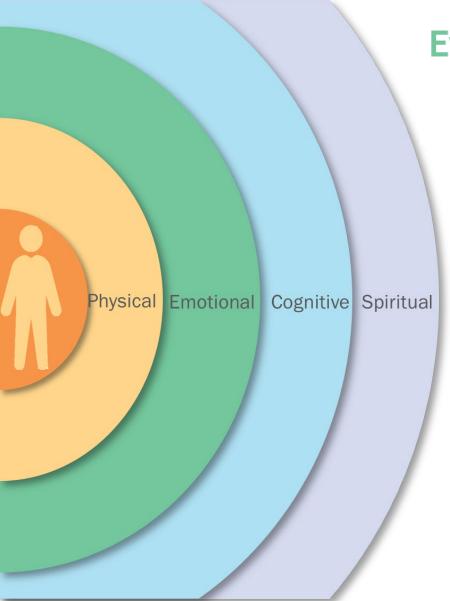


COVID-19 Build your Resiliency Plan Virtual Workshop



## **Evaluate our areas of wellbeing**

Physical – fitness, nutrition, sleep, energy, comfort, ergonomics.

Emotional – social connection, recreational outlets, finding balance, mood.

Cognitive – focus, concentration, new learning, mental activation

Spiritual – meaning, purpose, connection to a greater good.

Determinants = physical, emotional, cognitive, and spiritual

### Impact of Covid-19 is normal and to be expected.

### How has it impacted you?

Impact on personal life	Impact on work life

## If we do not have a resiliency plan, our wellbeing can falter. What are your indicators?

### List your personal indicators

Determinants	Typical Personal Indicators	Stressors during COVID
PHYSICAL		
EMOTIONAL		
COGNITIVE		
SPIRITUAL		

## If we do not have a resiliency plan, our wellbeing can falter. What are your indicators?

### Example sheet

Determinants	Typical Personal Indicators	Stressors during COVID
PHYSICAL	<ul> <li>Weigh gain,</li> <li>poor sleep,</li> <li>substance abuse</li> </ul>	<ul> <li>lack of structure at home unable to meal plan</li> <li>not enough exercise to be able to sleep</li> </ul>
EMOTIONAL	<ul> <li>Anxiety</li> <li>Depression</li> <li>Social disconnection</li> <li>Low motivation</li> <li>Decreased engagement of activities of interest</li> </ul>	<ul> <li>My extended family relies on me for their mental health concerns</li> <li>Family health worries- my mothers isolation</li> <li>Fear of health</li> </ul>
COGNITIVE	<ul> <li>Overwhelm by input from media</li> <li>Avoidance of decision making</li> <li>Unstructured thinking</li> <li>Getting 'lost' online</li> </ul>	<ul> <li>Overwhelm by input from all media</li> <li>Mastering zoom webinars</li> <li>Interruptions during worktime</li> <li>Added responsibility in my home space</li> </ul>
SPIRITUAL	<ul> <li>Feeling hopeless</li> <li>Feeling fearful</li> <li>Not attending to my spiritual practice (church, meditation, other)</li> <li>Lack of meaning in my day</li> </ul>	<ul> <li>Feeling hopeless</li> <li>Feeling distant from god</li> <li>Not able to meditate</li> <li>No longer able to go to church</li> <li>Disconnect from work purpose</li> </ul>

## Rate your personal wellbeing – today

Physical

1 - Dis-satisfied	5 - Satisfied	10 - Very satisfied
Emotional		
1 - Dis-satisfied	5 - Satisfied	10 – Very satisfied
Cognitive		
1 - Dis-satisfied	5 - Satisfied	10 - Very satisfied
Spiritual		
1 - Dis-satisfied	5 - Satisfied	10 – Very satisfied



SPIRITUAL

## An audit of my coping strategies

Areas of Wellbeing	Typical Coping Strategies	Adjustments During COVID	Prioritize 1-4
PHYSICAL			
EMOTIONAL			
COGNITIVE			



