



RETURN TO WORK:

NAVIGATING THE RETURN TO THE WORKPLACE FOLLOWING THE COVID-19 PANDEMIC

Since December 2019, countries all over the world have implemented restrictions to combat the spread of COVID-19 and limit suffering from coronavirus. In numerous countries, strict quarantines and lockdowns have been put in place for extended periods of weeks and sometimes months. Now, countries are beginning to carefully navigate the de-escalation of restrictions and the lifting of lockdown. As they do so, it is imperative that we recognise, assess, and respond to the physical and psychological impacts that the outbreak, the restrictions, and the relaxing of such rules are causing.

The implications of the COVID-19 pandemic on mental health

Immense physical and psychological suffering is being felt all over the world.¹ Research has investigated the impact of isolation, the effects of social distancing, and the repercussions of spending time in quarantine, and findings suggest that the psychological effects of quarantine are substantial and varied, and can last for an extended period of time. They have been found to include confusion, anger, and post-traumatic stress symptoms.²



A study conducted in China in early 2020 found that the initial pandemic outbreak had caused a moderate to severe psychological impact for over half of respondents. Symptoms included depression, anxiety, and stress.³ Stress can manifest itself in various ways, including problems sleeping, changes in eating patterns, alcohol or substance misuse, and deterioration in chronic conditions and mental health issues.⁴ Anxiety can lead to a racing heart, difficulty concentrating, sweating, and shakiness.⁵ Symptoms associated with the psychological suffering experienced by so many during the pandemic can have a serious negative impact on overall health.

Aspects of life under lockdown that can cause distress include fears of infection, frustration, wariness of increased duration of quarantine, feelings of isolation, a need for more information, boredom, concern about reduced medical services, and guilt at being unable to help others or needing help.^{2,4}

The potential effects of de-escalation

As de-escalation measures are carried out and restrictions are eased, nations are navigating a gradual return to an altered everyday life; one peppered with safety precautions and protective measures. As citizens resume their routines, to work, to shop, to exercise, and to socialise, they do so carrying the experience and impact of the previous months.

Potential reactions among the general population to coming out of quarantine may include relief, fear, worry, stress, sadness, guilt, and anger.⁴ Health concerns, continued fear of contagion, guilt at not being able to care for others, worry about finances, and stigma are some of the factors that can cause stress post-quarantine.^{2,4}

A predicted amplified psychosocial and mental health burden caused by the coronavirus pandemic is expected to be influenced by not only the health concerns and mortality associated with COVID-19, but also the unwavering media coverage, social distancing restrictions, alterations to medical care access, and economic effects felt across populations.⁶

Almost 67% of respondents are experiencing more anxiety due to the potential easing of restrictions.

Anxiety

A recent survey of members of Anxiety UK, a charity dedicated to supporting people affected by anxiety, stress, and anxiety-based depression, found that almost 67% of respondents are experiencing more anxiety due to the potential easing of restrictions. Over half (57%) stated that catching the virus was their biggest concern; other sources of worry stated include using transport, going out in public, shopping, and attending large events. Almost half (45.8%) of those surveyed cited returning to places of work or education as cause for concern, and 54.4% stated that they are now used to being at home, and are concerned about returning to previous routines.⁷



Grief

In addition, millions of people are also grieving the loss of loved ones. Looking ahead, it is thought that instances of prolonged grief disorder – characterised by severe, disabling grief experienced for six months or more – will increase among those who are grieving for people who have died during the pandemic. Research suggests that disasters with numerous victims tend to cause greater grief; as do unexpected deaths, the absence of grief rituals, and lack of social support, all very much relevant to the current situation.⁸

Psychiatric symptoms

Few studies are yet to address this issue in terms of COVID-19, as de-escalations are only just beginning to be introduced. However, in China, where restrictions began to ease earlier than in other countries, a study of returning workforce found that although returning to work had not caused great psychiatric symptoms, some 10.8% of respondents had experienced post-traumatic stress disorder (PTSD).⁹ This aligns with responses to a survey in Canada following the 2003 SARS outbreaks, in which 28.9% of quarantined participants reported symptoms of PTSD, and 31.2% reported symptoms of depression post-quarantine.¹⁰ A study in Hong Kong found that, four years later, 42.5% of SARS survivors met the threshold for at least one psychiatric diagnosis. PTSD, depression, panic disorder, and obsessive compulsive disorder were among those cited. Chronic fatigue was also found to be common among respondents.¹¹

It is important that the next stage in the COVID-19 pandemic is not downplayed. While on the surface it may seem to be a “return” to previous routines, recent events have had an effect; one that may continue to be felt for some time to come.

