



Mental Wellness – An Informative Discussion with Practical Insights as the Pandemic Continues

Clive Bennett – Panel Chair (Portugal)

- Albert Banta (USA)
- Laura Leka (USA)
- Daniela Boria (Argentina)
- Steven Pearce (UK)
- Jenn Barnett (UK)

Please note: This webinar will be recorded and made available @ www.ifac.org

June 8 2021 07:00 – 09:00 New York / 12:00 – 14:00 London / 16:30 – 18:30 Mumbai / 20:00 – 22:00 Tokyo

Important Notice

The information provided in the webinar is for general informational purposes only and does not constitute or is a substitute for professional assistance or consultation with a qualified, licensed mental health professional.

If you're concerned that you or someone you know may be experiencing mental health symptoms or exhibiting any warning signs, please seek professional assistance as soon as possible.

Only a qualified, licensed mental health professional can diagnose and treat mental health symptoms and conditions.

Aviso Importante

La información provista en el webinar es solamente información general, no constituye ni sustituye la atención profesional o consulta con personal calificado y/o licenciado en el cuidado de la Salud Mental.

Si consideras que tu o alguien que conozcas puede estar necesitando ayuda profesional o exhibiendo alguna señal preocupante, por favor busca la asistencia de un profesional lo antes posible.

Solamente una persona calificada y/o licenciada en el cuidado de la Salud Mental puede diagnosticar y tratar este tipo de situaciones.

Avertissement Important

Les informations fournies dans le cadre de ce webinaire sont uniquement destinées à des fins d'information générale et ne constituent pas ni ne remplacent une assistance ou une consultation auprès d'un professionnel de la santé mentale qualifié et diplômé.

Si vous craignez que vous ou une personne de votre entourage ne présente des symptômes liés à la santé mentale ou ne montre des signes avant-coureurs, nous vous invitons à consulter un professionnel dès que possible.

Seul un professionnel de la santé mentale qualifié et diplômé peut établir un diagnostic et traiter les symptômes et les troubles liés à la santé mentale.

Objectives

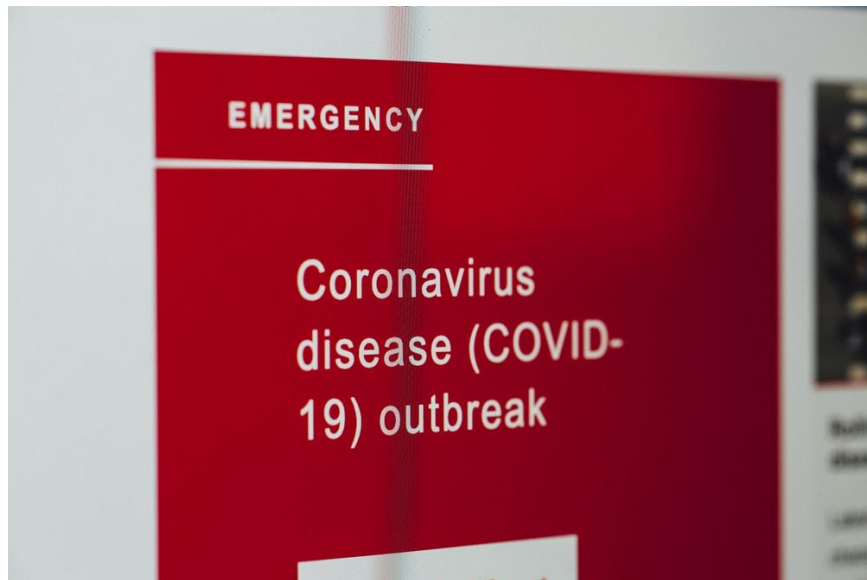
- Further understand the mental wellness concerns associated with the pandemic
- Understand the clinical research behind those concerns
- Further empathize with the issues many have and continue to deal with
- Hear practical insights in support of mental wellness particularly when trying to manage mental wellness alongside the challenges of work in our life



Panelists

- **Albert Banta Ph.D** – Clinical Psychologist
- **Laura Leka** – Principal, International Federation of Accountants
- **Daniela Boria** - Comunicación Institucional, SMS Latinoamérica
- **Steven Pearce** – Managing Director, Steven Pearce Associates
- **Jenn Barnett** – Director. Head of Inclusion, Diversity and Wellbeing at Grant Thornton UK LLP

