



Disaster Behavioral Health

**Responder Safety and
Health Survey
Results & Discussion**

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Responder Safety and Health Survey

- ▶ As part of the Spring 2021 Disaster Behavioral Health newsletter in April, the Responder Safety and Health Survey was announced and a link to complete the survey was provided.
- ▶ The intent of this survey was to meet the Disaster Behavioral Health Domain 1- Activity 7 Deliverable: Coordinate risk assessment and training to help mitigate responder exposure to traumatic events.



This survey aimed to examine responder safety and health a year+ into the pandemic response.

Data collected will be used for quantifiable information. No individual names, comments or other identifying information will be included in final reporting. This survey will assist in our ability to quantify and qualify the potential exposure to traumatic events likely to have impacted responders during this pandemic; and identify methods to manage stress and to develop individual coping strategies. The survey results will inform the Disaster Behavioral Health (DBH) program on future plans and training needs to support Responder Safety and Health.

This survey is based on the Anticipate.Plan.Deter™ Personal Resilience Plan and PsySTART Responder Triage System. © M. Schreiber, 2020.

<https://www.surveymonkey.com/r/MaineResponderSafetyAndHealth>

Survey Results

▶ Q1- Gender of Respondents:

- ▶ 142 Total Respondents
- ▶ 43% Female,
- ▶ 56.3% Male
- ▶ 0.7% Other

▶ Q2- Age of Respondents:

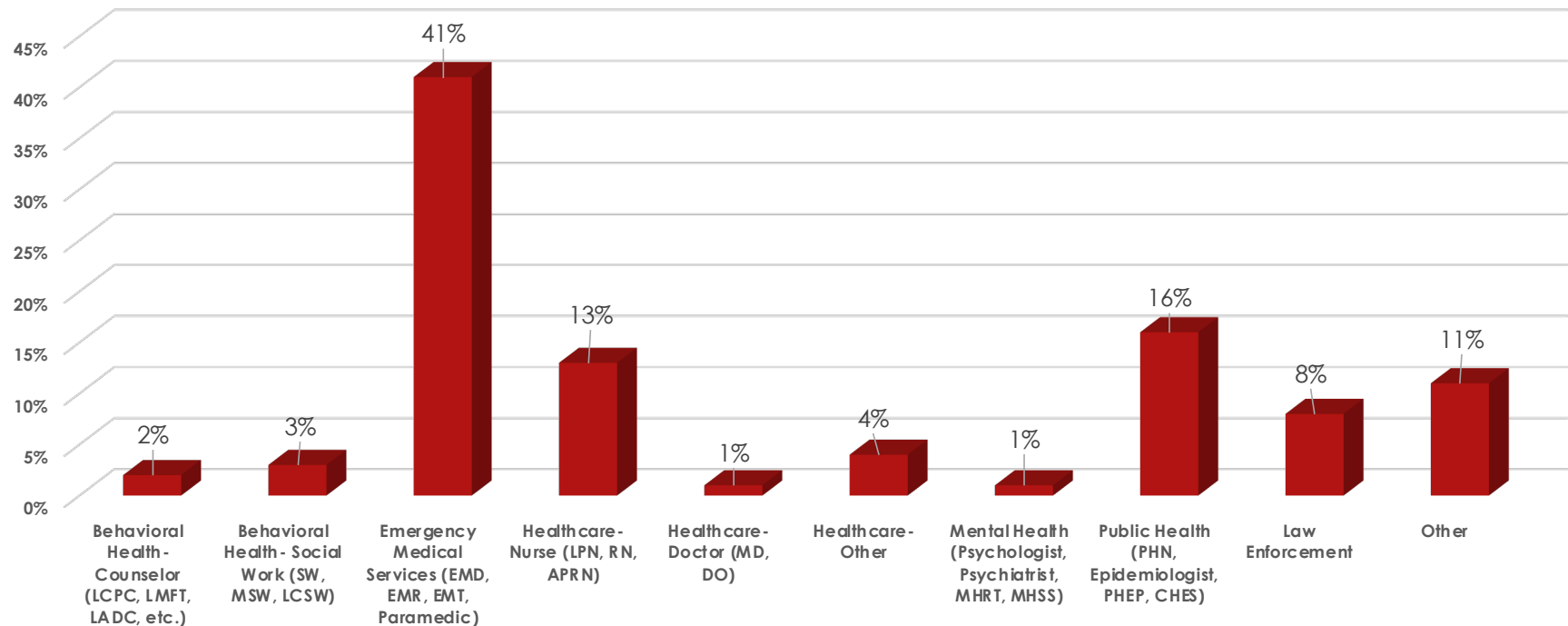
- ▶ 140 Total Respondents
- ▶ 20 and Under- 0.71%
- ▶ 21-30- 14.29%
- ▶ 31-40- 22.86%
- ▶ 41-50- 18.57%
- ▶ 51-60- 20.71%
- ▶ Over 60- 22.86%