## An audit of my coping strategies

Example sheet

Areas of Wellbeing	Typical Coping Strategies	Adjustments During COVID	Prioritize 1-4
PHYSICAL	<ul><li>Swimming twice a week</li><li>Attending yoga</li><li>Hiking on the weekends</li></ul>	<ul> <li>Online workouts</li> <li>Finding outdoor space where physica distancing can be maintained</li> </ul>	
EMOTIONAL	<ul><li>Going out with friends</li><li>Setting aside time to be alone</li></ul>	<ul> <li>Virtual connection with family and friends</li> <li>Create time away from family</li> <li>Set time aside for activities of interest</li> </ul>	
COGNITIVE	<ul><li>Taking a course</li><li>Working in a quiet space</li><li>Keeping regular hours</li></ul>	<ul> <li>Online courses</li> <li>Learning new technologies</li> <li>Schedule work hours and follow schedule</li> </ul>	
SPIRITUAL	<ul><li>Morning Meditation</li><li>Attending faith gathering</li></ul>	<ul> <li>Online resources for relaxation/meditation</li> <li>Online faith gathering</li> </ul>	



One action plan to make a change in your prioritized area of personal wellbeing

I will do	I will do
for minutes	for minutes
days this week	days this week
I will do	I will do
for minutes	for minutes
days this week	days this week



Components of Work Life	Impact on Work Life	Adjustments during COVID	Prioritize 1-4
PHYSICAL			
EMOTIONAL			
COGNITIVE			
SPIRITUAL			



### Wellbeing at Work

## List the impact COVID-19 on your Work Life?

### Example sheet

Components of Work Life	Impact on Work Life	Adjustments during COVID	Prioritize 1-4
PHYSICAL	<ul> <li>Lack of home office</li> <li>Sharing workspace with family members</li> </ul>	<ul> <li>Create private and quiet space for work in the home</li> <li>Create a workspace that is ergonomically correct</li> </ul>	
EMOTIONAL	<ul> <li>Lack of connection with colleagues, customers</li> <li>Additional roles (caregiver, homeschooler)</li> <li>Increased isolation</li> <li>Finances are less predictable</li> </ul>	<ul> <li>Schedule times to connect with colleagues</li> <li>Set boundaries with family members</li> <li>Determine work schedule and stick to it- including breaks</li> <li>Communicate needs to employer</li> </ul>	
COGNITIVE	<ul> <li>Learning new ways of doing work</li> <li>Learning new technologies</li> <li>Distractions working from home</li> </ul>	<ul> <li>Setting time aside to learn new technological tools</li> <li>Share resources with colleagues who are making similar adjustments</li> </ul>	
SPIRITUAL	Distant from colleagues	•	



Physical

4		
1 - Dis-satisfied	5 - Satisfied	10 - Very satisfied
Emotional		
1 - Dis-satisfied	5 - Satisfied	10 - Very satisfied
Cognitive		
1 - Dis-satisfied	5 - Satisfied	10 – Very satisfied
Spiritual		
1 - Dis-satisfied	5 - Satisfied	10 – Very satisfied

One action plan to make a change in your prioritized area of Work Life.





# Ongoing personal resiliency plan

Area of Change	Determinant Physical Emotional Cognitive Spiritual	Create one action step each day or week
PHYSICAL		
EMOTIONAL		



# Ongoing personal resiliency plan

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# Ongoing personal resiliency plan

Area of Change	Determinant Physical Emotional Cognitive Spiritual	Create one action step each day or week
PHYSICAL		
EMOTIONAL		

### Resources

- Physical
  - o https://www.onepeloton.ca/app
  - o <u>https://fwfg.com/</u> Find What Feels Good Yoga
- Emotional
  - o www.helpguide.org
  - o <u>https://bouncebackbc.ca/covid19/</u>
  - <u>https://www.anxietycanada.com/covid-19/</u>
- Cognitive
  - o <u>www.coursera.org</u>
- Spiritual
  - o www.insighttimer.com
  - o https://www.calm.com/

# **WORK**<sup>TO</sup>**WELLNESS**

**READINESS FOR CHANGE QUIZ<sup>1</sup>** 

#### How ready are you to change? Let's find out.

Professor James O. Prochaska and his colleagues at the University of Rhode Island developed the Transtheoretical Model of Change in 1977. The five stages of change were constructed from many years of analyzing different theories in psychotherapy. The process of a specific behavior change typically follows a series of stages.

