

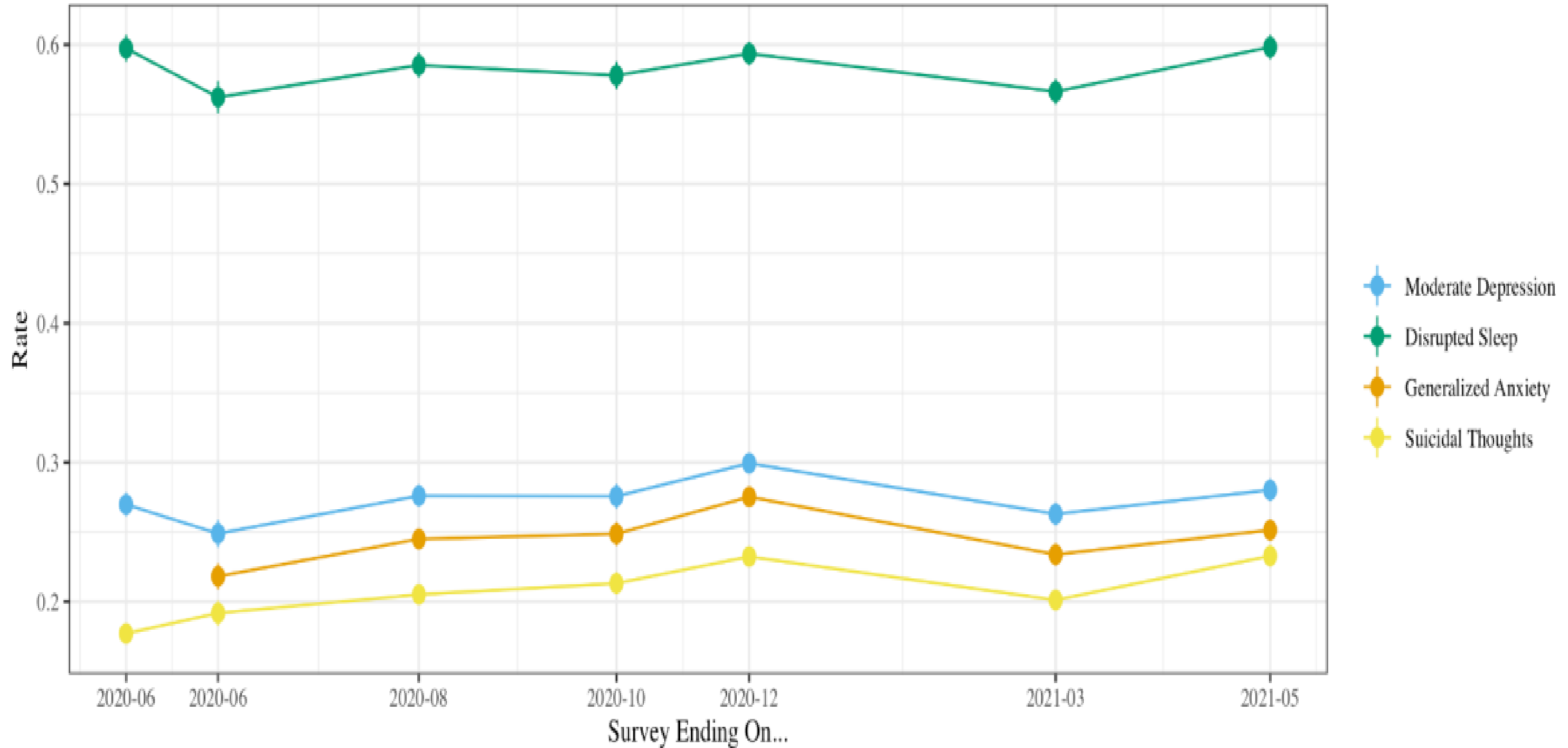
What happens after the fire? The psychological effects of the individual, community, and management of the COVID-19 Pandemic



