



overview

Women's Health Overview

Social Media Consumption and Inoculation Against Misinformation

Before COVID-19, social media was a source of provocative research in the psychological field as we explored the questions: What is excessive use? Is social media addiction real? What are the consequences for physical and mental health? This research area has been thrust into a political and scientific spotlight with the emergence of COVID-19. Now, more than ever, we are asking how social media consumption and addiction play a role in mental and physical health.

Before the pandemic, emerging research suggested that excessive and addictive social media use was tied to poor mental health outcomes such as anxiety and depression, and that individuals with lower self-esteem were more likely to become addicted to the "like and share" world.

During the uncertainty of the COVID-19 pandemic, we have increasingly turned to mass and social media as a source

of news, health information, risk perception and social connection. What attracted people to social media before the pandemic may not be the same motivating use factors we see now. Virtual connection has become our safest means of social connectivity, so the standards and theories of addiction and excess may need redefinition. However, we can say with certainty that our level of media consumption and sources of information can have significant impacts on our mental well-being and health behavior.

What have researchers discovered about the impact of social and mass media on our mental health and safety behavior? First, we have learned that social media is rife with misinformation about COVID-19. Misinformation includes unverifiable or false information, conspiracy theories and rumors. In a study of 87 countries, the U.S. had the second highest rate of social media misinformation by a

[see Social Media pg 1](#)

Mental Health and Working Remotely

Many have been working remotely since the COVID-19 pandemic began and workers are feeling the strain on their mental health. Here are some tips to maintain your health and wellness as you continue to work from home:

- Keep a regular schedule during the work day. Start and end work at the same time every day. Take breaks as needed to rest your eyes and stretch your body
- No working from the couch! Set boundaries between work time and your personal life by working from a dedicated space like a home office, writing desk or kitchen table
- Stay connected with friends, family and colleagues via FaceTime, Skype, Zoom, Microsoft Teams, text message or phone call
- Keep your immune system strong by getting enough sleep, eating well, staying hydrated and getting regular exercise



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newsletter is published quarterly for health care professionals and the general public with special interest in women's health issues by the Olson Center for Women's Health.

Address all comments to:

Lana Molczyk

Olson Center for Women's Health
University of Nebraska Medical Center
989450 Nebraska Medical Center
Omaha, NE 68198-9450

402.559.6345 | 800.775.2855

ljmolczyk@unmc.edu

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An alternative electronic version of the newsletter is available. If you would like to receive this electronic version in addition to the print version, or instead of, please email your request to ljmolczyk@unmc.edu.

From the chairman

The Omaha World-Herald recently printed an article about a new physician wellness program sponsored by the Nebraska Medical Association. Designed to help manage stress and reduce the stigma of mental health struggles, the program is confidential and operates separately from employers, insurers and state licensing agencies. It is run by peer physicians who offer both an outlet and support.

Doctors, like all health care workers, face extreme pressures in the workplace, which negatively affect their wellness. We are not immune to depression, anxiety or substance use problems, but are less likely to seek care for these conditions. Astonishingly, the rate of doctor suicide is the highest of any profession – more than double the rate in the general population. The current COVID-19 pandemic has only worsened the strain on our health care workers and their well-being.

I bring this to your attention to illustrate that doctors and nurses are human. Our front-line colleagues have been disproportionately burdened by the pandemic, and the health care system has been stressed in ways we never imagined. People are leaving the health care professions due to burnout and to reduce their chances of exposure to this deadly virus.

We have seen colleagues and leaders step up to lead our enterprise with compassion, transparency and intelligence. I am blessed to work in an organization that is working hard to deliver the level of care that we need and expect.

I have a few simple requests for all of us at this time:

1. Wear your masks, practice social distancing and wash your hands.
2. Be kind to one other.
3. Ask your friends and colleagues who work in health care how they are doing, and offer your support.

Carl V. Smith, MD, FACOG

Chairman

Department of Obstetrics and Gynecology

College of Medicine

University of Nebraska Medical Center

Social Media *continued from pg 3*

significant margin. This misinformation can lead to drastic individual and public health implications as it affects the likelihood to participate in preventive health behaviors such as masking and social distancing.

Interestingly, misinformation is just as likely to be shared, liked and disseminated as verifiable information. Thus, the frequency with which you see information on social media is a poor indication of its accuracy. However, social media users with higher followers, verified accounts and business/government/news accounts spread less misinformation than other social media accounts. Research shows that public health/health care accounts contain the least amount of misinformation.

