

THE DISRUPTION OF COVID-19 by Liz Scott

COVID-19 has had a dramatic impact on everyone in the world. There have been direct and indirect consequences. COVID-19 has influenced both physical and psychological health in alarming ways. Many studies have started to emerge — all with strong findings and lessons. It has created impacts on individuals, family, friends, work, and society as a whole, most of which have not been improvements. The consequences of restricted health care and canceled surgical interventions will play out for years to come (Asquini et al., 2021; Czeisler et al., 2020; Goulabchand et al., 2020).

One of the most fundamental affected areas is that of mental health. Never before have we seen the unprecedented numbers of individuals suffering from anxiety, depression, lack of coping, adjustment disorders, and other psychological manifestations yet to be described. I believe Tragohaus et al. (2020) said it best “the COVID-19 pandemic has unhinged the lives of employees across the globe.”

The pandemic has highlighted the many positive psychological aspects to work including social interaction, work accomplishments, needs fulfillment provided by work, demonstrating abilities in proximity to an audience, and learning by modeling others in the work environment (Almeda et al., 2021; Anderson et al., 2020; Asquini et al., 2021; Bruine de Bruin, 2021; Chen et al., 2020; Goulabchand et al., 2020; Trougakos et al., 2020). Government interventions forced people to work from home, canceled in-class learning, and struck absolute fear into the hearts and minds of many surrounding social interaction. The pandemic threw people in the

The COVID-19 pandemic has produced significant health effects well beyond the virus itself.

same household together 24/7 creating unfathomable pressures on relationships and the need to balance multiple priorities. It was equally as devastating for those who lived alone, creating isolation and loneliness (Hamouche, 2020). Lack of psychological needs fulfillment hindered the ability of employees to work effectively or engage appropriately to sustain well-being (Bruine de Bruin, 2021; Giorgi et al., 2020; Trougakos et al., 2020). The identified literature reports a negative impact of COVID-19 on individual and collective mental health. Stressors contributing to exacerbations in mental health concerns, include perception of decreased safety, increased threat, higher perceived risk of contagion, infobesity versus the unknown, quarantine and confinement, stigma and social exclusion, as well as financial loss and job insecurity (Hamouche, 2020).

In the realm of mental health, studies were conducted, specifically on anxiety. It was found anxiety impairs critical work (goal progress), home (family engagement), and health (somatic complaints) outcomes due to increased emotion suppression and lack of psychological need fulfillment (Chandola et al., 2020). The increase in anxiety has been documented in at least 29% of adults who, prior to the pandemic, did not have mental health conditions (Chandola et al., 2020). Despite the lifting of some lock-

down conditions, stressors related to loneliness, unemployment, financial problems, and domestic dysfunction continued to drive an increase in mental health conditions (Chandola et al., 2020). The simple emergence from the pandemic will not reverse the increase in mental health conditions; many elements of society will not return to the way it was previous to the pandemic. There are specific individual and organizational factors to consider (Hamouche, 2020).

Individual

Each individual has different reactions and improved mental health does not have one simple answer. There are some strategies noted to visibly reduce psychological symptoms, including optimism, ability to share concerns with family and friends, positive prediction about COVID-19, abstinence from negative news broadcast, daily exercise, and involvement of professional help when needed (Płomecka et al., 2020). Researchers have identified risk factors that increased the risk of psychological symptoms: gender, pre-existing psychiatric condition, and prior exposure to trauma (Carroll et al., 2020).

The COVID-19 pandemic disrupted many aspects of daily life. In a study among Canadian families with young children conducted to identify how health behaviors, level of stress, financial, and food security have been impacted by the pandemic, more than half reported

that their eating and meal routines negatively changed (Płomecka et al., 2020). The most commonly reported changes were eating more snack foods and spending more time cooking.

The pandemic also created some negative health behaviors — notably increased eating and drinking. In a sample of average-weight individuals, 32% gained weight to a point of being overweight and an additional 34% gained weight to a point of obesity. Additionally, screen time increased among 74% of mothers, 61% of fathers, and 87% of children (Płomecka et al., 2020). Physical activity decreased among 59% of mothers, 52% of fathers, and 52% of children. Sedentary leisure behaviors increased, while time spent in physical activity declined particularly during the severe lockdown periods (Płomecka et al., 2020). Anxiety scores were known

to increase during the pandemic and the magnitude of increase was significantly greater in people with obesity. Key factors influencing family stress include balancing work with childcare / homeschooling and financial instability.

