RECOMMENDATIONS ON PREVENTION OF PSYCHOLOGICAL DISTRESS AMONG HEALTHCARE WORKERS DURING THE COVID-19 PANDEMIC

GENERAL REMARKS

The COVID-19 disease is a new phenomenon that we hear every day about in the media, but still don’t know much about it. Having stormed into our lives in December 2019, COVID-19 has changed them dramatically in just a few months. Such a rapid transition from the COVID-19 epidemic in only one, albeit the most populated, country to the level of a pandemic declared by WHO has created a challenge for the entire health care system across the globe, and, above all, for the professionalism of doctors and medical workers. All people are looking at you now, with great hope and appreciation for what you are doing for all of us. Probably, no one works as much, as hard and as selflessly as you do now.

Working in such difficult conditions is always fraught with consequences, including primarily psychoemotional fatigue and the emergence of negative emotional states. But you should know that, in most cases, all changes in your emotional state that you may be experiencing at the moment can reasonably be considered "a normal reaction to an extreme situation". It is absolutely normal and natural to experience emotional pressure when continuing your professional activity and saving people’s lives in conditions of such stress and pressure, unprecedented in modern history. Your feelings, including fear, anxiety, depression and, sometimes, a sense of helplessness, are not a sign of human weakness or an evidence that you personally do not handle your work.

Please treat yourself with care and responsibility during this period, take note of our recommendations and try to use them.
Any stressful situation, especially of such intensity as the current COVID-19 pandemic, inevitably leads to the destruction of the routine way of life and to abandoning many habitual patterns of behavior in the workplace and at home. The first thing to do in this situation is to try and bring at least some stability into your life. Even with many hours of intensive work, try to to find opportunities for rest. Take breaks from work. Try to get enough sleep and eat normally between your shifts and keep in touch with your loved ones (family and friends). If direct communication with them is not an option, use online communication.

Today, it has become clear to everyone that the current situation will not be easy and fleeting. Therefore, it is necessary to be prepared for long and painstaking work. Try to distribute your resources wisely. Make sure to find some time for exercise, especially for those that relieve muscle fatigue, such as stretching, Pilates, and yoga.

Try to avoid unhealthy ways of coping with accumulated fatigue, reduced performance, and mental tension such as smoking, alcohol and/or psychoactive substances. As healthcare professionals, you are well aware that these can compromise your mental and physical health in the long run.

Try to analyze stressful situations you experienced before and remember what helped you cope with them and improve your emotional state. Using the same methods may prove effective in the current situation. If this doesn’t help, remember situations from your recent experience (during the COVID-19 pandemic) that you personally reacted mostly negatively to and try to create two or three scenarios of an effective response to them.

Approach your colleagues for professional support. The COVID-19 pandemic is a situation of high uncertainty and challenge for all people, but first and foremost for you, the medical professionals. You are faced with the fact that the usual treatment regimens for patients with pneumonia often fail. Please understand and accept that the experience of separate failures does not in any way indicate your professional inefficiency. Not only you personally, but the entire medical community, as well as the whole world, are faced with a new disease, treatment strategies for which are still being developed and therefore may not always bring the expected result. Discussing difficult situations with your colleagues, sharing and analyzing new clinical experience is a good way to relieve emotional tension and increase self-confidence, as well as to expand your knowledge about COVID-19. Doing this, you will learn that you are not alone in your feelings and that your colleagues are facing the same problems. Although be prepared that you may encounter extreme points of view among your colleagues that do not coincide with your conclusions or professional stereotypes that existed before.
Today, there are no ready-made and unambiguous solutions to many of the problems caused by the pandemic. Meanwhile, the work you are doing based on your knowledge, experience and dedication, is the "island of safety" that creates trust in the people you are saving. For you personally, the "island of safety" lies in strict adherence to antiepidemic norms, use of personal protective equipment, and compliance with physical distancing recommendations outside of work. It works!

6. If you are afraid of infecting your family members when returning home, it makes sense to live separately from them for some time, if possible (for example, in a hostel, hotel, or other arrangement offered in some cases by a hospital). Try to consider this compulsory "isolation" from your family as a small unscheduled business trip. Such working conditions will reduce possible risks and concerns for your family members health.