Second, we know that the frequency and duration of time we spend consuming media, as well as the type of news source we use, have implications for mental health. Individuals who spend an excess of 2.5 hours a day or check into social media 7+ times a day are far more likely to experience depression and general anxiety symptoms. Individuals who turn to social media as their main source of information on COVID-19 are more likely to express negative mental health symptoms than people who mainly follow mass media. It is no coincidence that this is tied to the significantly larger occurrence of misinformation on social media sites.

With the warning of misinformation also comes what I hope is some helpful advice. Think critically about where you get your information – your physical and mental health may depend on it. Psychological research shows the simple act of trying to think critically about our information increases the likelihood we will spot misinformation. In fact, just like how the vaccine can prevent COVID-19, mental health researchers are suggesting people can use “psychological inoculation” to help prevent them from falling victim to misinformation. Psychological inoculation involves “prebunking” conspiracy and misinformation before you even come across it. While it is difficult to target specific falsified statements with inoculations, such as “spinach will cure COVID-19” (an unverified and intentionally misleading statement), we can start to prepare ourselves to recognize common themes in misinformation, how it tends to be presented and how to verify information.

My last takeaway is to know where you are getting your information. Utilize the World Health Organization and CDC websites for information about the virus. Also, limit the time you spend consuming COVID-19 news. This pandemic is difficult, unpredictable, scary and stressful. Even if you are reading the most accurate information possible, it can still contribute to anxiety and depression. Try not to spend your time in the rabbit hole of what-ifs – come up for air in the present moment and use social media for its greatest purpose: social connection. Meaningful engagement and life satisfaction are correlated with a wealth of positive mental health outcomes including reduced social media addiction. So, video chat with loved ones, play virtual games, look at pictures of cute babies, do something every day that brings you joy and meaning in this difficult time.

If you are struggling with anxiety and depression during this time or feel that you could use assistance in limiting your social media use, please reach out for support. Nebraska Medicine offers behavioral health care through most of its primary care clinics and we would be happy to help you. We are all in this together.

Contributed by Kelly Spanier, MS, PLMHP
Nebraska Medicine Psychology Department

Mission Statement

The Mission of the Olson Center for Women's Health is to provide a national comprehensive health science center at the University of Nebraska Medical Center. Based in the Department of Obstetrics and Gynecology, the center enables UNMC to make distinctive strides in education, research, and service through innovative approaches to women's health issues.

Want More Information?

Visit our website: **OlsonCenter.com**

Learn more about our health care providers, services, and programs available at the Olson Center for Women's Health. Our website also offers women's health information. Here are a few topics:

- Breastfeeding
- Breast Health and Disease
- Cardiovascular Health
- Gastrointestinal Health
- Gynecologic Health
- Reproductive Endocrinology/Infertility
- Pregnancy
- Wellness
- Incontinence