The COVID-19 pandemic has produced significant health effects well beyond the virus itself. Government mandates, together with the fear of contracting the virus, have significantly impacted lifestyle behaviors alongside declines in mental health. In the face of "infobesity", it has become vital to limit the amount of time dwelling on the negative news surrounding the pandemic. The importance of communicating with each other, exchanging thoughts, having discussions, recommending stress management techniques, relaxation ideas, and encouragement of exercise, contact with family

or friends, and time management have all been identified as vital to improving health and coping mechanisms (Rastegar Kazerooni et al., 2020). Finding ways to foster social connections is essential. Counselors are taking the place of conversation. The importance of social interaction and the ability to get together and discuss life, in general, has never been more important. Lack of interpersonal communication has been linked to poor physical, emotional, and mental health (Baumeister & Leary, 1995; Bowling, 1995; Galea et al., 2020; Prang et al., 2015). As social beings, we need each other.

Organizational

Organizations have gone through significant transformations. While they have a vital role in assisting with the prevention of mental health concerns, effective strate-

BURNED OUT?

Burnout among nurses and other health-care workers has increased to over 60%. EHN Canada's Return-To-Wellness program can help you get the care you need and return to work.

For more information about our **Return-to-Wellness** program, call **866-404-2309**.



gies are still emerging. Popular discussion indicates the best methods to assist the workforce include having infrastructure ready such as mental health first aid, online tools, tele-counseling, prompt access to care, and peer support networks (Anderson et al., 2020; Carbone, 2020; Ransing et al., 2020).

Optimizing communication and transparency has also been vital throughout the pandemic but organizations are continuing to struggle with the changes the pandemic has brought to culture and individual views of work (Brooks et al., 2020; Carbone, 2020; Giorgi et al., 2020). In the present business situation during the COVID-19 pandemic, employee engagement has become one of the utmost prominent focuses for human resource managers and practitioners.

Organizations are constantly developing innovative and effective means to engage the employees during the pandemic. Engagement activities include: virtual learning and development, online team building activities, webinars with industry experts, online weekly alignment sessions, team meet-ups over video conference for lunch, short online game sessions, virtual challenges and competitions, live sessions for new-skill training, online counseling sessions, recognition and acknowledgment session, webinars dealing with anxiety and stress, providing online guidance for exercise and meditation, social interactions in a virtual office, and many other creative online sessions (Almeda et al., 2021; Bailey & Breslin, 2021; Beninger & Francis, 2021). It is acceptable that resilience and understanding need to continue to build both organizationally and personally (Almeda et al., 2021; Beninger & Francis, 2021).

Self-efficacy, hope, and belief in the future are vital attributes for successfully exiting the COVID pandemic (Almeda et al., 2021; Bandura, 1977; Brouwer et al.,

2015). In building business resilience, it is key to see the business as an integral part of the broader community and society as a whole. The focus on sustainability includes people and the sustainability of work in society to ensure productivity continues to flourish. Some ideas to help drive engagement include visible scorecards, gamification, commonly shared goals, and understanding task interdependencies (Anderson et al., 2020; Bailey & Breslin, 2021; Chanana & Sangeeta, 2021). Team leadership remains a vital component of a trusting environment that cares about employee health and happiness (Bailey & Breslin, 2021; Chanana & Sangeeta, 2021).

COVID-19 has had far-reaching implications on individuals, families, and work environments. The impact on physical and psychological health and its downstream effect on workplaces will be felt for many years. Workplaces and individuals will need to employ strong resilience strategies as we emerge from the pandemic and try to resume some type of normal. The importance of human connection has never been more vital. Much has been learned throughout the pandemic. As successful strategies are documented and shared, they can be replicated to improve outcomes.