7. Do not turn down the opportunity to participate in psychological debriefing groups after work hours or to receive other forms of psychological support, individual or in a group. Contacting a psychologist, participating in psychological unloading and support groups or calling a helpline can not and will not be regarded as an indicator of your weakness or professional failure. Emerging publications on the psychological impact of COVID-19 on healthcare workers provide evidence of the effectiveness of psychological support received promptly.

8. If you work with COVID-19 patients in the "red zone", you'll have to accept that you become not only a doctor for your patients, but also, in part, a psychologist who has to be ready to provide support. It is clear that the main reason for this "doubling" of roles is the restricted access to the "red zone" for psychiatrists, psychotherapists and clinical psychologists. It is also obvious that due to complex work procedures, heavy workloads, and lack of necessary training in psychiatry and clinical psychology you may not always be able to alleviate the psychological distress of patients with COVID-19/coronavirus pneumonia. But you can’t ignore this aspect of patient care, just as you can’t avoid communicating with patients for the fear of not being able to answer the questions they ask. If conditions allow, you will have to spend a little more time talking to COVID-19 patients than you normally would in other circumstances. It will take some additional time to listen to their concerns and analyze their current risk factors for emotional maladjustment. At the same time, it is necessary to take into account the age-related psychological characteristics of patients. For example, when your patient is an adolescent, you should avoid didacticism and excessive authoritarianism; it is better to try to be friendly and to understand the mood of the teenager in order to win his trust and willingness to cooperate.
When dealing with elderly patients, keep in mind that they perceive you as an expert in all areas of medicine and can call you for any problems that arise, expecting that you will respond and certainly help them. Special attention should be paid to the value of life and health of elderly patients in order to reduce their level of anxiety and fear. You may feel that you have difficulties communicating with patients, that you are avoiding talking to them, and that it is hard for you to provide them with psychological support. In this case, you should try to admit that communicating with patients is a challenge for you and to discuss this issue with the psychologist of your department or with other specialists.

9. While in a ward, make sure to talk to patients, try to answer their many questions. It could be easier for you and your patient to start and maintain a conversation if you have a badge on your suit with your name, middle name, and a photo. Treat patients' questions with understanding: they are dealing with intense fear because of the obvious vital danger of COVID-19 and because they are worried about their loved ones. Perhaps someone has already experienced severe loss during the pandemic. Support them and try to persuade them to seek psychological assistance directly from the "red zone" by phone or online, if necessary.

10. If you find yourself in a position where you have to deliver difficult news about a patient's condition or death to the relatives, you need to structure what you have to say, give concrete information, and express sympathy. You need to make sure that you have complete and reliable information about the patient's condition or causes of death. If you feel that it is difficult for you to communicate information about the patient's condition or death to relatives, contact a psychologist.

11. You probably know that medical professions are among the most prone to burnout ones. While working during the COVID-19 pandemic, you may notice symptoms of so-called "burnout syndrome", which is a combination of emotional exhaustion, depersonalization, and perceived decline in your professional achievements.

The emotional exhaustion can be combined with physical fatigue. A person begins to feel depressed, lethargic, or irritated even from thinking about work; what used to bring joy, doesn't anymore; the intensity of social interactions decreases; resting brings only a short-term relief.

Depersonalization refers to the tendency of a healthcare worker to treat patients and even colleagues impersonally and with an indifferent, callous and inhumane, sometimes cynical attitude to all those in need of medical care.

The most striking manifestation of altered perception of your professional achievements is the tendency to evaluate your behavior and your work with patients negatively. "Burned out" professionals often believe that their goals were not achieved, which leads to a decrease in professional self-respect and self-esteem.

If you detect the symptoms of professional burnout during the COVID-19 pandemic, it is advisable to seek psychological help.
Try to master and use at least some of the techniques of so-called "positive thinking": try to maintain a sense of pride and self-respect for the fact that you are a professional who is doing the most important thing right now. Be proud of how you are dealing with all your responsibilities. Know that outside your hospital there are more and more people who value your work, put a lot of hope in you, worry about you, and try to help you. All over the world, the pandemic has changed the attitude of people towards your profession, as you are constantly on the front line. However, it is very important to accept the limits of your professional capabilities: no one, no specialist can constantly work miracles. And if you have done all possible, but still failed to achieve what you aimed at, remember that not everything depends on the medical worker.

It is important for you to learn how to delegate responsibility and share it with your colleagues. Do not assume that no one but you can do the job! Be aware of this and try to learn to relax by mastering the techniques of self-regulation. If possible, do breathing exercises, neuromuscular relaxation, auto-training, etc., especially if these are organized at your place of work; or use video materials.

