it hard to balance working from or just being at home? You are not alone. These are all signs that your mental wellness is being challenged by uncertainty and stress. Currently, COVID-19 has influenced the wellness of most of us across the globe whether that be emotionally, physically, or mentally. We are living in rapidly changing times where we are constantly bombarded with media and messaging about what we should do, or should know, or how we should feel during this time. Plus, we know that all the rules might change tomorrow. It is overwhelming. For me, I have seen this most in my area of influence, which is education.

I have been a college instructor for almost 20 years. I have been teaching online and working somewhat remotely for almost 10. However, many of my colleagues and students were thrust online this quarter/semester with little to no preparation time. Additionally, many are living in fluid life circumstances that have potentially major consequences. These are amazing people. People who face adversity head on. People who have such resiliency normally yet now, they are struggling to complete basic tasks. This article is for you. Hopefully, this will help you understand a bit more about they “why” and help you to find some ways to manage daily life.

I know for myself, my colleagues, and my students we have experienced changes over the past several weeks.

Cognitively some have been confused, worried, and self-blaming while others suddenly have strong determination and focus. Emotionally, some have been experiencing shock, grief, fear, sadness while others feel challenged or motivated to help. Socially, some may be feeling isolated or suddenly connecting in deeper ways. Physically, many of us are tired, irritable, have headaches and muscle tension yet some are incredibly alert and ready to respond.

How do these opposites exist? Stress. Stress starts deep in the brain, in the amygdala, and is a very natural response to experienced fear or challenge. It is often discussed as producing the “Flight, fight or freeze” response as hormones flush through our body. The main stress hormone is cortisol and it works with other parts of your brain to control mood, motivation, and fear levels (Webmd, 2018). For some, they experience Eustress, or positive stress, and their body functions better, becomes more focused, and more motivated during periods of stress (American Addiction Centers, 2015). Others of us have negative reactions to stress. Often this distress is caused by acute stress experienced in limited events and for some they may live in persistent episodic acute stress (Freshwater, 2018). If these experiences of stress become more long term, like in a pandemic, or are not addressed they can lead to chronic stress. Chronic stress wears us down and causes long term negative reactions in our minds and body. Reactions where the symptoms described above become long lasting and resistant to change. This is something we want to prevent.



“We are living in rapidly changing times where we are constantly bombarded with media and messaging about what we should do, or should know, or how we should feel during this time.”

Prevention or mitigation is critical for dealing with stress. There are some activities that can help. Exercise and meditation are the two most researched and easily accessible forms of self-care. Even 20 minutes of exercise a day can help to reduce cortisol levels and improve functioning. Additionally, set boundaries, making connections, and manage your diet. The working from home/homeschooling/caretaking/.../ lives we are living right now will benefit from scheduling and setting boundaries. What time will you dedicate to each activity per day? Try to stick to that schedule. It will help your brain to focus. Next, keep connected. Who are the people you can go to for a laugh or a cry? Be there for each other. I have my group and we meet weekly just to chat. It is one of my favorite times per week. Lastly, manage your diet. What are you putting in to both your body and mind? Do you need to buy less or more snacks this week? Do you need to watch less news and more cute cat videos? How do you feel after digesting food and media? That will tell you a lot about what you might need to change. Overall, be kind and give grace to yourself and others. Try to remove the negatives and hold on to the positives. And above all, reach out if it is just too much.



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NAVIGATING THESE STRESSFUL TIMES OF COVID-19

[SPIN Global](#) is providing resources to the [Planet Ready](#) community to help navigate this stressful season of COVID-19.

Here are a few resources from SPIN Global and Planet Ready have developed and shared in the past month:

1. [A Plan to Black Start the Economy](#)
2. [The Economy & Emergency Management](#)
3. [COVID19 FAQ for Business Executives](#)
4. [Coronavirus Virtual Meeting from the Institute for Diversity & Inclusion in Emergency Management](#), Guest Speaker Joel Thomas

RESOURCES AVAILABLE

[Centers for Disease Control and Prevention](#)

[Mental Health America](#)

[Mental Health Resources in Washington](#)

[Washington State Department of Health](#)

Suicide Prevention Hotline: 1-800-273-8255

SAMHSA's Disaster Distress Helpline:
1-800-985-5990 (Toll Free - English and Español)

SMS: Text TalkWithUs to 66746

[National Child Traumatic Stress Network](#)

[CDC – Stress and Coping](#)

[Substance Abuse and Mental Health Services Administration \(SAMHSA\) resources](#)

[Kimberly Miller Consulting](#)

[Green Cross Academy of Traumatology](#)