Employer approach

As part of the reintegration process following the COVID-19 outbreak, many employees will be returning to work, in some cases after weeks or month working fewer or no hours; in others, after time spent working from home. Some people will have spent time in quarantine, alone or with family or friends; others might have been caring for or may have lost loved ones; and some will be returning to work having contracted and recovered from coronavirus. Each individual will have had a unique experience of the previous months, and each person will have been affected in different ways.

Each individual will have had a unique experience of the previous months, and each person will have been affected in different ways.

Leaders will play a critical role in defining the new normal. In addition to individual experience, variation across countries, cultures, and departments needs to be taken into account across organisations. It is thought that the mental health burden of the COVID-19 pandemic is unlike anything the world has previously seen,

and as such, it is vital that management teams recognise the potential impact that recent events may have had on employees and implement measures accordingly.⁶

Employ a personalised approach

The approach to reintegration needs to be tailored according to situations experienced during lockdown, as well as to individual fears and levels of anxiety. Furloughed employees may find the return to work more difficult than those who continued to work remotely. Adults who did not work during the quarantine period in China have reported lower levels of mental and physical health; greater distress; and reduced life satisfaction.¹² Those with pre-existing mental health conditions are expected to be vulnerable to relapses, exacerbated symptoms, and additional difficulties.⁶ Understanding who is suffering to a greater extent paves the way for targeted assistance.



Understand anxiety

As employees return to work, they may be required to navigate public spaces, commuter journeys, food and drink outlets, and more people than they have seen in several weeks or months. This can lead to anxiety, fear, and distress. One study post-SARS identified long-term behavioural changes, including avoidance of busy places, which in some cases lasted many months.² Employers have an opportunity and arguably a responsibility to understand individual anxieties regarding the return to work, and support and advise their employees appropriately.



Recognise where changes have brought improvements

While the pandemic outbreak and ensuing situation has not been easy for anyone, there have been some positives to arise from the situation. The Cigna COVID-19 Global Impact Study published in May 2020 found that respondents value working from home. Work wellbeing indices remain broadly consistent and, despite numerous challenges, work-life balance has not reduced, but increased by 1% globally. Many participants say their work day is flexible – particularly in Thailand, where the figure is 90%.¹³

Over 60% of respondents stated that using technology has streamlined communication with colleagues, and in the United Kingdom, 90% believe they have been able to maintain good relationships their colleagues, a 4% increase since January. In addition, 70% of global respondents commented that they have maintained positive relationships with their supervisors. It is important that companies take into account improvements that employees may report, and respond accordingly, facilitating the continuation of such developments where relevant.¹³

Prioritise work-life balance

In the same way that workers had to adapt to quarantine and lockdown, they will now be required to re-adapt to returning to the workplace. Concerns about spending less time with family, social anxiety issues, newfound priorities, and work-life balance may come to the fore, and should not be ignored. Work-life balance is unique to each individual. A lack of balance between personal and professional lives can lead to stress, anxiety, and depression, and, in more extreme cases, medical conditions including higher risk of type 2 diabetes, heart disease, and high blood pressure.¹⁴

The Cigna COVID-19 Global Impact Study recorded generally consistent family wellbeing levels, with marginal increases concerning spending enough time with family. In Spain, Singapore, and UAE, family wellbeing indices increased by 2.0, 2.6, and 2.9 points respectively.¹³ Management can play a role in maintaining employee satisfaction through processes and policies that facilitate work-life balance.