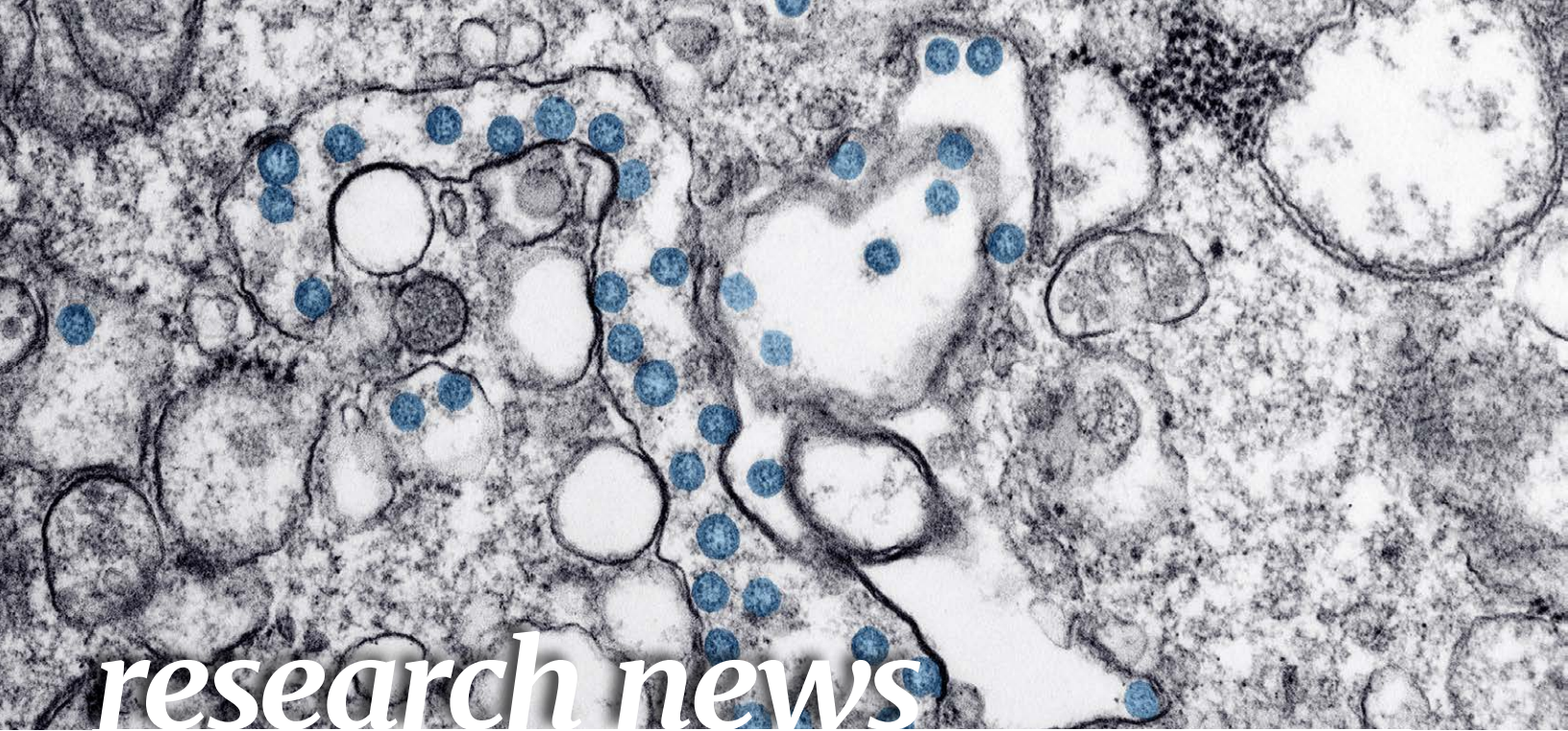
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research news

COVID-19 Data Collectors

Crises do not affect all people equally. Their worst impacts are often felt more by the vulnerable and less by the privileged. In the absence of consistent government or corporate leadership to accurately and reliably track COVID-19 infections, concerned groups and individuals across the country began collecting, analyzing and sharing this data themselves. Their efforts helped establish a record of the pandemic that likely kept countless people safe and can inform future public health decisions.

Starting with our own health and wellness, including what we eat, everyone is learning more about important essential services that make daily survival possible during this pandemic. This was made clear to Nebraskans when the President of the United States signed an executive order invoking the Defense Production Act to keep meat processing facilities open. From the farms to the packing plants, essential workers in critical food production industries kept food on our tables while risking their and their families' health and well-being to bring home a paycheck.

Athena Ramos, PhD, MBA, an assistant professor in the Department

of Health Promotion in the UNMC College of Public Health, has been recognized nationally as a COVID-19 data collector. Her recent publications describe her experience and approach in addressing COVID-19 outbreaks in meat processing facilities. Dr. Ramos's data about workplace protections were collected from over 600 responses to surveys conducted in Nebraska. Together with a team of UNMC infectious diseases experts and UNMC's Global Center for Health Security, technical assistance was provided to 14 meat processing facilities, and educational materials were developed to prevent COVID-19 spread at work and outside of work.

During the COVID-19 pandemic, domestic violence cases have increased in the United States and across the world. Data is a crucial tool for understanding how and why pandemics such as COVID-19 may result in an increase in violence against women. It can help identify the risk factors, how availability of services for women survivors of violence is being affected, how women's access to such services and help-seeking from formal and informal sources is affected, what new short and medium-term needs arise. These data are critical to

designing evidence-based policy and programs that respond to women's needs, reduce risks, and mitigate adverse effects during and after the pandemic. These data can also provide important insights into and inform the development of tailored strategies and interventions that may be particularly effective in preventing violence against women during emergencies and public health crises in the future.

I encourage all of us to not be mere objective observers, but to be active participants in the prevention and control of COVID-19 and its many untoward consequences. We need a national strategy to develop and implement infection control, one that expedites workplace and domestic abuse case reporting and response and one that encourages all of us to be part of the solution.