Context



Since March 2020 – still all unbelievable

Global humanitarian crisis – (WHO) June 7, 13:28 CEST

- 172,956,039 confirmed cases
- 3,726,466 deaths

Multiple dimensions of loss – some beyond measure

Seismic change – every facet of how we think & operate

Fractured social environments

Context

Isolation, fear, hopelessness, physical and mental exhaustion – so many individual experiences

While some countries continue to experience despair, some now see optimism and hope



Global State of Mental Health

- Much discussion regarding mental wellness at the moment particularly as it relates to the pandemic – is it founded?
- What is the clinical research telling us about the global state of mental health?



Panelists

Albert Banta Ph.D
Clinical Psychologist
(USA)

Global State of Mental Health

The Coming Tsunami of Grief

“It is important that the burden of bereavement, and its potential mental and physical health consequences, is factored into discussions of the public health challenge facing all nations.”



The COVID-19 Pandemic

- The COVID-19 Pandemic has had a **profound negative impact** on **mental health**
- Negative impacts are due to many factors, including **disruption in normal routines** and structures, infection-related **fears** and **uncertainty**, **economic instability** and stress, increased **social isolation**, **bereavement** with normal grieving, **digital fatigue** and burnout, and the **loss of normal coping activities** and supports
- Studies have shown **dramatic increases** in the prevalence of **depression (4x)**, **anxiety (3x)**, and **other mental health conditions** (CDC, June 2020)

Resilience

- Competence in the face of adversity
- Capacity for recovery
- Thrive within stress
- Tied to self-efficacy
- Transcends coping

Coronavirus Anxiety Scale (CAS)

- 775 diverse US adults assessed from 11-13 March 2020
- 20 candidate items from anxiety literature in cognitive, behavioral, emotional and physiological domains
- Rated on Likert scale from 0 (not at all) to 4 (nearly every day)
- Results subjected to PCA and CFA, validity tests and ROC analysis
- Final scale correlated with range of symptoms and attitudinal self-reports



Sherman A. Lee, Ph.D.
Christopher Newport University

Death Studies, 2020

Coronavirus Anxiety Scale (CAS)

How often have experienced the following activities over the last two weeks?	Not at all	Rare, less than a day or 2	Several days	More than 7 days	Nearly every day
1. I felt dizzy, lightheaded, or faint, when I read or listened to news about the coronavirus.	0	1	2	3	4
2. I had trouble falling or staying asleep because I was thinking about the coronavirus.	0	1	2	3	4
3. I felt paralyzed or frozen when I thought about or was exposed to information about the coronavirus.	0	1	2	3	4
4. I lost interest in eating when I thought about or was exposed to information about the coronavirus.	0	1	2	3	4
5. I felt nauseous or had stomach problems when I thought about or was exposed to information about the coronavirus.	0	1	2	3	4
Column Totals	_____ +	_____ +	_____ +	_____ +	_____ +