Survey Results

- ▶ Q3- Educational Level of Respondents:
 - ▶ 142 Respondents
 - ▶ 0% completed Less than High School
 - ▶ 10.56% hold a High School Diploma
 - ▶ 22.5% hold an Associates degree
 - ▶ 35.92% hold a Bachelors degree, largest percentage
 - ▶ 26.06% hold a Masters degree
 - ▶ 1.41% hold a Doctorate degree
 - ▶ 1.41% hold a Doctor of Medicine Degree
 - ▶ 2.11% Other- Individuals working in the Emergency Medical Services field (EMD, EMS, EMT, Paramedic, etc.)
- ▶

Survey Results

Q4- Percentages of Respondents by Professional Discipline

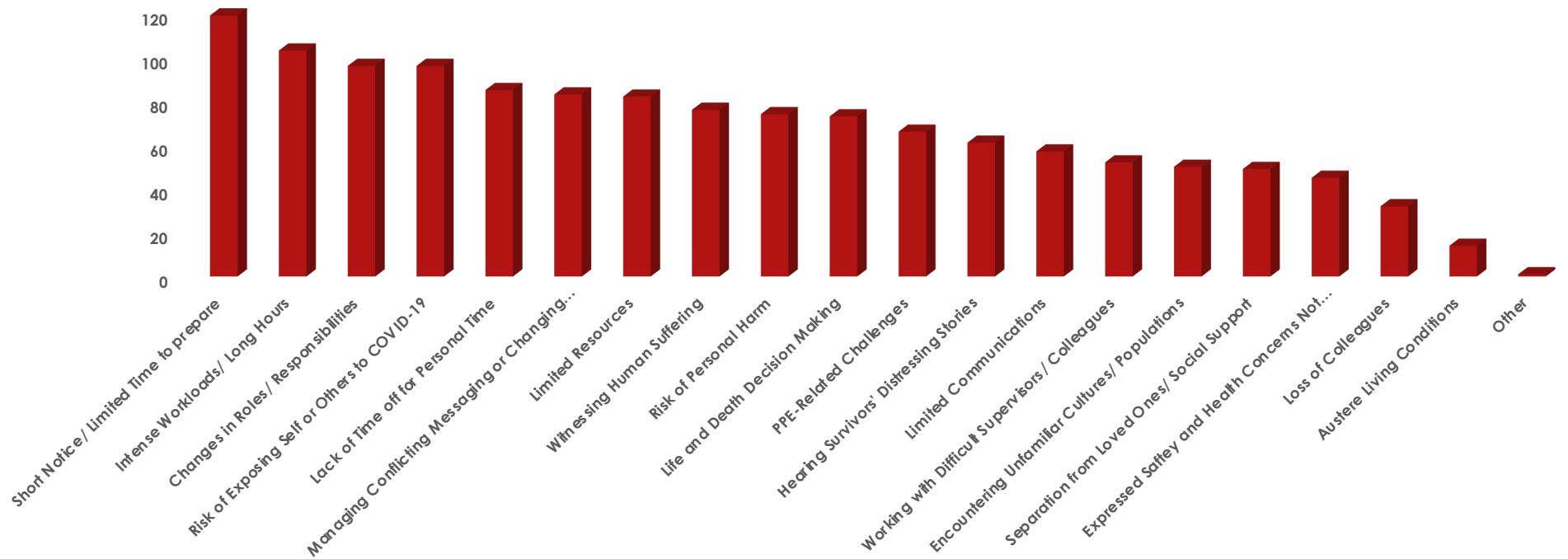


Survey Results

▶ Q5- Primary Work Settings by Respondents:

