



**Tel:** 604-273-5722 | **Fax:** 604-273-5762 | **Toll Free:** 1-866-273-5766 | **Toll Free Fax:** 1-866-273-5762  
105 - 21900 Westminster Hwy., Richmond, BC V6V 0A8  
info@apbc.ca | www.apbc.ca

August 27, 2020

## **APBC POSITION STATEMENT ON MENTAL HEALTH CONSIDERATIONS OF PARAMEDICS DURING COVID-19**

In March 2020, the World Health Organization (WHO) declared the outbreak of a new coronavirus disease, Covid-19, a global pandemic.<sup>1</sup> As countries, governmental agencies, and health authorities act to contain the virus, this time of crisis is generating widespread psychological concerns. At particular psychological risk during this pandemic are our healthcare professionals, including our paramedic practitioners. We are issuing this position statement to highlight what the existing literature tells us about the mental health effects of previous pandemics on frontline healthcare staff. It is also critical to acknowledge how Covid-19 has already, at this relatively early stage, impacted the working environment for healthcare professionals, our members included. And perhaps most importantly, we want to advocate for the psychological support of the profession.

According to previous studies from SARS, H1N1, MERS, and Ebola epidemics, the psychological burden that healthcare professionals experience during these crises is significant.<sup>2</sup> Both their physical and mental well-being has been shown to be compromised by a myriad of factors including increased workload, physical exhaustion, insufficient personal protective equipment, and the potential distress of making ethically difficult decisions regarding the rationing of care.<sup>3</sup> Furthermore, the resiliency of these healthcare professionals can be further compromised by isolation and loss of support, risk of or infections of family and friends, as well as often unsettling changes in medical protocols and workplace procedures.<sup>3</sup>

Studies have indicated that healthcare professionals are vulnerable to specific mental health concerns both during and after pandemics. In a study of 1800 hospital practitioners in Hong Kong after the 2015 MERS outbreak, it was found that medical staff who performed MERS-related tasks showed the highest risk for posttraumatic stress disorder symptoms.<sup>4</sup> Surveys from over 10,000 healthcare workers in Singapore after SARS found that staff in daily contact with SARS or staff from SARS-affected institutions expressed significantly higher levels of an anxiety.<sup>5</sup> In addition, more than half reported increased work stress and workload. And here in Canada, the *Impact of SARS Study* found that one to two years after the outbreak, professional burnout and symptoms of traumatic stress, anxiety, and depression remained elevated among Toronto hospital workers compared with colleagues in settings that did not treat SARS patients.<sup>6</sup>

Research has already started to emerge regarding the psychological implications of Covid-19 on front-line healthcare providers. Systematic reviews conducted of these studies indicated that healthcare workers are encountering a considerable degree of stress, anxiety, depression, and insomnia.<sup>3,7</sup> For example, a survey of 1257 healthcare workers in China found that a considerable portion reported symptoms of general distress (71.5%), anxiety (44.6%), depression (50.4%), and insomnia (34%).<sup>8</sup> Another observational study of 180 healthcare workers found substantial levels of anxiety and stress that negatively impacted sleep quality and feelings of self-efficacy.<sup>9</sup>

Our position is that the Covid-19 pandemic will impact the psychological health of paramedics and dispatchers. The workload and burden has already increased, as the BCEHS CISM team was activated on 232 occasions in April 2020 as opposed to 130 activations in April 2019.

It is imperative that we learn from previous pandemics and the aforementioned research. It should help us predict future mental health needs, and act and prepare accordingly. We are also aware that in the absence of a pandemic, our profession is already at higher risk for stress disorders than most other occupations.<sup>10</sup> Therefore, we feel strongly that the profession should be psychologically supported both during this time and on an ongoing basis. It is true that healthcare providers who feel well supported and trained experience better mental health over the long term.<sup>11</sup> Organizational provision of psychological services, support for staff in isolation/quarantine, peer support, as well as communication, empowerment, and humanity from leaders have been identified as considerations for supporting healthcare providers during this pandemic.<sup>12</sup> We feel strongly that paramedics and dispatchers deserve to have access to these kinds of supports for their mental health.