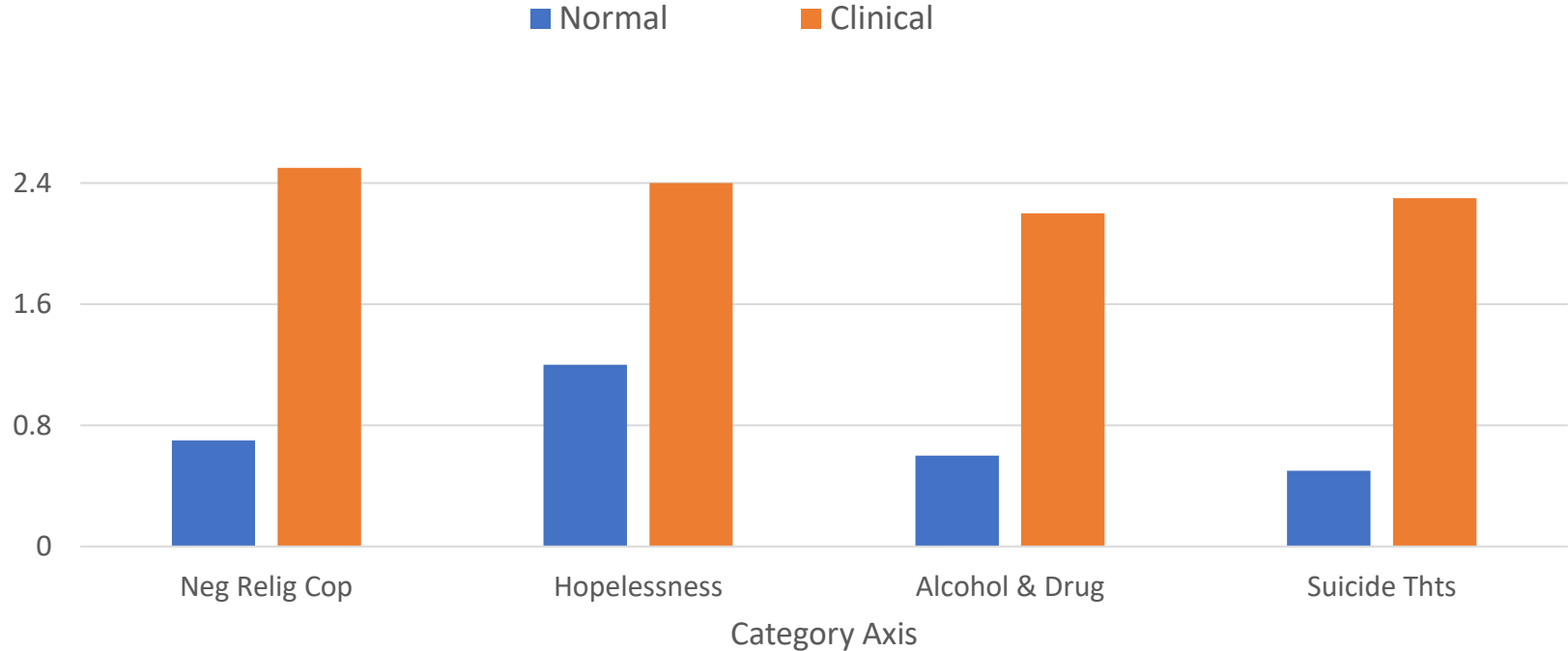


Sherman A. Lee, Ph.D.
Christopher Newport University

Death Studies, 2020

A CAS score ≥ 9 optimally classified adults as having (90%) sensitivity or not having (85% specificity) dysfunctional levels of anxiety (Youdon's index of 75) with a false positive rate of 15%