- ▶ 142 Number of Respondents
- ▶ 45.77% - Emergency Response or Management
- ▶ 18.31% - Public Health
- ▶ 13.38% - Other- Included primarily law enforcement, government, human services
- ▶ 7.75%- Healthcare
- ▶ 4.93% Cognitive Disability Services
- ▶ 3.52% Volunteer
- ▶ 2.11% Behavioral Health (Inclusive of mental health/ substance use)
- ▶ 1.41% Children's' Services
- ▶ 1.41% Corrections
- ▶ 1.41% School/ University

Q6- As a responder, you and your team are at risk of experiencing a traumatic incident- an incident that may involve exposure to catastrophic events and emotionally or physically challenging situations- Check all exposure elements you predict might be associated with your current/ upcoming work environment or volunteer deployment. Total Respondents 142.



Q7- Respondents were asked to list up to 3 things that are traumatic reminder or emotional “triggers”. Examples given included sights/ sounds, places, smells, people, times of day, situations, feelings. To protect the privacy of the respondents’ answers have been generalized into common groups of most frequently reported trigger areas.

People: Combative people, terminally ill people

Sounds: Loud sounds, unexpected sounds, people crying/ screaming

Events/ Situations: Anniversary dates of events, deaths, stressful working environments

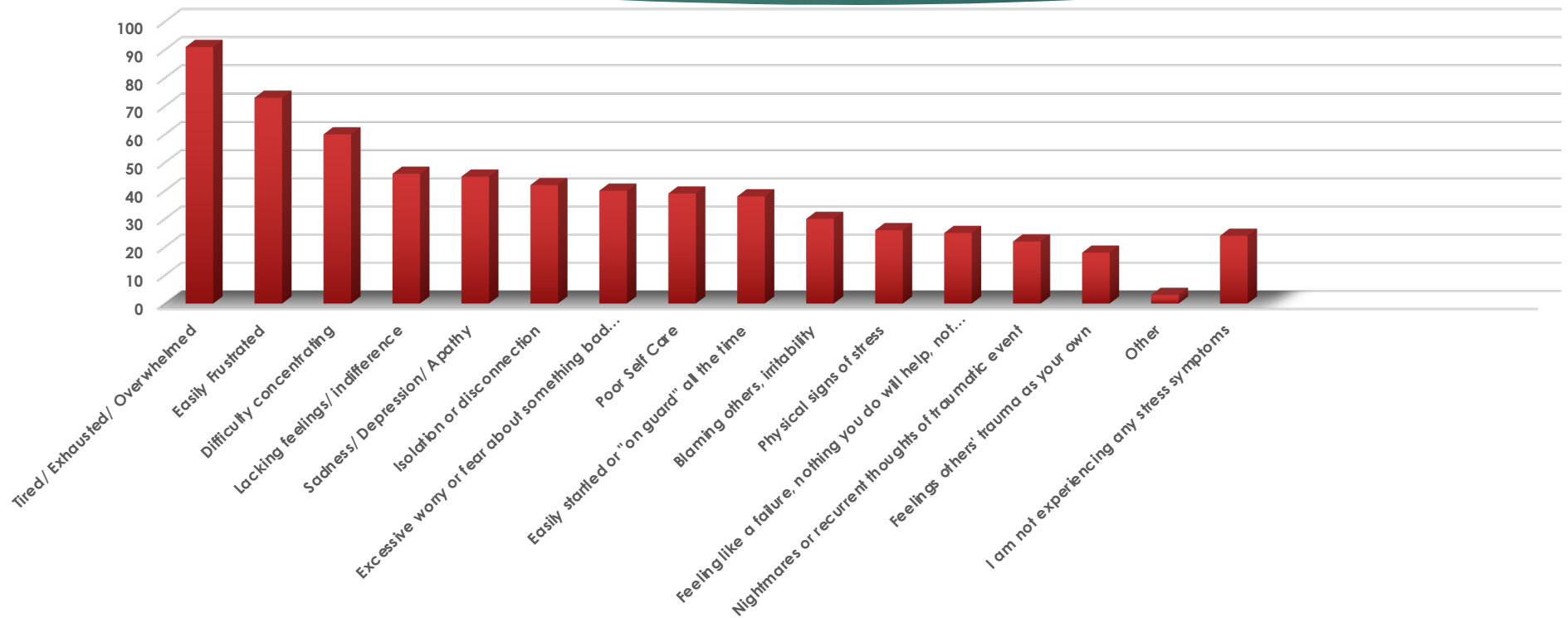
Feelings: Worrying about others or loved ones, visiting previous places of traumatic events