Conflicts of Interest

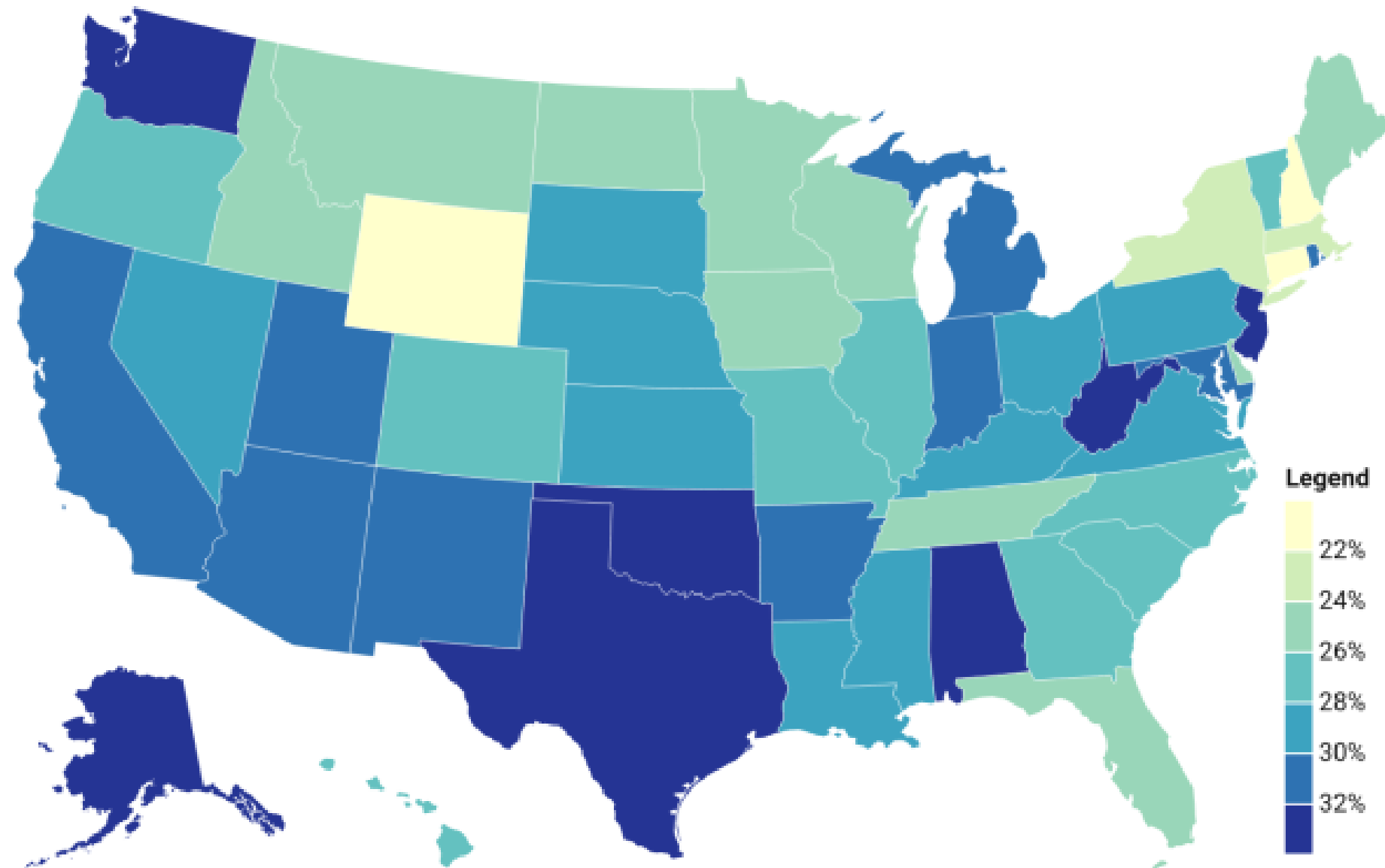
There are no conflicts of interest to disclose

National Prevalence of Mental Health Symptoms Over Time



Americans with moderate to severe depression symptoms

Percent respondents in each state who described symptoms in a range that would be consistent with moderate or severe depression using the PHQ-9 depression questionnaire.



National sample, N = 21,733, Time period: 04/01/2021-05/03/2021

Source: The COVID-19 Consortium for Understanding the Public's Policy Preferences Across States (A joint project of: Northeastern University, Harvard University, Rutgers University, and Northwestern University) www.covidstates.org

