

Reopening Workplaces During and After COVID-19: Considerations for Employers

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COVID-19: A Collective Trauma The COVID-19 pandemic has been characterized as a “mass trauma.”¹ Trauma can be defined as an experience of an event or enduring condition in which an individual experiences an actual or perceived threat to their life or bodily integrity.² Since March of 2020, the pandemic has posed a physical, emotional, social, and/or financial threat to every individual across the globe.

In addition to the physical and health threats that COVID-19 has presented, other stressors related to the pandemic have impacted housing, food, financial, and job security, all of which can be independently categorized as trauma.^{6,20,21} According to a representative study conducted by the Massachusetts Department of Public Health, twenty percent of adults report job loss as a result of childcare changes or anxiety regarding their housing stability and twenty five percent report food insecurity.¹⁷ Over forty percent of Massachusetts adults report worrying about paying at least one bill or expense. People of color, non-English speakers, low-income individuals, individuals with less than a high school degree, and individuals with disabilities, and individuals in the LGBTQIA+ community were disproportionately impacted by economic issues.¹⁷

What are the symptoms of trauma? Traumatic events can have a significant impact on the brain and behavior.^{1,7} Research shows that traumatic stress can affect multiple

regions of the brain including structures involved with emotion, behavior, memory, and executive functioning.⁷ Thus, trauma has had an effect on a wide range of individual's emotions, cognitions, and

Symptoms of Trauma (Figure 1)

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|-----------------------------|--------------------------------|--------------------------------|
| Emotion dysregulation | Dissociation/depersonalization | Fatigue |
| Numbing | Self-injurious behaviors | Social isolation |
| Somatization | Avoidance | Feelings of hopelessness |
| Sleep disturbances | Interpersonal challenges | Hypervigilance |
| Intrusive thoughts/memories | Anxiety | Loss of interest in activities |
| Excessive guilt | Concentration difficulties | Nightmares |
| Hallucinations/delusions | Irritability | Memory impairment |
| Cognitive errors | Muscle tension | Suicidal ideation |

behaviors (see Figure 1).⁷ Due to this, there is a need for employers to consider the impact of these symptoms on workplace safety and performance.

Recent research shows that COVID-19 has also had a significant impact on mental health. According to a study conducted by the National Center for Health Statistics, the proportion of adults with anxiety and depression symptoms has quadrupled in comparison the pre-pandemic rates.³ One out of three adults in Massachusetts reported experiencing fifteen or more days of poor mental health in a single month and three or more symptoms of post-traumatic stress disorder (PTSD).¹⁷ Individuals who are non-White, a member of the LGBTQIA+ community, low-income, or have disabilities reported disproportionately increased rates of mental health symptoms. 11% of U.S. adults reported “seriously considering suicide,” in 2020⁴, compared to the previously reported prevalence of 3.9% of adults who have experienced suicidal ideation⁵.

How might COVID-19 and associated trauma affect reopening of the workplace?

Given the impact that trauma from COVID-19 has had on individuals, reopening or expanding the traffic in workplaces during and after the pandemic will likely add to

and exacerbate stress and mental/behavioral health symptoms that employees are experiencing.

Reduced productivity, high staff turnover, and impaired work performance are a likely result from this trauma

For many, the sudden change to working remotely or becoming unemployed was a stressful experience. Similarly, the sudden change in routine and physical space that individuals returning to in-person work will face may take adjustment time.⁸ Once capacity restrictions are revised or lifted, those who have already returned to on-site workspaces may experience a second wave of social emotional symptoms as the exposure to other individuals increases. Employees, and especially those who have been infected or have had family members infected with the virus, may need additional time to transition back into a normal work routine. Research shows that these individuals may experience sleep disturbances, decreased tolerance for work, fatigue, and increased anxiety.⁹ Individuals who have been infected with COVID-19 may also face stigma from others when returning, which is likely to lead to increased anxiety, stress, and depression.^{6,9} Asian-American individuals have experienced increased incidence of prejudice and hate crimes due to the virus, and thus may be impacted further.¹⁰