Dr. Liz R. Scott, CEO, leads Organizational Solutions Inc., one of the largest disability management firms in Canada. As a disability management consultant, she is recognized for award winning cost reduction results, "best practice" program designs, and the ability to solve a complex variety of client concerns. An educator, speaker, and author, Dr. Scott has a PhD in Psychology, a Master of Engineering, an MBA, a Master of Science, and

Certification in Nursing, Safety & Disability Management. Email: (lscott@orgsoln.com)

References

- Almeda, N., García-Alonso, C., & Salvador-Carulla, L. (2021). Mental health planning at a very early stage of the COVID-19 crisis: A systematic review of online international strategies and recommendations. *BMC Psychiatry*, 21(1), 43. <https://doi.org/10.1186/s12888-020-03015-y>
- Anderson, M., Mckee, M., & Mossialos, E. (2020a). Developing a sustainable exit strategy for COVID-19: Health, economic and public policy implications. *Journal of the Royal Society of Medicine*, 113(5), 176–178. <https://doi.org/10.1177/0141076820925229>
- Asquini, G., Bianchi, A. E., Borromeo, G., Locatelli, M., & Falla, D. (2021). The impact of Covid-19-related distress on general health, oral behaviour, psychosocial features, disability, and pain intensity in a cohort of Italian patients with temporomandibular disorders. *PLOS ONE*, 16(2), e0245999. <https://doi.org/10.1371/journal.pone.0245999>
- Bailey, K., & Breslin, D. (2021). The COVID-19 Pandemic: What can we learn from past research in organizations and management? *International Journal of Management Reviews*, 23(1), 3–6. <https://doi.org/10.1111/ijmr.12237>
- Bandura, A. (1977). Self-efficacy: Toward a unifying theory of behavioral change. *Psychological Review*, 84(2), 191–215. <https://pubmed.ncbi.nlm.nih.gov/847061/>
- Baumeister, R. F., & Leary, M. R. (1995). The need to belong: Desire for interpersonal attachments as a fundamental human motivation. *Psychological Bulletin*, 117(3), 497–529. <https://doi.org/10.1037/0033-2909.117.3.497>