Symptoms Associated with Coronavirus Anxiety



CAS correlated .86 with Impairment in Work and Social Adjustment



*What
Have You
Lost?*

Modeling Pandemic Depression & Anxiety

Milman, Lee & Neimeyer, *Journal of Affective Disorders Reports*



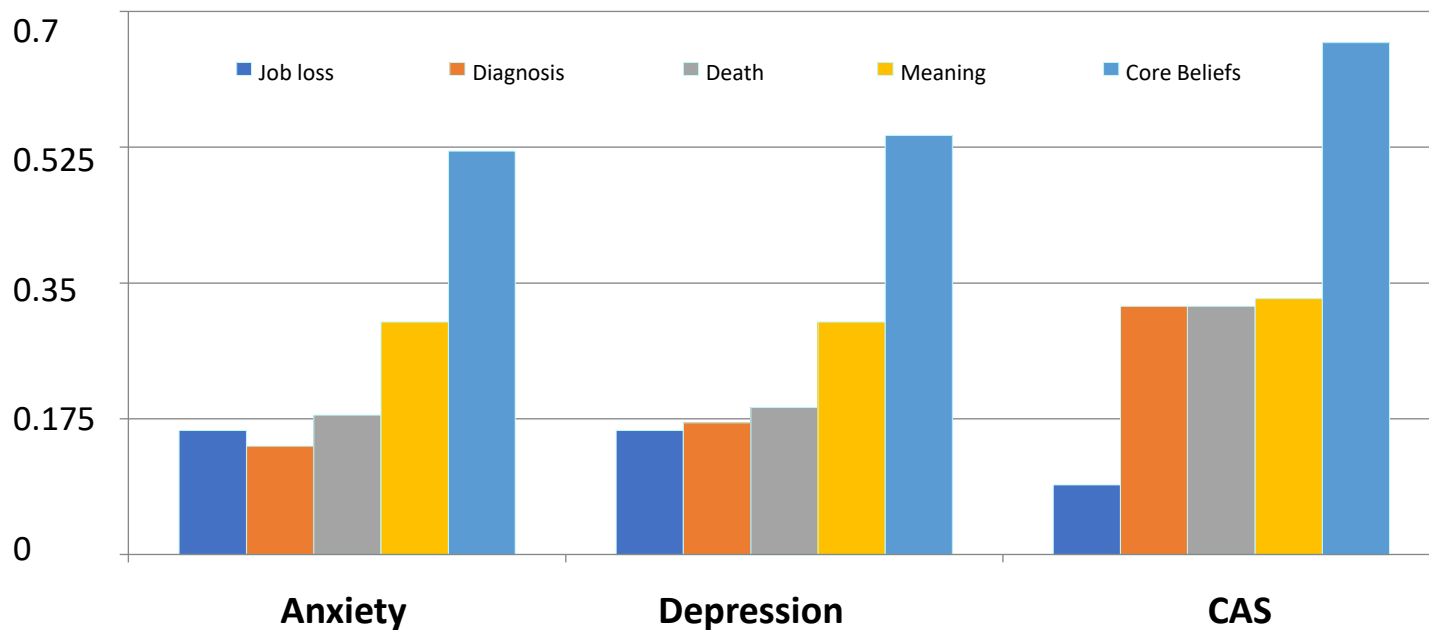
- Assessed background characteristics (e.g. gender, ethnicity), direct COVID stressors (diagnosis, death) and indirect COVID stressors (unemployment, child care loss) as risk factors in 2380 adults, along with depression, general anxiety and CA
- Measured disruption of core beliefs (CBI) and meaning making about pandemic (ISLES) as mediators



Jane Milman, PhD
Medical
University of
South Carolina
St. Edwards
University,
Austin Texas

Modeling Pandemic Depression & Anxiety

Milman, Lee & Neimeyer, *Journal of Affective Disorders Reports*



Empathy and Authenticity

- Understanding the clinical research provides important 'data' from which to plan options for next steps
- Behind 'data' are 'human beings' – each managing individual mental wellness challenges
- To increase effectiveness in addressing challenges, empathy and authenticity with ourselves and each other will be key – next speakers we hope will give voice to feelings/experiences many of us continue to manage



Panelists

Laura Leka

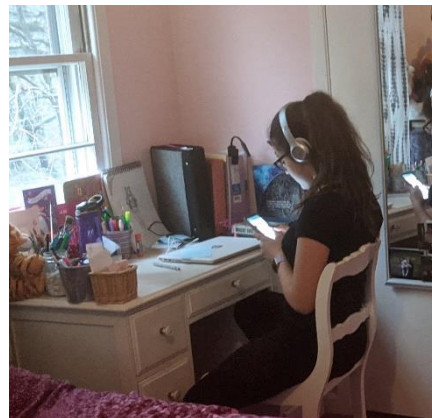
Principal, International Federation of Accountants
(USA)

Working Parent in the Pandemic

Working Parent in the Pandemic...

The reality

- Needs of children come first
- Balancing home and work demands
- Too much screen time for all
- Managing continuous uncertainties
- Trying to focus on the positives



Panelists

Daniela Boria

Comunicación Institucional, SMS Latinoamérica
(Argentina)

A Millennial/Gen Zer

A Millennial/Gen Zer

- Latin America
 - Despair and frustration (vaccines seem so far away)
 - So many triggers for stress
- Loneliness – family, professional, educational & social isolation



A Millennial/Gen Zer

- Grieving loss – eg: educational and professional opportunities/experiences, personal relationships, a year of our youth
- Confusion – ‘pandemic or mental health isn’t a big deal – it does not affect us’
- Running out of patience – ‘I’ve had enough’

Practical Insights

- Many issues and experiences to consider re Mental Wellness
- Following speakers give voice to insights that can assist both professionally and personally

Panelists

Albert Banta Ph.D
Clinical Psychologist
(USA)