Sights/ Smells: Witnessing traumatic events or incidents, seeing vulnerable populations

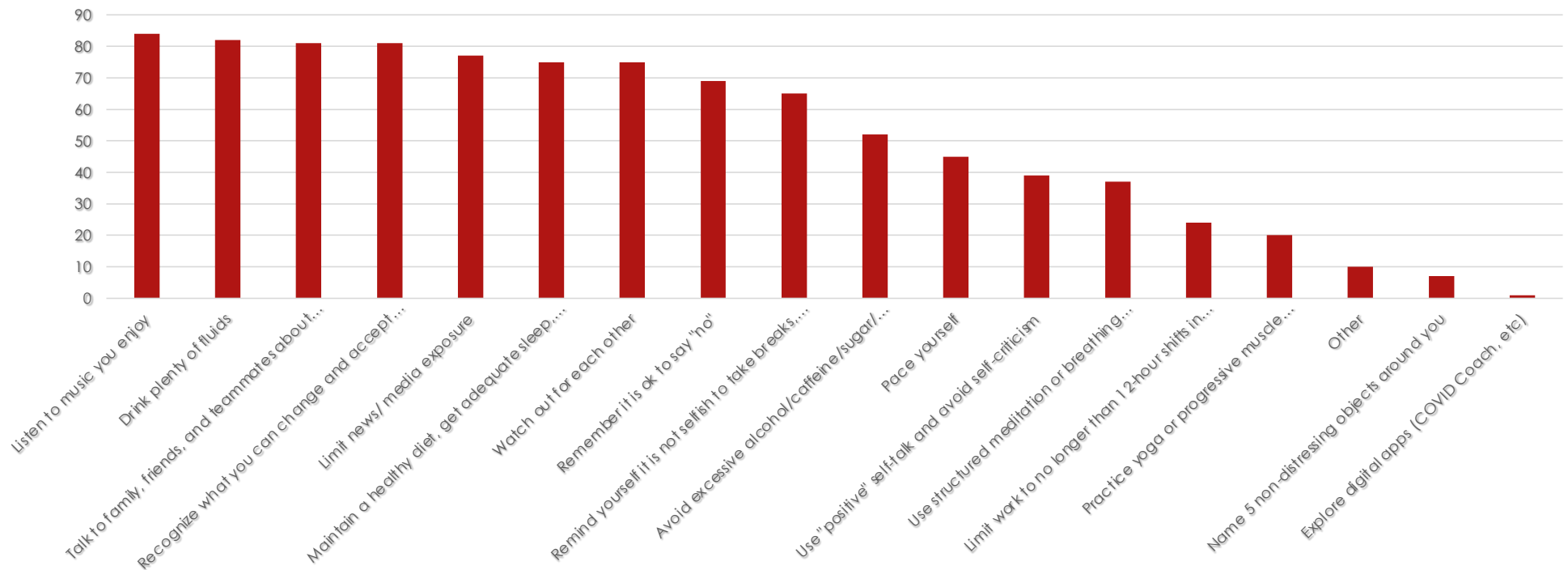
Places: Small places, areas or places where a previous traumatic event has occurred