- Beninger, S., & Francis, J. N. P. (2021). Resources for business resilience in a COVID-19 world: A community-centric approach. *Business Horizons*, S0007681321000677. <https://doi.org/10.1016/j.bushor.2021.02.048>
- Bowling, A. (1995). What things are important in people's lives? A survey of the public's judgements to inform scales of health-related quality of life. *Social Science & Medicine*, 41(10), 1447–1462. [https://doi.org/10.1016/0277-9536\(95\)00113-L](https://doi.org/10.1016/0277-9536(95)00113-L)
- Brooks, S. K., Webster, R. K., Smith, L. E., Woodland, L., Wessely, S., Greenberg, N., & Rubin, G. J. (2020). The psychological impact of quarantine and how to reduce it: Rapid review of the evidence. *The Lancet*, 395(10227), 912–920. [https://doi.org/10.1016/S0140-6736\(20\)30460-8](https://doi.org/10.1016/S0140-6736(20)30460-8)
- Brouwer, S., Amick, B. C., Lee, H., Franche, R. L., & Hogg-Johnson, S. (2015). The predictive validity of the return-to-work self-efficacy scale for return-to-work outcomes in claimants with musculoskeletal disorders. *Journal of Occupational Rehabilitation*, 25(4), 725–732. <https://doi.org/10.1007/s10926-015-9580-7>
- Bruine de Bruin, W. (2021). Age Differences in COVID-19 Risk Perceptions and Mental Health: Evidence from a National U.S. Survey Conducted in March 2020. *The Journals of Gerontology: Series B*, 76(2), e24–e29. <https://doi.org/10.1093/geronb/gbaa074>
- Carbone, S. R. (2020). Flattening the curve of mental ill-health: The importance of primary prevention in managing the mental health impacts of COVID-19. *Mental Health & Prevention*, 19, 200185. <https://doi.org/10.1016/j.mhp.2020.200185>
- Carroll, N., Sadowski, A., Laila, A., Hruska, V., Nixon, M., Ma, D., Haines, J., & on behalf of the Guelph Family Health Study. (2020). The Impact of COVID-19 on Health Behavior, Stress, Financial and Food Security among Middle to High Income Canadian Families with Young Children. *Nutrients*, 12(8), 2352. <https://doi.org/10.3390/nu12082352>
- Chanana, N. & Sangeeta. (2021). Employee engagement practices during COVID-19 lockdown. *Journal of Public Affairs*, 21(4). <https://doi.org/10.1002/pa.2508>
- Chandola, T., Kumari, M., Booker, C. L., & Benzeval, M. (2020). The mental health impact of COVID-19 and lockdown-related stressors among adults in the UK. *Psychological Medicine*, 1–10. <https://doi.org/10.1017/S0033291720005048>
- Chen, S., Jones, P. B., Underwood, B. R., Moore, A., Bullmore, E. T., Banerjee, S., Osimo, E. F., Deakin, J. B., Hatfield, C. F., Thompson, F. J., Artingstall, J. D., Slann, M. P., Lewis, J. R., & Cardinal, R. N. (2020). The early impact of COVID-19 on mental health and community physical health services and their patients' mortality in Cambridgeshire and Peterborough, UK. *Journal of Psychiatric Research*, 131, 244–254. <https://doi.org/10.1016/j.jpsychires.2020.09.020>
- Czeisler, M. É., Marynak, K., Clarke, K. E. N., Salah, Z., Shakya, I., Thierry, J. M., Ali, N., McMillan, H., Wiley, J. F., Weaver, M. D., Czeisler, C. A., Rajaratnam, S. M. W., & Howard, M. E. (2020). Delay or Avoidance of Medical Care Because of COVID-19-Related Concerns—United States, June 2020. *MMWR. Morbidity and Mortality Weekly Report*, 69(36), 1250–1257. <https://doi.org/10.15585/mmwr.mm6936a4>
- Galea, S., Merchant, R. M., & Lurie, N. (2020). The Mental Health Consequences of COVID-19 and Physical Distancing: The Need for Prevention and Early Intervention. *JAMA Internal Medicine*, 180(6), 817. <https://doi.org/10.1001/jamainternmed.2020.1562>
- Giorgi, G., Lecca, L. I., Alessio, F., Finstad, G. L., Bondanini, G., Lulli, L. G., Arcangeli, G., & Mucci, N. (2020a). COVID-19-Related Mental Health Effects in the Workplace: A Narrative Review. *International Journal of Environmental Research and Public Health*, 17(21), 7857. <https://doi.org/10.3390/ijerph17217857>
- Goulabchand, R., Claret, P.-G., & Lattuca, B. (2020). What if the worst consequences of COVID-19 concerned non-COVID patients? *Journal of Infection and Public Health*, 13(9), 1237–1239. <https://pubmed.ncbi.nlm.nih.gov/32576501/>
- Hamouche, S. (2020). COVID-19 and employees' mental health: Stressors, moderators, and agenda for organizational actions. *Emerald Open Research*, 2, 15. <https://doi.org/10.35241/emeraldopenres.13550.1>
- Łłomecka, M. B., Gobbi, S., Neckels, R., Radziński, P., Skórko, B., Lazzeri, S., Almazidou, K., Dedić, A., Bakalović, A., Hrustić, L., Ashraf, Z., Es hagh, S., Rodríguez-Pino, L., Waller, V., Jabeen, H., Alp, A. B., Behnam, M. A., Shibli, D., Barańczuk-Turska, Z., ... Jawaid, A. (2020). Mental Health Impact of COVID-19: A global study of risk and resilience factors [Preprint]. Public and Global Health. <https://doi.org/10.1101/2020.05.05.20092023>
- Prang, K.-H., Newnam, S., & Berecki-Gisolf, J. (2015). The impact of family and work-related social support on musculoskeletal injury outcomes: A systematic review. *Journal of Occupational Rehabilitation*, 25(1), 207–219. <https://doi.org/10.1007/s10926-014-9523-8>
- Ransing, R., Adiukwu, F., Pereira-Sanchez, V., Ramalho, R., Orsolini, L., Teixeira, A. L. S., Gonzalez-Diaz, J. M., Pinto da Costa, M., Soler-Vidal, J., Bytyçi, D. G., El Hayek, S., Larnaout, A., Shalbafan, M., Syarif, Z., Nofal, M., & Kundadak, G. K. (2020). Mental Health Interventions during the COVID-19 Pandemic: A Conceptual Framework by Early Career Psychiatrists. *Asian Journal of Psychiatry*, 51, 102085. <https://doi.org/10.1016/j.ajp.2020.102085>
- Rastegar Kazerooni, A., Amini, M., Tabari, P., & Moosavi, M. (2020). Peer mentoring for medical students during the COVID-19 pandemic via a social media platform. *Medical Education*, 54(8), 762–763. <https://doi.org/10.1111/medu.14206>
- Trougakos, J. P., Chawla, N., & McCarthy, J. M. (2020). Working in a pandemic: Exploring the impact of COVID-19 health anxiety on work, family, and health outcomes. *Journal of Applied Psychology*, 105(11), 1234–1245. <https://doi.org/10.1037/apl0000739>