Communicate clearly

An overload of information, unreliable sources, and ever-evolving recommendations can make it difficult for us to keep up with the latest developments concerning COVID-19, and can cause confusion and frustration. Clear, informative, and regular company communications not only help to explain protective measures and procedures implemented in the workplace, but can also form a reliable source of official information for employees. Making it clear how the company is following national and local guidelines, and detailing the ways in which the workspace is

Prompt, honest communication regarding timescales for the return to the office, procedures in case of sickness, and other milestones can help employees mentally prepare for the upcoming months.

being prepared for employees to return in a safe, secure way can help alleviate worries. Similarly, prompt, honest communication regarding timescales for the return to the office, procedures in case of sickness, and other milestones can help employees mentally prepare for the upcoming months.

Some companies are inviting employees to work from home until the end of 2020, or for as long as they choose to do so.¹⁵ And in some countries, four-day working weeks and 2.5-day weekends are being contemplated to support and boost the economy.^{16,17} Where relevant, employers may consider sharing their stance with employees, or encouraging feedback on such initiatives.

One of the primary stressors concerning COVID-19 is the financial impact the pandemic may have or is already having.² Fears of a potential global recession and subsequent effects on employment can be addressed with transparent, reassuring information where possible.

Schedule check-ins

One way of ensuring continued, confidential communication is for management to establish a schedule for regular check-ins both with and among employees. Offering employees the opportunity to share their concerns, stressors, and fears can help alleviate any pressing worries they may have. Such communication can help improve motivation, pride, and confidence.¹⁸ The Cigna COVID-19 Global Impact Study reported that some 84% of workers say they are stressed; and 9% feel their stress is unmanageable.¹³ When employees feel unable to share work-related stress with supervisors, they can find themselves having greater difficulty sleeping, and experience lower motivation levels and dipped confidence.¹⁸ In addition, if employees have taken the time to reflect on their lives and choices during isolation, they may find career check-ins beneficial.

One way of ensuring continued, confidential communication is for management to establish a schedule for regular check-ins both with and among employees.



Start a conversation about mental health

Employers acknowledging that things will be different can go a long way to offering reassurance and putting employees at ease. Working towards removing the taboo that surrounds mental health discussions in many regions can help employees feel less alone, and make them aware of common concerns they share with their colleagues.

The COVID-19 pandemic is expected to have a hugely detrimental effect on the mental health of the population worldwide.² Offering clinical psychological support and counselling services to employees as they begin to return to work and gradually return to what has been deemed the “new normal” is another way of supporting workers through this process.

The outbreak has given us an opportunity to talk about mental health; not just at work, but beyond. It is a topic that has been brought to the forefront of health and wellbeing over recent months, and the world now has a chance to continue that conversation, and to openly discuss topics such as stress, anxiety, loneliness, and fear without stigma or shame. This, combined with increasing acceptance of telehealth solutions for mental and physical health problems – 60% of Cigna COVID-19 Global Impact Study respondents are interested in using virtual health services¹³ – offers an opportunity for the two to be combined, via phone and video counselling sessions, support groups, and other similar technological initiatives.

Whole health and wellbeing

The psychological effects of the quarantines enforced to prevent further spread of coronavirus are expected to be seen for a long time to come; making the health and wellbeing of workers around the world an important, immediate priority.²

The Cigna COVID-19 Global Impact Study shows that 13% of respondents believe that life will never be the same again. This figure rises to 23% in Spain but drops to just 3% in China and 6% in Thailand. Worldwide, 46% of respondents say that the pandemic will change their financial status. And 40% stated that they would permanently change the way they manage their physical health and wellbeing.¹³

Many employers are in a position to both encourage and facilitate whole health and wellbeing, through encouraging and facilitating the prioritisation of sleep, exercise, diet, relaxation, and work-life balance. Alongside measures to promote good physical health, there is a need for a continued, open conversation and dedicated resources to prioritise mental health, both immediately post-pandemic and beyond. As we ease out of quarantine and look ahead to life after COVID-19, we have an opportunity for business leaders to focus on the physical and mental health and wellbeing of their employees. It is an opportunity that should not be wasted.