Practical Insights Supporting Improved Mental Wellness



Intentional Actions

- Get up, get out, and get moving!
- Increase positive and pleasant activities
- Reach out to others – stay connected
- Try to do at least one positive thing for yourself a day
- Indulge in simple pleasures (e.g. favorite coffee a song you love)
- Do something that makes you laugh or brings some lightness / positivity
- Practice coping skills (e.g. deep breathing, mindfulness)
 - There are a lot of APPS that offer coping skills * (e.g. Calm, Headspace, Breathe 2 Relax) and other media that offer positive or relaxing content (e.g. YouTube “pretty pictures with music”)
- Take a 5-Minute Pause to breathe and reset





From Assessment to Intervention

Target physiological arousal, emotion regulation, social isolation through:

- Progressive muscle relaxation
- Controlled breathing, yoga
- Mindfulness Based Stress Reduction
- “Time out” from exposure
- Physical exercise, Tai Qi
- Sleep hygiene
- Building virtual “communities of care”
- Somatic and art therapy approaches as possible bridge to symbolizing and verbalizing the unspeakable

General Support

- **Going to therapy** or seeking out mental health treatment does not have to mean that something is “wrong” or that a mental health condition is present
- Psychotherapy has the power to **greatly improve your life** and often results in increased self-awareness, acceptance, and personal growth
- Psychotherapy offers you **protected time to learn about and work on yourself** in order to achieve greater satisfaction and happiness
- While therapy is useful when something is wrong, it can also provide tremendous benefit in managing everyday challenges and stressors & making **overall improvements in your life!**



The Power of Talk

TALKING HELPS

- Sharing thoughts and feelings with a partner, trusted friend or other support
- Working through your thoughts / feelings with a mental health professional
- Having a safe space to sit with, reflect on, and work through problems, thoughts, feelings, or behavioral challenges and goals

Supporting Others

- If you see something, say something
- Ask someone if they are okay or need to talk more than once
- Share your concern and sympathize with their struggles
- Offer support and let them know you are there if or when they would like to talk
- Listen without judgment or trying to “fix” the problem
- Share resources or information on where to find help
- Check In
- Mental wellness resources at end of this presentation – presentation posted on IFAC website post webinar



Panelists

Steven Pearce

Managing Director, Steven Pearce Associates
(UK)

Resilience for Leaders, Their Teams and You

THE
PROBLEM:

SMART
PEOPLE SELF-
SABOTAGE!



CULTIVATE A RESILIENT MINDSET

- Recognize progress as well as results
- Push back on demands – don't immediately commit
- Realize that excellence is achievable (though not easy!). Perfection is not.



FIND TIME FOR REST
& RECOVERY

No more than 90 minutes
in front of the screen
without taking a break

Block out time for
exercise in your diary

Always on = always wrong

AS A LEADER IN YOUR
FIRM, MODEL
EFFECTIVE
BEHAVIORS

Empathize

Help people visualize a
better future

Don't send late night emails
requiring an immediate
response!

Panelists

Jenn Barnett

Director. Head of Inclusion, Diversity and Wellbeing at
Grant Thornton UK LLP
(UK)

A Network's Experience

A Network's Experience



Research by Grant Thornton

Actions being taken – SMPs/SMEs can do too

Building mental wellness into how we work

Bringing clients along the journey

Vision of the workplace in 1, 2, 5 years time?

Sharing practical insights...

Open to the Floor

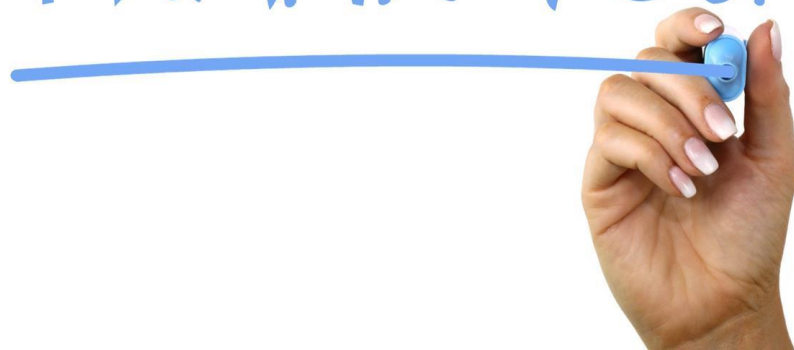
- Reactions?
- What have you implemented in your firms or in your lives?
- Questions to panelists
- Use the 'Q&A' function



Closing remarks...