Contributed by John S. Davis, PhD
UNMC Department of OB-GYN



The Scientific Truth About Herd Immunity

As we enter a crucial stage in the coronavirus pandemic, Nebraska's hospitals and public health agencies want you to know the truth about herd immunity. You may have read about this concept as a way to get us through this difficult time. It would be disastrous for our country, our health care systems, and for millions of fellow Americans.

The herd immunity concept assumes that everyone who recovers from COVID-19 is immune from re-infection. That is an assumption that has not been proven. In fact, medical scientists have now reported a number of persons with proven re-infection. With a virus that has existed for only about a year, it is impossible to know whether people can be re-infected on a large scale.

Let's look at the numbers:

For herd immunity to take hold, you would need a minimum of 60% of the entire population to be infected. Antibody studies tell us that some small pockets of New York City and Mumbai, India, may have reached 50% infection rates, but cities with major outbreaks have had overall infection rates of less than 25%. Based on CDC testing nationally, we estimate 15% of

the U.S. population has experienced COVID-19 coronavirus infection. Given the overall number of confirmed deaths, we can estimate that approximately 0.6% of people with COVID-19 will perish as a result.

As of this writing, over 380,000 Americans have already died from COVID-19. So, what would happen if 60% of the population were infected rather than 15%? Here are our estimates for what a herd immunity experience in the US would look like:

- 197 million cases
- 3.6 million people hospitalized
- 1.2 million deaths

This is not a solution. The loss of life would be many times more devastating than what we see now. The economic impact would be ruinous for our state and country. If you see statements that claim otherwise, keep in mind there has not been a single scientifically verified study anywhere in the world that shows unchecked herd immunity as a solution.

What is the solution? While vaccines continue to be developed, approved and eventually distributed, we must

follow what we know works to stop the spread: mask wearing and hand hygiene.

In addition, we agree with state leaders who encourage you to avoid the three Cs:

Crowded places: Avoid gathering in groups where you cannot maintain a minimum of 6 feet of distance from others.

Close contact: Wear a mask whenever you are within 6 feet of people from outside your household. Masks work. In areas with mask mandates, the primary driver of COVID cases is people who spent significant time without their masks on in places like bars and restaurants.

Confined spaces: Avoid enclosed spaces with poor ventilation. When people are physically separated from others by 6 feet or more in well-ventilated areas, they are much less likely to become infected.

Learn more up-to-date information about COVID-19 at [NebraskaMed.com/COVID](https://www.nebraskamed.com/COVID)

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Incorporating Spiritual Practices for Holistic Wellness

Research shows that spirituality can influence relief or recovery from addiction, depression, eating disorders, fibromyalgia, chronic pain, heart disease, obesity, breast cancer and other conditions. Engaging in spiritual practices promotes healthy behaviors, reduces stress, creates meaning in life and positively affects mood.

Spirituality includes the ways we seek and express meaning and purpose in life, as well as the ways we experience connectedness to ourselves, to others, to nature and to the significant or sacred.

However, the field of medicine is often reluctant to address spirituality. Blurry boundaries among religion, spirituality, cultural norms, health and wellness can make it challenging for patients and caregivers to know how to approach this issue, so it often remains a private matter.

Spirituality is a highly personal and ever-evolving dimension of wellness. People who recognize themselves as being mind, body and spirit, as well as those who personally participate in their

health journey, often engage in a range of holistic health practices. The holistic medical model recognizes that physical, mental, spiritual and social needs affect your overall health, and being unwell in one of these aspects can affect you in others.

Spiritual practices that fit into the holistic model of health include:

- Contemplative practices, requiring disciplined concentration and sustained focused attention on a specific mental or sensory experience, such as yoga or prayer
- Mindfulness practices, focusing on awareness and acceptance of the present moment reality in a nonjudgmental way, such as meditation or just noticing your breath
- Directive practices, intentionally embodying ethical principles or specific qualities, such as compassion, acceptance or empathy, like doing charity work or breathing with patience

Each of these is an exercise in self-awareness and personal understanding

that can help you learn to manage habits you usually don't even notice.

What we choose to practice or not practice reflects our attitudes, beliefs, values and cultural norms. Ultimately, the type of spiritual practice you engage in is not important. What is important is how you practice and why.

Regularly focusing your attention to engage in meaningful spiritual practices with the expectation of a positive outcome helps you unlearn sometimes toxic or unhealthy ways of sensing, feeling and thinking. Spirituality can stimulate a return to each present moment with a fresh and clear perspective that promotes healing and coping with illness.

