

Pandemic Impact on the Mental Health of Adults

Senate Committee on Health and Long Term Care
& Behavioral Health Subcommittee



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The 'obvious' and a few facts:

The pandemic has touched everyone in the State. A 'universal stressor' ... but not all are affected in the same way.

Even before the pandemic, we had BIG problems with access to behavioral health care.

For much of the summer and fall, more Washingtonians died from suicide and drug overdoses than from COVID-19.

A lot has been said and written about the mental health effects of the pandemic.



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JANUARY UPDATE

Statewide High-Level Analysis of Forecasted Behavioral Health Impacts from COVID-19

Purpose

This document provides a brief overview of the potential statewide behavioral health impacts from the COVID-19 pandemic. The intent of this document is to communicate potential behavioral health impacts to response planners and organizations or individuals who are responding to or helping to mitigate the behavioral health impacts of the COVID-19 pandemic.

Bottom Line Up Front

- The COVID-19 pandemic strongly influences behavioral health symptoms and behaviors across the state due to far-reaching medical, economic, social, and political consequences. This forecast is heavily informed by disaster research and response and the latest data and findings specific to this pandemic. Updates will be made monthly to reflect changes in baseline data.
- As we transition into a new year and towards the reconstruction and recovery phase of the pandemic, this forecast will attempt to highlight specific areas of psychosocial concern that warrant clinical attention and focus. Please see previous versions of the forecast for more detailed information on additional relevant areas of focus.
- During the first several months of 2021, the risk of a *disaster cascade* (more than one disaster impact within a short period of time) remains high. Secondary disaster impacts are often related to or triggered by the initial impact, and may include additional pandemic waves, economic hardships (unemployment, bankruptcy, eviction, food insecurity, etc.), and social and political disturbances (violence, civil unrest, protests, etc.).
- Any secondary disaster impacts within the first quarter of 2021 will also be occurring during the *disillusionment phase* of the initial disaster recovery cycle that began in March 2020.
- Ongoing behavioral health impacts in Washington continue to be seen in phases (Figure 1), with symptoms for most people increasing or plateauing in the first half of 2021.^{1,2}
- The risk of suicide, depression, hopelessness, and substance use will remain high through the first quarter of 2021. The need for professional behavioral health support, as well as community resources, will be occurring at a time when community