- Thank you panelists
- Thank you for attending
- Keep the conversation going
- Look after yourself & each other
- Following slides have resources
 - this slide pack will be posted on the IFAC website

THANK YOU





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www.ifac.org

Referral Networks & Directories

NAMI Helpline

800.950.NAMI (6264)

<https://www.nami.org/help>

Referral network and other support and resources

SAMHSA National Helpline (24/7) Treatment Referral and Information Service *(English & Spanish)*

1.800.662.HELP (4357)

<https://www.samhsa.gov/find-help/national-helpline> www.fndtreatment.samhsa.gov

SAMHSA Mental Health Services Locator

www.mentalhealth.samhsa.gov/databases/

SAMHSA Substance Abuse Facility Locator

<http://dasis3.samhsa.gov>

SAMHSA Opioid Treatment Directory

<https://dpt2.samhsa.gov/treatment/>

Substance Abuse Support Groups

SMART RECOVERY Free Online Groups

<https://meetings.ringcentral.com/j/6651939516>

Virtual / Online AA Meetings

<https://aa-intergroup.org/oiaa/meetings/>

Al-Anon Family Groups

Alateen

Adult Children of Alcoholics

<https://www.onlinegroupaa.org/>

<https://alcoholics-anonymous.eu/online-meetings/>

www.al-anon.org

www.alateen.org

www.adultchildren.org

Virtual / Online NA Meetings

https://www.na.org/?ID=virtual_meetings

<https://virtual-na.org/>

THRIVE Family Support

www.thrivefamilysupport.org/support

Other Virtual Meetings/Groups

<https://www.12step.org/social/online-meetings/>

Specialized Resources

Provider Networks and Resource Lists for BIPOC (Black, Indigenous and other people of color)

- <https://connpsych.org/mental-health-providers-of-color-directory/>
- <https://www.youarenotaloneproject.com/people-of-color.html>
- <https://www.massgeneral.org/psychiatry/guide-to-mental-health-resources/for-bipoc-mental-health>
- NAMI's Statement On Recent Racist Incidents and Mental Health Resources for African Americans
| NAMI: National Alliance on Mental Illness

Provider Networks and Resources for Gender/Sexual Minorities / LGBTQ+ Issues

- <https://www.ngttcn.com/>
- <http://www.glma.org/index.cfm?fuseaction=Page.ViewPage&PageID=939>
- <https://www.outcarehealth.org/outlist/>
- <https://www.ourtruecolors.org/>

Specialized Resources

Asian / AAPI Services and Resources (Asian Americans and Pacific Islander Americans)

- https://connecticut.networkofcare.org/mh/services/agency.aspx?pid=ASIANFAMILYSERVICESCommunityRenewalTeamClinicalandSupportServicesTherapy_2_556_1
- <https://www.apa.org/pi/oema/resources/ethnicity-health/asian-american/bullying-and-victimization>
- <https://aapaonline.org/>

Radical Healing & Other Culturally-Sensitive Care

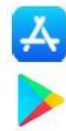
- <https://health.uconn.edu/health-disparities/2021/04/30/advancing-public-health-policies-for-radical-healing/>
- <https://health.uconn.edu/health-disparities/>
- <https://kamorasculturalcorner.com/>

<https://cssrs.columbia.edu/the-columbia-scale-c-ssrs/risk-identification/>

	Past Month	
1) Have you wished you were dead or wished you could go to sleep and not wake up?		
2) Have you actually had any thoughts about killing yourself?		
If YES to 2, answer questions 3, 4, 5 and 6 If NO to 2, go directly to question 6		
3) Have you thought about how you might do this?		
4) Have you had any intention of acting on these thoughts of killing yourself, as opposed to you have the thoughts but you definitely would not act on them?	High Risk	
5) Have you started to work out or worked out the details of how to kill yourself? Do you intend to carry out this plan?	High Risk	
Always Ask Question 6	Life-time	Past 3 Months
6) Have you done anything, started to do anything, or prepared to do anything to end your life? <i>Examples: Collected pills, obtained a gun, gave away valuables, wrote a will or suicide note, held a gun but changed your mind, cut yourself, tried to hang yourself, etc.</i>		High Risk



Any **YES** indicates that someone should seek a behavioral health referral. However, if the answer to 4, 5 or 6 is **YES**, seek **immediate help**: go to the emergency room, call 1-800-273-8255, text 741741 or call 911 and **STAY WITH THEM** until they can be evaluated.