*(Writing and recommendations by Dr. Kathy Keating, Registered Psychologist (CPBC #2169), Commissioned by the Ambulance Paramedics & Emergency Dispatchers of BC)*

Provincial Executive Board  
Ambulance Paramedics & Emergency Dispatchers of BC  
CUPE Local 873

---

<sup>1</sup> World Health Organization (2020, March 18). *Mental health and psychosocial considerations during the Covid-19 outbreak*. WHO/2019-nCoV/Mental Health/2020.1

<sup>2</sup> Liu, X., Kakade, M., Fuller, C., Fan, B., Fang, Y., Kong, J., Guan, Z., & Wu, P. (2012). Depression after exposure to stressful events: Lessons learned from the severe acute respiratory syndrome epidemic. *Comprehensive Psychiatry* 53(1), 15-23. <https://doi.org/10.1016/j.comppsy.2011.02.003>

<sup>3</sup> Pappa, S., Ntella, V., Giannakas, T., Giannakoulis, V. G., Papoutsis, E., Katsaounou. (2020). Prevalence of depression, anxiety, and insomnia among healthcare workers during the COVID-19 pandemic: A systematic review and meta-analysis. *Brain, Behavior, and Immunity*. <https://doi.org/10.1016/j.bbi.2020.05.026>

<sup>4</sup> Lee, S. M., Kang, W. S., Cho, A. Kim, T., & Park, J. K. (2018). Psychological impact for the 2015 MERS outbreak on hospital workers and quarantined hemodialysis patients. (2018). *Comprehensive Psychiatry*, 87, 123-127. <https://doi.org/10.1016/j.comppsy.2018.10.003>

<sup>5</sup> Koh, D., Lim, M., Chia, S., Ko, S., Qian, F., Ng, V., Tan, B., Wong, K., Chew, W., Tang, H., Ng, W., Muttakin, Z., Emmanuel, S., Fong, N., Koh, G., Kwa, C., Tan, B., Fones, C. (2005). Risk perception and impact of severe acute respiratory syndrome (SARS) on work and personal lives of healthcare workers in Singapore: What can we learn? *Medical Care*, 43(7), 676-682. doi: 10.1097/01.mlr.0000167181.36730.cc

<sup>6</sup> Maunder, R. G., Lancee, W. J., Balderson, K. E., Bennett, J. P., Borgundvaag, B., Evans, S., Fernandes, C. M. B., Goldbloom, D. S., Gupta, M., Hunter, J. J., McGillis Hall, L., Nagle, L. M., Pain, C., Pecseniuk, S. S., Raymond, G., Read, N., Rourke, S. B., Steinbery, R. J., Stewart, T. E., VanDeVelde-Coke, S., Veldhorst, G. G., Wasylenki, D. A., (2006). Long-term psychological and occupational effects of providing hospital healthcare during SARS outbreak. *Emerging Infectious Disease*, 12(12), 1924-1932. doi: 10.3201/eid1212.060584

<sup>7</sup> Spoorthy, M. S., Pratapa, S. K., Mahant, S. (2020). Mental health problems faced by healthcare workers due to the COVID-19 pandemic-a review. *Asian Journal of Psychiatry*, 51. <https://doi.org/10.1016/j.ajp.2020.102119>

<sup>8</sup> Lai, J., Ma, S., Wang, Y., Cai, Z., Hu, J., Wei, N., Wu, J., Du, H., Chen, T., Li, R., Tan, H., Kang, L., Yao, L., Huang, M., Wang, H., Wang, G., Liu, Z., & Hu, S. (2020). Factors associated with mental health outcomes among health care workers exposed to



---

coronavirus disease 2019. *Journal of the American Medical Association Network Open*, 3(3).

<https://dx.doi.org/10.1001%2Fjamanetworkopen.2020.3976>

<sup>9</sup> Xiao, H., Zhang, Y., Kong, D., Li, S., & Yang, N. (2020). The effects of social support on sleep quality of medical staff treating patients with coronavirus disease 2019 (COVID-19) in January and February in China. *Medical Science Monitor*, 26.

<https://dx.doi.org/10.12659%2FMSM.923549>

<sup>10</sup> Haugen, P., Evces, M. & Weiss, D. (2012). Treating posttraumatic stress disorder in first responders: A systematic review. *Clinical Psychology Review*, 32, 370-380. <https://doi.org/10.1016/j.cpr.2012.04.001>

<sup>11</sup> Lancee, W. J., Maunder, R. G., Goldbloom, D. S. (2008). Prevalance of psychiatric disorders among Toronto hospital workers one to two years after the SARS outbreak. *Psychiatric Services*, 59(1), 91-95. <https://dx.doi.org/10.1176%2Fps.2008.59.1.91>

<sup>12</sup> Walton, M., Murray, E., Christian, M. D. (2020). Mental health care for medical staff and affiliated healthcare workers during the COVID-19 pandemic. *European Heart Journal: Acute Cardiovascular Care*. <https://doi.org/10.1177%2F2048872620922795>