Disasters and Mental Health

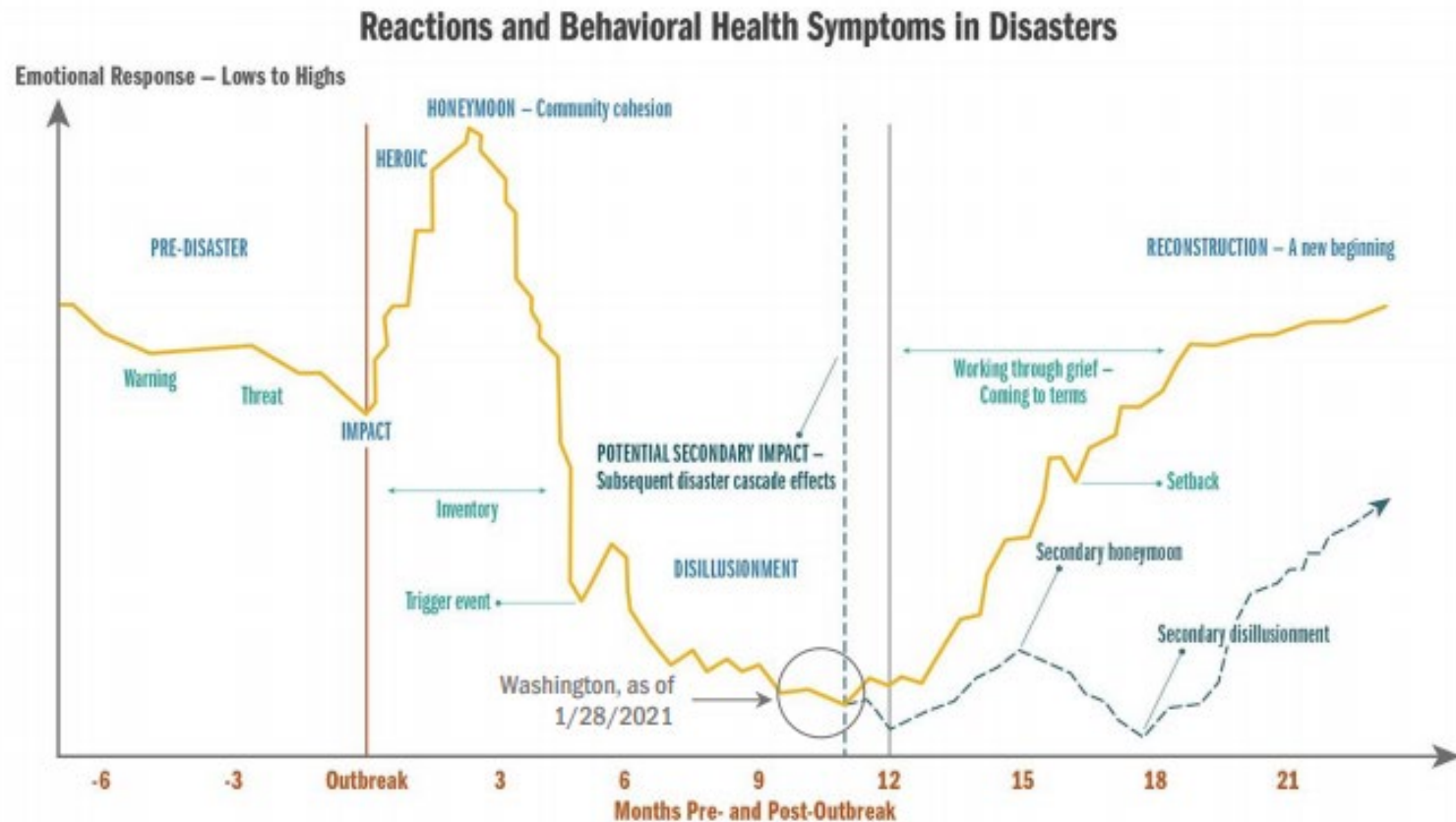


Figure 1: Phases of reactions and behavioral health symptoms in disasters. The dotted graph line represents the response and recovery pattern that may occur if the full force of a disaster cascade is experienced by a majority of the population.

Adapted from the Substance Abuse and Mental Health Services Administration (SAMHSA)⁷

Individual Responses Vary

- Shock Rallying
- Denial Resilience
- Anger Growth
- Bargaining Altruism
- Grief Hope
- Depression
- Exhaustion / fatigue / poor sleep
- Disillusionment / hopelessness / apathy / compassion fatigue
- Anxiety / Fear / PTSD
- Post-COVID psychosis / dementia
- Substance Use / Overdose
- Suicide

Summary

The good news:

- Stress & anxiety = normal. Most people don't develop PTSD.
- The pandemic can help 'normalize' conversations about stress, mental health and help seeking.

The bad news:

- Individuals with preexisting mental health and addiction problems are at high risk of worsening / falling through the cracks
 - Increased risk of drug overdose and suicide
- First responders, health care workers, and others who were coping fairly well before the pandemic are becoming overwhelmed, burning out, and developing PTSD
- Our clinical services are tremendously challenged to keep up with the increasing demand during difficult times (BH + COVID)

What do we need?

- Psychological support / psychological ‘first aid’
 - What do you need to get through the next few days?
- Ongoing support to develop resilience
 - The ability to cope with and rise to challenges and come back stronger than before.
- Reduce risk / harm
 - e.g., substance abuse, damaging relationships; child abuse; domestic violence; firearms
- Professional help for more serious problems (e.g., anxiety, depression, loss of reality, suicidal thoughts)
 - Safe and effective crisis response
 - Reliable inpatient and outpatient services for individuals and families with mental health and addiction problems
 - Other supports (e.g., formal and informal; housing, parenting / schooling, employment)

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Response to Challenges in Behavioral Health

- **Provide Immediate Help to Washington State Health Care Providers**

- State-wide Psychiatry Consultation Line (24/7) for prescribers with adult psychiatry or addictions questions - (877)-927-7924
- PAL (Partnership Access Line) for primary care providers with child and adolescent psychiatry questions - (877)-725-4666
- PAL for Moms for providers with perinatal psychiatry questions - (877)-725-4666
- Weekly 'On Line Clinic' ECHO / Psychiatry & Addictions Case Conference (PACC) <https://ictp.uw.edu/programs/uw-pacc>

- **Continue Investments in Access to Care**

- Behavioral Health Teaching Facility on UWMC Northwest Campus
 - State-of-the art inpatient care & neuromodulation treatments;
 - 24/7 telepsychiatry support
- Behavioral Health Institute at Harborview
 - Improved urgent care / crisis services
 - First Episode Psychosis Program (STEP) with innovative 'text-based' interventions

- **Grow and Strengthen our Workforce**

- Expanding Psychiatric Residency Program => the largest psychiatry training program in the country
- Expanding Child Psychiatry Fellowship Program
- Developing innovative new BH workforce and training programs:
 - (e.g., Behavioral Health Support Specialists, Apprenticeship Program, NP / PA residency programs)

Final comments

- **THANK YOU** for being here and for caring about behavioral health during this challenging time! What you are doing now is incredibly important.
- Let's use this opportunity to help us 'normalize' conversations about mental and behavioral health.
- Let's look out for those who are particularly vulnerable / at risk.
- Let's not cut funding for programs that are keeping many of us safe during this challenging time?
- Let's continue important investments we have started in behavioral health.
- Let's cut each other some slack. It's impossible to know how this is affecting each of us on any given day.
- Let's try to take care of ourselves and our own mental health. It will help us all get through this and set a good example for others.