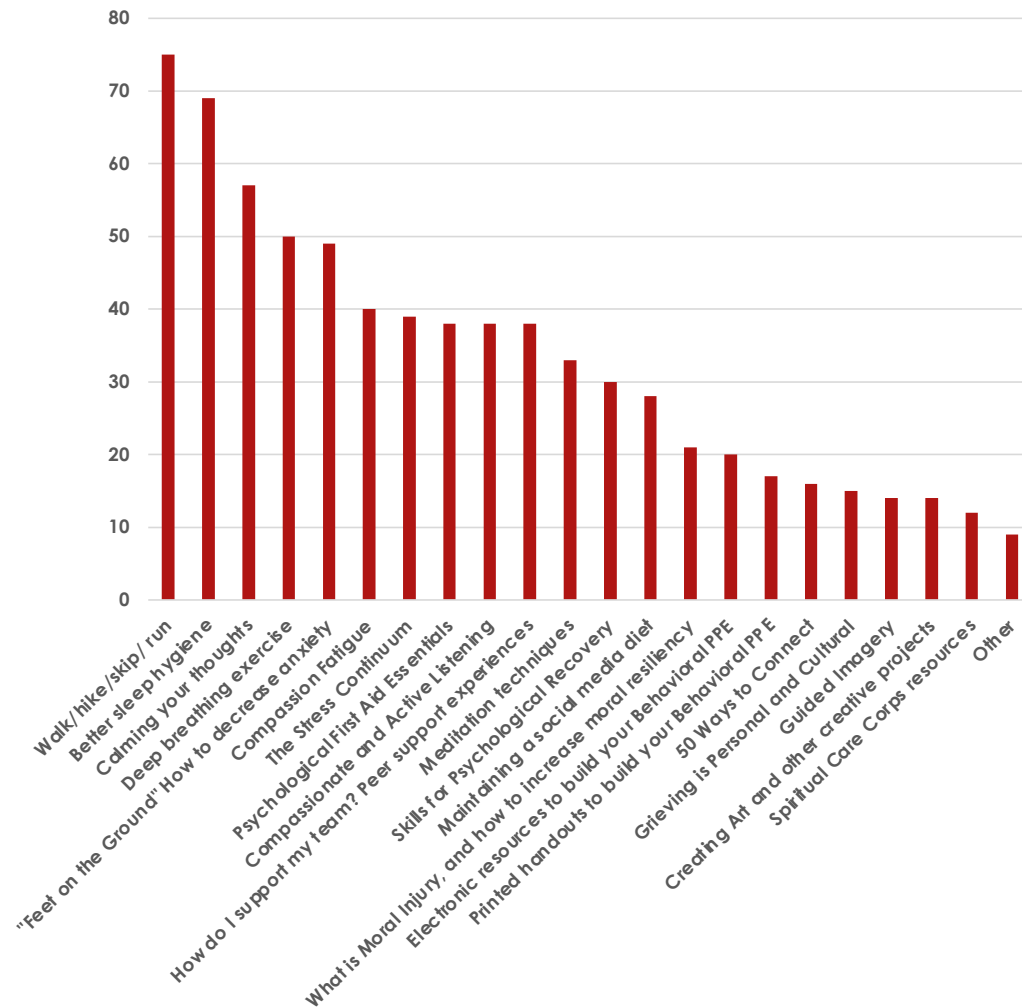
Other: Extreme weather or natural disasters, repeated viewing of news or social media

Q8- Recognizing Signs of Stress- 141 Respondents answered



Q9-Prescribe Protection- Given the problems predicted, and stress symptoms recognized, consider what you can do, think, and avoid, to help you stay fit for duty. Review, adapt, and practice this “prescription for protection” during and after your work assignment/volunteer deployment or any particularly traumatic work shift. 139 Respondents.





Q10- In addition to identifying a buddy, what areas do you feel would be most beneficial for workforce development to build your "Behavioral Health PPE" and support overall responder safety and health? 132 Respondents.

National Center for Disease Control and Prevention- Survey

- ▶ The national CDC launched an online survey in March 2021, inviting any individuals who worked at a state, tribal, local or territorial health department during 2020, through the COVID 19 Pandemic. The survey received 26,174 responses from March 29, 2021- April 16, 2021.
- ▶ The survey results were published by the CDC in the Morbidity and Mortality Weekly Report on July 2, 2021. Slides 16-20 of this presentation contain information retrieved from the survey results article
- ▶ The link to the survey results is as follows:
- ▶ https://www.cdc.gov/mmwr/volumes/70/wr/mm7026e1.htm?s_cid=mm7026e1_w#T2_down
- ▶ Bryant-Genevier, J., Rao, C. Y., Lopes-Cardozo, B., Kone, A., Rose, C., Thomas, I., Orquiola, D., Lynfield, R., Shah, D., Freeman, L., Becker, S., Williams, A., Gould, D. W., Tiesman, H., Lloyd, G., Hill, L., & Byrkit, R. (2021). Symptoms of Depression, Anxiety, Post-Traumatic Stress Disorder, and Suicidal Ideation Among State, Tribal, Local, and Territorial Public Health Workers During the COVID-19 Pandemic — United States, March–April 2021. *MMWR. Morbidity and Mortality Weekly Report*, 70(26). <https://doi.org/10.15585/mmwr.mm7026e1>