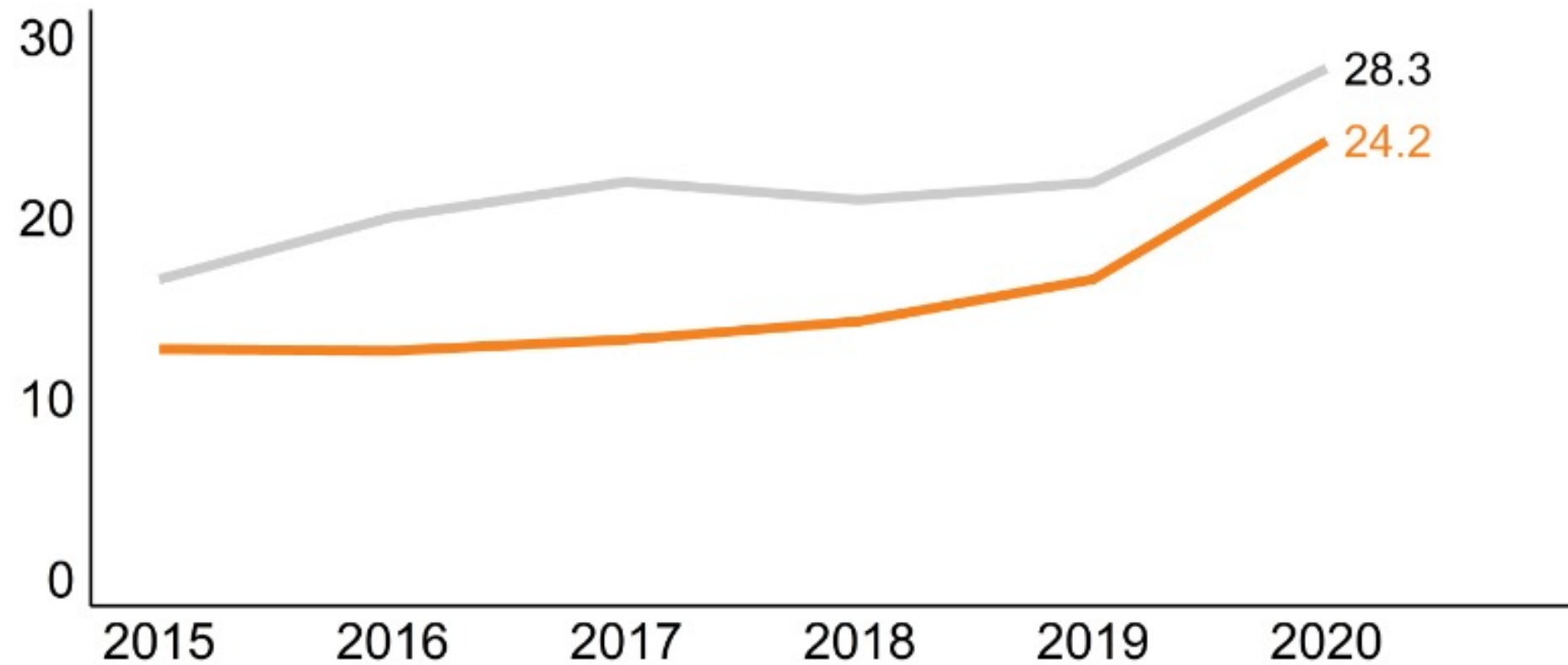
• Created with Datawrapper





Drug Overdose Deaths Per 100,000 Population, 2015-2020

— California — United States



NOTE: Estimates are based on provisional data.