COVID-19 has posed a physical threat to all, and many may have developed hypervigilance and anxiety that is common after experiencing trauma. Employees returning may be anxious about catching the virus or becoming sick, and returning to an environment where the risk is unknown may impact employee's mental health further.⁹ Using shared spaces and surfaces in the workplace may provoke more anxiety than prior to COVID. In addition, the lack of control employees have around others' behaviors and precautions around COVID may

Employees should have a voice in the decision-making process.

increase these feelings of anxiety, as well as pose interpersonal challenges between individuals.^{9,11,12} People will have had different experiences during the pandemic, and some may be more thoughtful about precautions than others and employees who knew someone affected are more likely to have concerns around COVID-19 precautions.¹³

Other challenges to consider for employee's mental health returning to work are logistical complications that may add additional sources of anxiety. As the evidence displays, the pandemic has disrupted and increased caregiving needs. Employees simultaneously engaging in caregiving needs may be more likely to miss work or show signs of presenteeism while at work. Some individuals may need to plan for alternative transportation to work due to fears of public transportation or other transportation options.¹⁵

It is evident that returning to work may exacerbate mental health and trauma symptoms employees are already facing due to the pandemic, which will likely have an impact on employee work outcomes.

Research shows that those with mental health diagnoses, on average, are absent from work three times more than those without mental health diagnoses, and work almost 3 times as many cutback days per month.²⁴ Additionally, those experiencing mental health symptoms related to the virus or pandemic are likely to show decreased work efficiency and productivity.^{22,25} Symptoms such as poor concentration, anxiety, depressed mood, difficulty with decision making along with physical symptoms such as fatigue that employees may experience, are all likely to contribute to reduced productivity, high staff turnover, and impaired work performance.^{22,25}

One in three adults reported 15+ days of poor mental health and 3+ symptoms of PTSD.

Recommendations to support employees returning to work

In order to ensure organizational efficiency, maintain work productivity among employees, and support employee well-being, a trauma-informed approach to

Employees' lack of control can increase feelings of anxiety and pose interpersonal challenges.

supporting employees is critical. While insensitive management, lack of focus on employee mental health, and poor communication can worsen work and organizational outcomes,²⁴ a trauma-informed approach has been shown to improve relationships between staff and management,

increase employee's ability to carry out employer goals and duties, and increased employer retention rates. A trauma-informed approach included six principles (see Figure 2)²⁶ which are embedded into the following recommendations for employers as they re-open their physical spaces: ^{8,9,16,17}



Trauma-Informed Approach (Figure 2)

1. Ensure thorough return-to-work plans to assure employees of safety measures and protection. Install or provide any necessary safety equipment (i.e., PPE, plexiglass dividers) and ensure that physical distancing is possible to increase feelings of safety. Communicate clearly about safety policies and how employees should respond to colleagues or individuals who do not follow guidelines.

2. Engage in open communication with employees about the effects of the pandemic on mental health and offer support. Supervisors and managers should increase frequency of check ins with employees.
3. Provide opportunities for employees to connect and support each other.
4. Provide training for supervisors and managers to support employees returning to work. Employees are key stakeholders and should have a voice in the decision-making process. Allow and encourage breaks during the day and reasonable work hours. Supervisors and managers should model behavior such as working only within their scheduled hours, and scheduling meetings and important business earlier in the workday. Encourage employees to prioritize their and their household or family member's health by providing paid sick leave.
5. Understand that each employee has a unique experience of the pandemic and be open to an individualized and flexible approach regarding work (i.e., allowing for telework, flexible hours, etc.). Allow for accommodations for those who need it and especially for employees who are caregivers or engaging in remote schooling for children.
6. Be cognizant of the differential impact that the pandemic has had on individuals with marginalized identities and provide accommodations and support accordingly.

Those with mental health diagnoses are ~3x as likely to experience work absences and cutback days.

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