Although each person's intent determines the purpose of their spiritual practice, whether religious or secular, the technique (prayer, yoga, body scan, meditation, tai chi, etc.), the dosage (intensity and duration of the practice) and the frequency of the practice are all important factors to consider.

see Spirituality pg 7

Telehealth Options for Care Anywhere

As the COVID-19 pandemic continues to surge throughout our community and state, the Olson Center continues to follow best practices to keep you, your family and our providers safe and healthy.

Our best tool at this time is telehealth appointments, which allow for the same quality care as in-person visits while maintaining social distancing, and is a great option for all patients, including our pregnant patients.

Telehealth visits allow you to decrease the frequency you will be out in public,

which is especially important for pregnant patients, seniors and people who are immunocompromised or have preexisting conditions such as diabetes or heart disease.

Individual in-person visits are less frequent right now and correspond to visits that require lab work or an examination that is not possible during a telehealth visit – ultrasound as an example. Telehealth or virtual care is a way for you to connect with a provider at a distance – using technology. These appointments enable you to receive

care from a new or regular provider when an in-person visit isn't required or possible. Virtual care connects you with local board-certified health care providers whenever, and wherever, it's most convenient for you.

Insurance companies now cover most telehealth visits, and enhanced safety measures are in place to protect your privacy.

For more information, including which conditions are treatable with telehealth, visit [NebraskaMed.com/Telehealth](https://www.nebraska.gov/telehealth)

Recap: 23rd Annual Omaha Women's Health and Wellness Conference

The 23rd Annual Omaha Women's Health and Wellness Conference took place on Oct. 9. Due to COVID-19 safety concerns, the event was held entirely online via Zoom - a first for the conference.

More than 400 nurses and community members attended the day's main sessions. The keynote, titled "Losses Due to COVID-19: What Stages of Grief Are You In?" was presented by Sheritta Strong, MD. Meghan McLarney, MS, RDN, LMNT, presented "The Power of Plants: How Eating 'Plant-based' Can Fight Disease." The final main session, presented by Ashley Farrens, MSN,

MBA, RN and Charity Evans, MD, was titled "Understanding Trauma Informed Care, Resiliency and Your Health."

Afternoon breakout topics covered genetic cancer risk factors, mental health challenges associated with perimenopause and complementary alternative medicines such as essence oils and acupuncture. Additional sessions explored the philosophy of "Health at Every Size," how depression affects pregnancy and the ways health technology intended for women (apps, wearables, etc) is developed and marketed.

Chad Boukal, husband and caretaker of Nebraska Medicine breast cancer patient Molly Boukal, gave the conference closing session, which focused on balancing the role of caretaker and self care.

All lecture presentations were recorded and can be viewed at OmahaWomensHealthAndWellness.com. Nursing credit is available until Nov. 8, 2021. See the website for details.

Spirituality [continued from pg 6](#)

Here are some examples for seven areas of spiritual practice. Try one on that could be meaningful to you and, like medicine, modify the technique, the dosage and the frequency of your practice to find what you find healing.

- Relational practices: deep listening, storytelling, game playing
- Sensory practices: seeing/beholding, feeling/body scan, tasting
- Activism practices: protecting, advocating, bearing witness

- Movement practices: walking, dancing, yoga
- Stillness practices: meditation, silence, visualization
- Creative practices: drawing, writing, beading
- Ceremonial practices: praying, singing, drumming

Contributed by Regina Idoate, PhD

*Department of Health Promotion
UNMC College of Public Health*





OLSON CENTER FOR WOMEN'S HEALTH

University of Nebraska Medical Center
989450 Nebraska Medical Center
Omaha, NE 68198-9450

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welcoming new providers



Shannon Roth, PT, DPT, recently joined the Olson Center women's physical therapy team. She graduated from the University of Nebraska Medical Center in Omaha, Nebraska, in 2013 and completed a 15-month Women's Health Physical Therapy Residency at The Ohio State University Wexner Medical Center in Columbus, Ohio, in 2019. Roth believes in taking a holistic approach and empowering individuals to be advocates for their own health.



Brittany Bowman, LCGC, joined the Olson Center's genetic counseling group. She completed her Master of Genetic Counselor Studies degree at the University of Wisconsin School of Medicine and Public Health in Madison, Wisconsin. Bowman's passions are patient advocacy and health equity, while staying on top of the newest and most appropriate ways to use genetics in health care.

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