References:

1. ECLB-COVID19 Consortium. Emotional consequences of COVID-19 home confinement: The ECLB-COVID19 multicenter study. doi: 10.1101/2020.05.05.20091058.
2. Brooks et al. The psychological impact of quarantine and how to reduce it: rapid review of the evidence. *Rapid Review*. Volume 395. Issue 10227. February 26, 2020. doi: 10.1016/S0140-6736(20)30460-8.
3. Wang et al. Immediate Psychological Responses and Associated Factors during the Initial Stage of the 2019 Coronavirus Disease (COVID-19) Epidemic among the General Population in China. *Int. J. Environ. Res. Public Health* 2020, 17(5), 1729. doi:10.3390/ijerph17051729.
4. Coping with Stress. Centers for Disease Control and Prevention. <https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/managing-stress-anxiety.html>. Reviewed April 30, 2020. Accessed June 11, 2020.
5. 9 ways to tame anxiety during the COVID-19 pandemic. Mayo Clinic. <https://www.mayoclinichealthsystem.org/hometown-health/speaking-of-health/9-ways-to-tame-anxiety-during-the-covid-19-pandemic>. Accessed June 11, 2020.
6. O'Connor K, Wrigley M, Jennings R, Hill M, Niazi A. Mental Health Impacts of COVID-19 in Ireland and the Need for a Secondary Care, Mental Health Service Response. *Irish Journal of Psychological Medicine*. doi: 10.1017/ipm.2020.64.
7. Anxiety UK survey indicates a further rise in anxiety levels can be expected with easing of lockdown restrictions. Anxiety UK. <https://www.anxietyuk.org.uk/blog/anxiety-uk-survey-indicates-a-further-rise-in-anxiety-levels-can-be-expected-with-easing-of-lockdown-restrictions/>. Accessed June 11, 2020.
8. Eisma MC, Boelen PA, Lenferink LIM. Prolonged grief disorder following the Coronavirus (COVID-19) pandemic. *Psychiatry Res*. 2020;288:113031. doi:10.1016/j.psychres.2020.113031.
9. Tan et al. Is returning to work during the COVID-19 pandemic stressful? A study on immediate mental health status and psychoneuroimmunity prevention measures of Chinese workforce. *Brain, Behavior, and Immunity*. doi: 10.1016/j.bbi.2020.04.055.
10. Hawryluck et al. SARS Control and Psychological Effects of Quarantine, Toronto, Canada. *Emerg Infect Dis*. 2004 Jul;10(7):1206-12. doi:10.3201/eid1007.030703.
11. Lam MH et al. Mental Morbidities and Chronic Fatigue in Severe Acute Respiratory Syndrome Survivors: Long-term Follow-up. *Arch Intern Med*. 2009;169(22):2142-2147. doi:10.1001/archinternmed.2009.384
12. Zhang S, Wang Y, Rauch A, Wei F. Unprecedented disruption of lives and work: Health, distress and life satisfaction of working adults in China one month into the COVID-19 outbreak. *Psychiatry Research*. Volume 288. June 2020. doi:10.1016/j.psychres.2020.112958
13. Cigna COVID-19 Global Impact Study. June 2020. <https://www.cignaglobal.com/static/pdf/global%20version%20-%20cigna%20covid-19%20global%20impact%20study%20-%20report.pdf>. Accessed June 11, 2020.
14. Job burnout: How to spot it and take action. Mayo Clinic. <https://www.mayoclinic.org/healthy-lifestyle/adult-health/in-depth/burnout/art-20046642>. Accessed June 11, 2020.
15. Keeping our employees and partners safe during #coronavirus. Twitter. https://blog.twitter.com/en_us/topics/company/2020/keeping-our-employees-and-partners-safe-during-coronavirus.html. Accessed June 11, 2020.
16. New Zealand Prime Minister opens door to 4-day working week. World Economic Forum. May 20, 2020. <https://www.weforum.org/agenda/2020/05/new-zealand-jacinda-ardern-4-day-week-pandemic-productivity/>. Accessed June 11, 2020.
17. Life after lockdown: How China went back to work. BBC. <https://www.bbc.com/worklife/article/20200430-is-china-going-back-to-normal-coronavirus-covid-19>. Accessed June 11, 2020.
18. Workplace Mental Health. Mental Health America. <https://mhanational.org/workplace-mental-health>. Accessed June 11, 2020.

Together, all the way.®