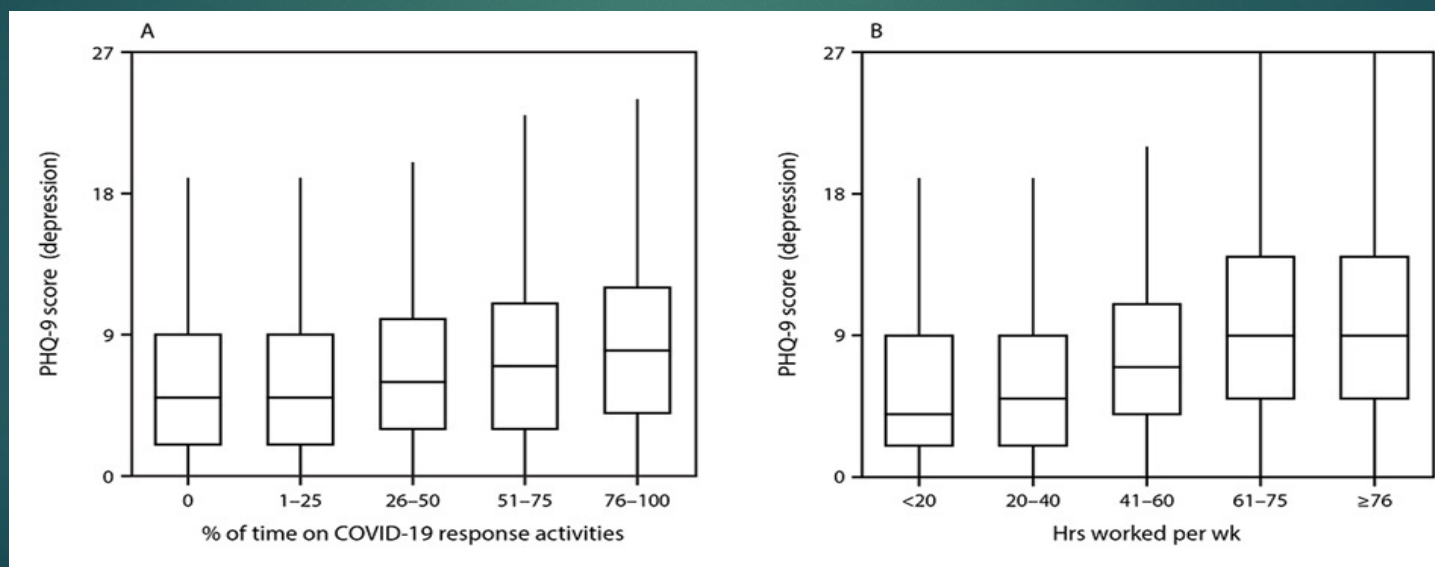
National Center for Disease Control and Prevention-Survey Findings

- ▶ This survey determined that 53% of survey respondents reported experiencing symptoms of at least one mental health concern
- ▶ Most common symptoms or experiences related to depression, anxiety, post-traumatic stress disorder (PTSD) and suicidal ideation

Symptom/ characteristic	Depression	Anxiety	PTSD	Suicidal Ideation
Overall (Based on 26, 174 Respondents)	32%	30.3%	36.8%	8.4%

National Center for Disease Control and Prevention-Survey Findings

- ▶ This survey observed a correlation between hours spent on work activities and the increase in adverse mental health symptoms.
- ▶ This survey utilized scores on the Patient Health Questionnaire, PHQ-9; PHQ-9 screenings were used to determine this correlation.