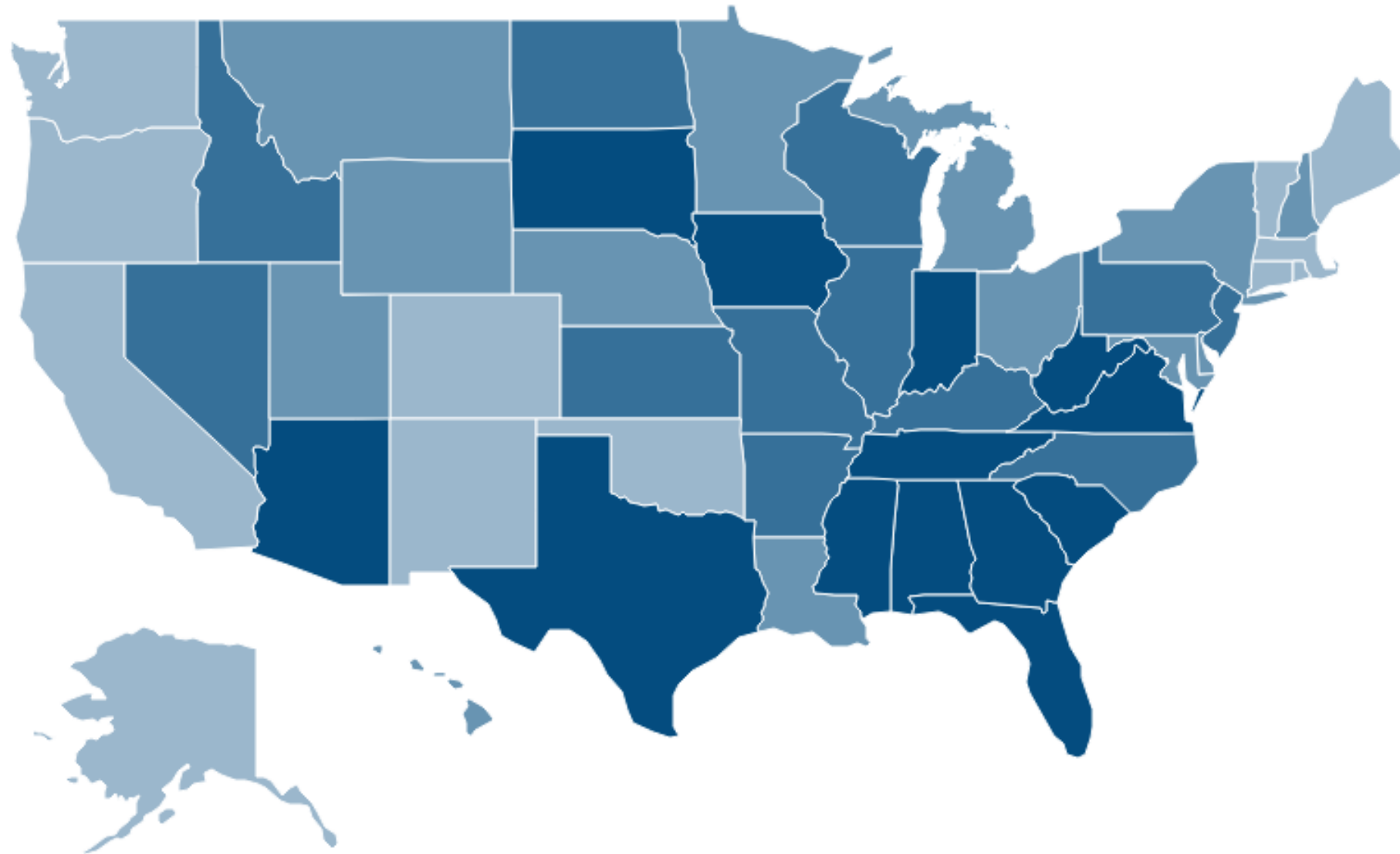
SOURCE: Ahmad FB, Rossen LM, Sutton P. Provisional drug overdose death counts. National Center for Health Statistics. 2021. Population Estimates from 2015 to 2020 Census Bureau Population Estimates.



	Events reported over a 24-hour period at DV service centers across CA		
	2019	2020	2021
Adult and Child Victims Served	5644	5591	4533
Non-residential adults/child supportive services offered	2337	2600	2088
Used the domestic violence hotline	1079	1162	1351
Unmet service requests	1236 (51% shelter)	984 (65% shelter)	1071 (42% shelter)

Suicide and Mental Health Hotline Use Increased 8,000%

Suicidal Ideation increased to 11.9% in 2020



- Highest quartile of mental health provider shortage score
- Third quartile of mental health provider shortage score
- Second quartile of mental health provider shortage score
- Lowest quartile of mental health provider shortage score

Data:

ACA Medicaid Expansion – <https://www.kff.org/medicaid/issue-brief/status-of-state-medicaid-expansion-decisions-interactive-map/>

COVID-19 Rates – <https://coronavirus.jhu.edu/data/new-cases-50-states>

Mental Health Provider Shortage – <https://www.americashealthrankings.org/health-topics/tag-23/heat-map?topics=category-9>

Our Most Vulnerable

- Black, Latino, and other communities of color, already more likely to be uninsured, have been disproportionately burdened by COVID-19 and the related economic fallout. Systemic racial and ethnic inequities in health care access and quality have contributed to higher hospitalization and mortality rates from COVID-19 among Black, Latino, American Indian, and Alaska Native individuals, among others
- Blacks and Latinos have substantially lower access to mental health and substance use treatments

Case 1

58 year-old Hispanic non-white male resides with wife and son with developmental disabilities. In November 2020, he had COVID and was hospitalized at PVHMC. Since his hospitalization, he is experiencing post-COVID symptoms including fibrosis. He is no longer able to work, requires portable oxygen. He is reporting depression, suicidal ideation, and anxiety. He reports losing his identity and purpose.

