Public health emergencies, such as Coronavirus (COVID-19) and others involving a global pandemic, create numerous opportunities and challenges around public health communication, preparedness, and response. Healthcare personnel play a significant role in medical intervention (disease surveillance, identification, and treatment) and in influencing patient behaviors for protecting individual, family, and public health. This can be in the form of education about basic hygiene such as hand-washing and cough etiquette to more complex disaster behaviors such as shelter-in-place or evacuation.

Public health emergencies such as COVID-19 always involve issues of homeland security and defense. Because our military plays a central role in our national security, their health and the health of their families is very important.

**Unique Characteristics of Military Family Life**

The military community is a population on the move. Families may relocate multiple times within short periods of time within or outside of the country. Relocation, especially during times of public health emergencies, may increase exposure to disease. Moving also can be a barrier to healthcare access and continuity. As families move to new areas, healthcare personnel may not be as familiar with these new families and their specific health needs.

During times of public health crisis, military healthcare personnel need to be especially sensitive and alert to stressors and issues that relate to military families and military family life. These include:

- Raised anxiety about the health and wellbeing of loved ones who are deployed. Likewise, those who are deployed will worry about their loved ones back home.
- Single parent families (resulting from deployment) often include young caretakers who may lack experience in the role of protecting their family’s health, especially during public health crises.
- Military families with special needs children may require additional medical and emotional support.
- Families, especially those affected by combat injury, whose children live with grandparents may be more vulnerable to contracting illness.
- Families of the combat injured may be concerned about health risks visiting loved ones in hospitals or rehabilitation facilities.
- The changing nature of public health emergencies may create the need for additional public health interventions such as travel limitations and quarantine. These can produce more anxiety in families already experiencing stress.

**Supporting the Psychological Wellbeing of Patients**

Healthcare personnel can support patient wellbeing and reduce distress by providing guidance and recommendations to patients that serve to enhance feelings of safety, calming, self- and community-efficacy, social connectedness, and hope or optimism. The following are helpful practices:

- Proactively provide consistent, easy to understand, and updated messages about steps your healthcare clinic or facility are taking to reduce risk to patients and provide care to those who are ill.

*Continued*
Advise patients (adults and children) the most effective way to care for themselves and their family is to implement illness prevention practices recommended by the Centers for Disease Control and Prevention (CDC), including: hand-washing on a regular basis, especially after coughing or sneezing; covering one’s nose and mouth with a tissue when coughing or sneezing and throwing used tissues in the trash; avoid traveling to high-risk areas or contact with those who have contracted COVID-19; importantly, staying home if one feels or is sick.

Recommend patients promptly contact their healthcare provider if they are exposed to a sick individual that has been in a high-risk area or develop symptoms of illness.

Remind patients that, while it may make them feel safer, taking steps not recommended (ie; routine use of surgical masks without medical recommendation, excessive restrictions on daily activities or travel) may diminish resources needed in high risk areas, leave them feeling more socially isolated, elevate distress for those around them, and ultimately serve no protective benefit.

Encourage the use of trusted sources of information and discourage the spread and consumption of misinformation, which is common during infectious outbreaks. The CDC site on COVID-19 has accurate and updated information and is found at the end of this document.

For patients showing increasing or extreme signs of distress (depression, substance use, suicidal thoughts, inability to care for themselves or their family, or other concerning signs and symptoms) incorporate the use of behavioral health personnel in primary care settings or refer them to specialty behavioral health care services.

Current information about COVID-19 can be found at the CDC’s website here: https://www.cdc.gov/coronavirus/2019-ncov/