Despite your fatigue, try to remain "open" to new experiences: take part in webinars and online conferences, for example, on COVID-19. An exchange of views with colleagues working in other hospitals can be very useful for you.

Don't limit yourself by reading only professional literature and news. Find time and take advantage of the Internet: watch a movie, listen to music, or join in a virtual museum tour. Today, there are an abundance of such possibilities, and many of them are free. This switch will help you restore your overall emotional state and allow you to feel some stability amidst unpredictable and hard work.

If you have a hobby that brings you joy, try not to give it up at the moment. Any hobby is an emotional resource, a way and an environment for recuperation and psychological self-rehabilitation.

Develop a willingness to seek professional psychological help without feeling embarrassed. Know that psychologists are ready to provide it to you.

Remember that maintaining your mental health and psychological well-being during COVID-19 pandemic is extremely important for maintaining your physical health.

WE WISH GOOD HEALTH, STRENGTH AND PATIENCE TO YOU, DEAR DOCTORS AND ALL MEDICAL PROFESSIONALS! TAKE CARE OF YOURSELF!
These recommendations are compiled under the editorship of Chief Consulting Specialist in Medical Psychology of the Ministry of Health of Russian Federation, President of the Russian Psychological Society, and Dean of the Faculty of Psychology, Lomonosov Moscow State University, President of the Russian Academy of Education, Full Member of the Russian Academy of Education, Doctor of Psychological Sciences Zinchenko Y.P.

The recommendations were prepared by:

- **Tkhostov A.S.** — Doctor in Psychology, Head of the Neuro- and pathopsychology Chair of the Faculty of Psychology, Lomonosov Moscow State University;
- **Barabantskikova V.V.** — Doctor in Psychology, Assistant Professor, Head of the "Psychology of Labour" laboratory Faculty of Psychology, Lomonosov Moscow State University; Head of the Psychological Service of the Armed Forces of the Russian Federation; corresponding member of the Russian Academy of Education;
- **Belousov V.V.** — Doctor in Medical Science, Director of the Federal Center of Cerebrovascular Pathology and Stroke of the FMBA of Russia;
- **Berebin M.A.** — Ph.D. in Medical Science, Assistant Professor, Head of the Clinical Psychology Chair of the South Ural State University; Chief Consulting Specialist in Medical Psychology for the Ural Federal District;
- **Chaigerova L.A.** — Ph.D. in Psychology, Associate Professor at the Psychological Methodology Chair, Faculty of Psychology, Lomonosov Moscow State University;
- **Dolgikh A.G.** — Ph.D. in Psychology, Associate Professor at the Psychology of Education and Pedagogy Chair, Faculty of Psychology, Lomonosov Moscow State University;
- **Guldan V.V.** — Doctor in Psychology, Head of the Psychological Laboratory of the Moscow Regional Center for Social and Forensic Psychiatry at the Central Moscow Regional Clinical Psychiatric Hospital; Chief Consulting Specialist in Medical Psychology for the Ministry of Health of the Moscow region;
- **Khain A.E.** — Ph.D. in Psychology, Head of the Clinical Psychology Department of the Dmitry Rogachev National Research Center of Pediatric Hematology, Oncology and Immunology;
- **Kiseleva M.G.** — Doctor in Psychology, Head of the Pedagogy and Medical Psychology Chair of the T.M. Sechenov First Moscow State Medical University;
- **Klipinina N.V.** — Medical Psychologist of the Dmitry Rogachev National Research Center of Pediatric Hematology, Oncology and Immunology;
- **Kovyazina M.S.** — Doctor in Psychology, Professor at the Neuro- and Pathopsychology Chair, Faculty of Psychology, Lomonosov Moscow State University; Corresponding Member of the Russian Academy of Education;
- **Perchichko E.I.** — Doctor in Psychology, Assistant Professor at the Neuro- and Pathopsychology Chair, Faculty of Psychology, Lomonosov Moscow State University;
- **Salagay O.O.** — Ph.D. in Medical Science, Deputy Minister of Health of the Russian Federation;
- **Tairova R.T.** — Ph.D. in Medical Science, Chief Physician of the Federal Center of Cerebrovascular Pathology and Stroke of the FMBA of Russia;
- **Varako N.A.** — Ph.D. in Psychology, Senior Research, Faculty of Psychology, Lomonosov Moscow State University.