#### **STAGES:**

- Precontemplation "I can't change this behavior" or I won't change this behavior"
- Contemplation— "I might change this behavior"
  - Individuals hoping to enter the preparation stage must first define their motivators, obstacles, and solutions.
- Preparation (0-3 months) "I will change this behavior"
  - The individual will create a set of necessary guidelines and seek support for the ensuing attempt at change.
- Action (3-6 months) "I am changing this behavior"
  - It's common that within this stage individuals relapse. Successful lifestyle change stems from the ability to recover from such slips.
- Maintenance (6+ months) "I still am changing this behavior"
  - Continued adherence to the new behavior for an extended period of time will lead to the habit becoming part of the everyday lifestyle.

<sup>&</sup>lt;sup>1</sup> Sources: *Changing for Good* by J.O. Prochaska, J. C. Norcross, and C.C. DiClemente. Morrow, 1994; *The Transtheoretical Approach: Crossing the Traditional Boundaries of Therapy* by J.O. Prochaska and C.C. DiClemente. Krieger Publishing Company, 1984.

#### Thinking about changing a bad habit or unhealthy behavior?

Take this 10 question "ready or not" quiz and see just how ready you are. Use the key at the end of the quiz to help better understand what stage you might be in.

#### 1. Regarding my awareness about this behavior:

- a. Others have suggested that I have a problem behavior but I don't agree.
- b. I might have a problem behavior but I am not sure.
- c. I have a problem behavior.

#### 2. When a loved one or trusted friend suggests that I may have a problem behavior ...

- a. I am likely to tune them out, change the subject or get defensive.
- b. I don't like it, but I know that they see something that worries them and are right in

expressing concern.

c. I am ready to listen and talk about it.

#### 3. This problem behavior ...

- a. is really just a nuisance and I don't have time to deal with it.
- b. is causing me worry and/or distress.
- c. is causing me, and some of the people I care about, significant worry and/or distress.

ANSWER\_\_\_\_\_

ANSWER

ANSWER

#### 4. When I think about my problem behavior ...

a. I usually make excuses, rationalize, or minimize its impact on my life.

b. I want to change but I don't because of fear, pride, or lack of motivation.

c. I really want to change but don't know how to begin or continue once I start.

ANSWER\_\_\_\_\_

#### 5. Regarding knowledge of my problem behavior:

- a. I know very little about it.
- b. I have begun learning more about it.
- c. I have learned a great deal about it.

ANSWER\_\_\_\_\_

### 6. Regarding my knowledge of resources for my problem: a. I don't know of any resources. b. I have learned about some of the resources available but don't feel I have enough information. c. I have more than adequate knowledge about how or where to get help. ANSWER 7. Regarding my current motivation for change: a. I have practically no, or very little, motivation at this time. b. I have some motivation to change but I will need more to succeed. c. I am very motivated to change. ANSWER\_\_\_\_\_ 8. Regarding my current plans to change: a. At this time, I have no plans to change. b. I am thinking about change and the impact it would have on my life. c. I have a definite plan for change. ANSWER 9. Regarding my support for change from others: a. I have almost no support from others. b. I have some support but it may not be enough. ANSWER\_\_\_\_\_ c. I have excellent support. 10. Regarding previous attempts to change: a. I have never seriously attempted to change this behavior. b. I have tried to change on one or more occasions but have failed miserably. c. I have tried to change before and have had some temporary success.

ANSWER\_\_\_\_\_

#### Scoring key

If you answered "a" to any question, give yourself 1 point.	TOTAL A POINTS
If you answered "b" to any question, give yourself 5 points.	TOTAL B POINTS
If you answered "c" to any question, give yourself 10 points.	TOTAL C POINTS

#### Results

Total your score.

TOTAL SCORE\_\_\_\_\_

If your score is:

**10-15 points,** you are in the precontemplation stage. Your score suggests that you are not yet ready to engage in changing this problem behavior.

16-40 points, you are in the contemplation stage. Your score suggests that you are considering

changing this behavior but are not quite ready. People in this stage seek knowledge and additional encouragement before they engage in behavior change.

**41-100 points,** you are in the preparation stage. Congratulations. Your score suggests that you are preparing to change this behavior. People in this stage have acquired additional knowledge and support and have a viable plan.

### **Connect with us**

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Find out how we can make your workplace healthier, safer, and more productive

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- Mental Health
- Return to Work
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- Self Care
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#### Workplace Mental Health Support

- Employee Return to Work
- Employer Needs Assessment,
   Program Development
- Psychological Safety Audit
- One-to-one Contact & Individual
   Support