Columbia Protocol app available

Mental Health Disciplines

Psychotherapy / Behavioral Health Care

- Psychologists (PhD, PsyD)
- Marriage and Family Therapists (MFT,
- Licensed Professional Counselors (LPC)
- Social Workers (MSW, LCSW)

Psychopharmacology / Medication Management

- Psychiatrists (MD, DO)
- Psychiatric Mental Health Nurses (PMH-APRN)

... *and others* (this is not an exhaustive list)



The Coronavirus Anxiety Project

Purpose

We are a research team that is studying how fear and anxiety about the coronavirus are affecting mental health and well-being of people around the globe. As of July 8, 2020, we have three self-report measures of COVID-19 anxiety that have solid reliability and validity support. These instruments are now registered as research tools by the [NIH Public Health Emergency and Disaster Research Response \(DR2\) Program](#) and part of the [World Psychiatry Association's COVID-19 Mental Health Care Toolkit](#). In addition, these instruments have been part of major reviews in the [Journal of Psychopathology](#) and [Brain, Behavior, and Immunity](#), and used in large scale studies such as [COVID-19 IDD: A global survey](#). Our research has been featured to over 17,000 scientists on Research Gate's COVID-19 [community research page](#), is a part of the [Cambridge University coronavirus collection](#) and recognized on the [Evidence Exchange Network](#) in Canada. Recently, our research has been cited in a [report](#) by the [Metropolitan Educational Research Consortium \(MERC\)](#) to support the mental health of students in Virginia during the COVID-19 pandemic.

The **Coronavirus Anxiety Scale** (CAS; Lee, 2020) assesses physiologically-based, dysfunctional anxiety symptoms associated with the coronavirus. The CAS is currently being translated into many different languages and is being used by over 50 teams of health professionals and researchers from around the world. The **Obsession with COVID-19 Scale** (OCS; Lee, 2020) assesses persistent and disturbed thinking about COVID-19, while the **Coronavirus Reassurance-Seeking Behaviors Scale** (CRRS; Lee, Jobe, Mathis, & Gibbons, 2020) measures reassurance-seeking

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[Twitter](#): @TheCoronavirus1

<https://sites.google.com/cnu.edu/coronavirusanxietyproject/home>

Gratitude for open access to his research and wisdom

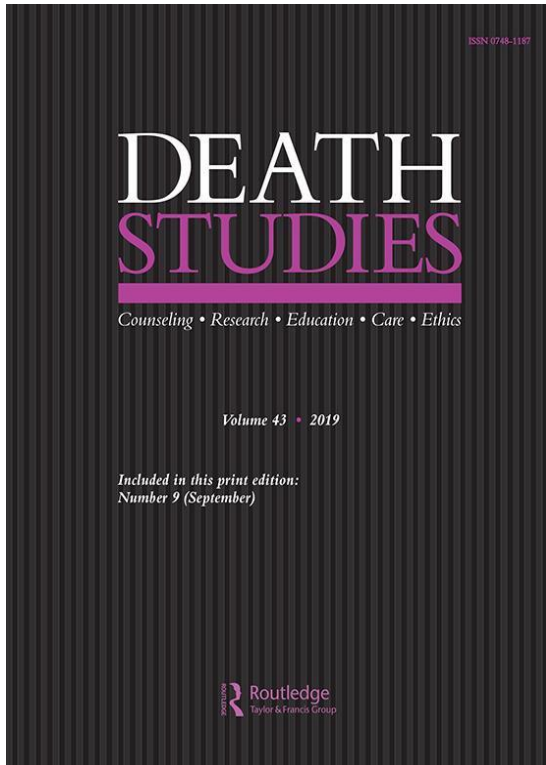
Robert A. Neimeyer, PhD

*Professor Emeritus, University
of Memphis*

*Director, Portland Institute for
Loss and Transition*



Portland Institute
For Loss and Transition



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