Retrieved from the CDC WMMR Article: TABLE 2. Traumatic events or stressors reported by 26,174 state, tribal, local, and territorial public health workers and comparisons* of symptoms of post-traumatic stress disorder[†] — United States, March–April 2021

Traumatic event or stressor/Response	No. [§]	PTSD prevalence, %	PTSD PR (95% CI)
Personal-related			
Had COVID-19			
Yes	2,834	36.7	1.03 (0.98–1.09)
Maybe**	3,310	42.4	1.19 (1.14–1.25)
No	16,266	35.6	Ref
Got divorced or separated			
Yes	747	49.6	1.36 (1.27–1.47)
No	22,084	36.3	Ref
Experienced death of a loved one			
Yes	7,580	42.3	1.24 (1.20–1.29)
No	15,403	34.0	Ref
Worried about the health of family and loved ones			
Yes	20,857	39.4	3.11 (2.77–3.48)
No	2,203	12.7	Ref
Felt isolated and alone			
Yes	12,944	49.8	2.49 (2.38–2.60)
No	10,080	20.0	Ref

Work-related

		PTSD prevalence, %	PTSD PR (95% CI)
Felt overwhelmed by workload or family/work balance			
Yes	16,563	45.4	3.10 (2.91–3.30)
No	6,451	14.7	Ref
Felt disconnected from family and friends because of workload			
Yes	14,051	49.0	2.77 (2.64–2.91)
No	8,964	17.7	Ref
Felt inadequately compensated for work			
Yes	13,703	45.2	1.85 (1.78–1.93)
No	9,101	24.4	Ref
Felt unappreciated at work			
Yes	12,362	46.5	1.82 (1.76–1.90)
No	10,551	25.5	Ref
Experienced stigma or discrimination because of work			
Yes	5,962	56.2	1.88 (1.82–1.94)
No	16,944	29.9	Ref
Received job-related threats because of work			
Yes	2,699	61.8	1.85 (1.78–1.92)
No	20,262	33.4	Ref
Felt bullied, threatened, or harassed because of work			
Yes	5,376	59.0	1.97 (1.91–2.03)
No	17,594	30.0	Ref
Interacted often with the public			
Yes	11,143	41.1	1.23 (1.19–1.28)
No	13,318	33.3	Ref
Worried about workplace exposure to COVID-19			
Yes	11,197	42.6	1.36 (1.31–1.41)
No	11,805	31.3	Ref

Maine Disaster Behavioral Health

Responder Safety and Health Survey Discussion

- ▶ Overall responses to survey questions showed trends of possible employee burnout, compassion fatigue and exhaustion from enduring increased job performance demands throughout the course of the COVID 19 pandemic. A large majority of respondents were able to identify things that would be helpful or beneficial to them, but also identify signs and symptoms of stress or mental health issues. There appears to still be some resistance for respondents to utilize self-care, practice behavioral health hygiene and address these unmet needs. There also appears to be a large portion of respondents reporting work-related stressors or grievances, which may impact other areas of physical, emotional and mental well-being.

Survey Comparison



- ▶ These survey results show many similar comparisons to the US Department of Health and Human Services- Centers for Disease Control and Prevention study, published on July 2, 2021 in the Morbidity and Mortality Weekly Report. This study examined mental and behavioral health symptoms present in state, local, tribal and territorial public health workers throughout the COVID 19 pandemic. The results of this study showed a correlation between the percentage of work hours spent on COVID 19 response tasks, hours worked per week, and symptoms of anxiety, depression or other issues. This study reflected the workers' awareness of triggers or stress negatively impacting them but not necessarily enacting steps to address these needs.

Both survey results hold much merit to review possible next steps, in establishing additional training, resource supports and evaluating recovery needs, based on the similarities of both surveys. Both surveys depict workers experiencing negative effects of the pandemic due to increased workload demands, increased challenges in work-life balance and more exposure to potentially triggering or traumatizing incidents.

Post-Survey Response: Next Steps

- ▶ A meeting was held in July 2021 with CDC leadership to discuss National CDC survey results, as well as the Disaster Behavioral Health survey.
- ▶ Reporting out DBH Survey results in summer newsletter
- ▶ Training suggestions to address areas of need from survey results: Compassion Fatigue, Stress Management, Self-Care Strategies. A training focused on these topics will be held twice during the month of October. Additional trainings and resources will follow.