Post-COVID Mental Health

- Physical impairment is 3x more likely to result in depression
- Anxiety and Depression likelihood and severity can increase with the severity of COVID
- Treatment includes medication (SSRI), CBT with the goal being to help differentiate who we are with what we do. Disability creates a lack of identity
- Connection to limited resources

Case 2

72 year-old white non-Hispanic female who resides alone. She was hospitalized for COVID in January. She reports that since her hospitalization she experiences body aches, and pains. She has been to the ED 8-10 times. She calls her PCP 3-5x a week with concerns about symptoms associated with chest pain, difficulty breathing, etc. She is active on social media and has watched multiple youtube videos providing misinformation about vaccines, and alternative treatments. She reported that she is always worried that she is getting sick again, and believes the medication provided to her made her body worse.

COVID-19 and Somatization

- Anxiety associated with the infodemic during a pandemic
 - Information seeking is a coping mechanism with anxiety
 - Developing trust with health authorities through frequent consistent visits
 - Utilizing boundaries and explaining why you are making the choices you are making
- There is an association between anxiety/stress of the pandemic and a wide range of psychosomatic symptoms
- Social isolation can make this worse
- Frequent visits, reassurance, and medication can help, CBT

Case 3

37 year-old African American female who resides with her three children. She reported that in January 2022, she had COVID symptoms. She reported that she has been to ED multiple times since due to fears that she is getting worse. She reports that she has nightmares about a cousin who died of COVID. She reported significant challenges sleeping. She reported that she is avoiding that person's home. She reported that she tries to not leave the house and only tries to go outside when there are the least amount of people. She reported that when she has a cough, she begins to panic and breaks down.

PTSD and COVID-19

- 1/3 of people experiencing the sensation of being unable to breathe develop PTSD symptoms
- Hospitalizations or hearing or seeing those who have died can result in PTSD symptoms
- Treatment is exposure therapy, EMDR, SSRI/SNRI, CBT

Case 4

10 year old male who resides with his parents. He was referred by his PCP due to concerns about OCD behaviors. Patient reports that his grandfather died of COVID in the winter of 2020. His parents reports that since the death of his Grandfather, the patient is washing his 20-30x a day. They report that he is constantly wiping everything in the house down. They reported that his skin was cracked and bleeding on his hands. When he presents, he is wearing gloves. He reports that he thinks about COVID all the time, and whenever he does, he washes his hands to feel better.

COVID and OCD

- COVID fear worsened OCD symptoms
- SSRI and CBT
- Encourage patients to
 - Follow basic safety plans, but do not add to it
 - Hand wash for 20 sec after being outside in public, using the restroom or going to the bathroom. Use hand sanitizer if no soap and water is there
 - Talk to a parent or loved one about what may or may not be reasonable

Nursing > Nursing

Second California Nurse Dies by Suicide on the Job

— A suicide at Santa Clara Medical Center follows another at Stanford Hospital in January

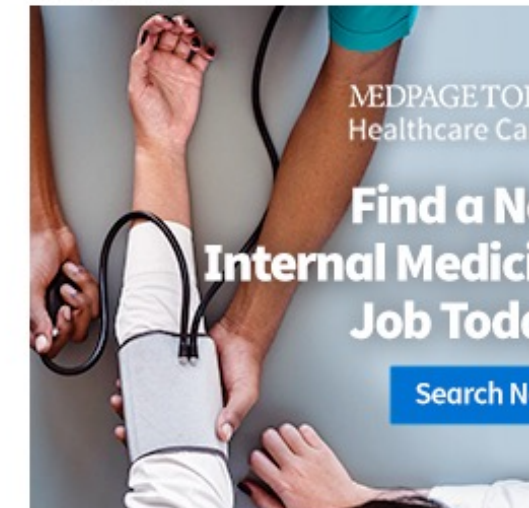
by Shannon Firth, Washington Correspondent, MedPage Today May 3, 2022

Last Updated May 4, 2022



A nurse took his own life at Kaiser Permanente Santa Clara Medical Center last

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Most common experiences during COVID

- Stressed out and stretched too thin
- Worried about exposing loved ones
- Emotionally and physically exhausted
- Insufficient emotional support (more than a third say no)
- Parenting Issues

Most common feelings

Stress

Anxiety

Frustration

Exhaustion

Overwhelmed

Sadness

Unappreciated

Most common stressors

Uncertainty about when things
will settle down

Burnout

Heavy/Increased workload

Strategies

- Start paying back the interest
 - Self-care, exercise, therapy, happy moments, PTO
- Talk to someone that you trust that understands what you are going through
- Talk to your doctor
- You are not alone

Questions