



When the **Puzzle** Starts to Fall Apart, Picking up the **Puzzle Pieces** During a Pandemic.

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Historical perspectives:

- These are unprecedented times for our country and the world. There is very little or sparse information on how individuals, groups, cultures, and countries have/will respond to a global pandemic regarding mental health care.
- The research on the effects on mental health derives mostly from multiple sources of wide spread disasters and or tragedies in our world, such as the moms with children born with the Zika syndrome, World Trade Center attacks, mass shootings, and natural disasters such as hurricanes or tornados.
- We know following these types of events there is always an increase in , depression, post traumatic stress disorder substance use disorders, anxiety and other social issues such as domestic violence and child abuse.

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Challenges

- We have a very fractured health care system, there are many barriers to access, such as language, culture, systematic racism and structural inequalities in terms of insurance, transportation and location of services
- Traditional referral sources to mental health services are not in place or significantly reduced due to COVID -19 such as: schools, primary care facilities, department of social services, day cares, home health care, religious groups, social groups, places of employment and walk in mental health clinic services
- Many mental health facilities and private providers have dramatically reduced their services or closed when the pandemic hit and now as we see a surge our system of care is changing yet again. Services are limited and mostly virtual. When we all know this is a time where mental health will be most needed.....
- The challenge is how do we provide a service when we know there is an increased need of safety for all

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What are we seeing ????

- As anticipate we are seeing much higher levels of anxiety, depression, obsessive compulsive disorder, self harm, suicide ideation and attempts, PTSD, substance use, domestic violence, child abuse and animal cruelty.
- Social isolation and fear are 2 major factors in the increase
- We are living a world where there is a possible threat that anyone could be a carrier of a life threatening disease. This makes vulnerable populations even more anxious and fearful. " will I be the reason someone dies?" "Will I die from going to the grocery store ????" (The Mask debate)
- Families are struggling with what a new normal means for them
- Substance use is on the rise
- Some countries have reported a 20 % increase in reported MH symptoms since the pandemic has started .

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What are people reporting ???

- So I asked a random group of people I know from various social media platforms : what the most challenge aspects of managing their mental health during this pandemic??
- Many responded feeling isolated, lonely, fearful, lack of everyday structure or routine, not feeling safe to get the things I need everyday, the stress of working from home/ or being unemployed and then with minor children, no day care, expected to homeschool, no motivation, crying daily due to stress and worry about the present and the future
- When individuals seek medical care they are not always allowed visitors or loved ones to be there during difficult times.

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Other responses and observations:

- Most reported feeling increase in no motivation as the pandemic and social isolation continued. Several stated at first I got projects done around the house and thought it would only last 2 weeks , here we are months latter with many restrictions and no end in sight... so why bother with a routine or caring what it/ or things looks like... a lost since of PURPOSE
- School... do we attend, not attend, virtual learning, work, home schooling and so on... This could be entire conference topic but it is creating a lot of anxiety, stress, frustrations, fears and anger among people nationally.
- Many were worried about our seriously mentally ill populations at first. Ironically they did not have a huge jump in reported symptoms, some ancillary data reports this is due to this population is already socially isolated and functions with in limited means, so not much of their daily routine was changed.



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So how does this apply to our puzzle of support???

- There are two populations that appeared to be significantly impacted more than general population that I want to touch on. The elderly briefly covered and the Intellectually and developmentally disabled.
- One common issue with both groups is the lack of in home supports or structured community supports during this time .
- Both were early on identified as high risk groups to be ill or die from the virus but yet many their social supports and health care got cut as previously provided.
- So we are seeing and can anticipate higher rates of depression and suicide among the elderly as this continues. There was even a concept of "disposable" populations that was starting to emerge such as: elderly not getting ventilators if demand was high. Thus creating a feeling of not feeling valued or worthy in society
- The elderly was already one of the highest risk groups for suicide prior to the pandemic

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When our world feels out of control ...



- The Intellectually and developmentally delayed individuals saw increased in agitation and violence. Increases in self harm behavior such as head banging secondary to anxiety and changes in routine/care givers were sighted as reasons. School aged children are not able to receive special education services or ancillary services provided in school. Families and caregivers are not able to receive the in home supports or respite services as scheduled. This created a secondary impact to our caregivers in a already resource poor locality. Families in crisis increase but resources were limited... no face to face responses.
- Many of these families struggle with the mask issue, due to sensory issues, or potential risks of harm from the mask its' self and therefore are judged and criticized my many.
- The lack of supports have resulted in for some families, property damage, physical injury, care giver depression, law enforcement and mental health professional involvement .
- Families needed to make a plan for exposure and potential sickness with complex needs, what happens if I get COVID who will take care of my child/ adult.

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What is being impacted...



- Due to physical distancing and telehealth options: delays in formal diagnosis and increased wait lists for services
 - Some places are trying to mitigate this challenge by doing video-based caregiver behavioral observations with specific tools to screen and record behavior.
 - The ability to adjust pharmaceutical intervention quickly
 - Ability to diagnosis and treat co -occurring medical issues
 - Access to particular foods or food brands
 - Autistic youth and young adults have more emergency dept. visits and more primary and psychiatric visits and higher health care expenditures that other youth with special needs Rates of complex mental health concerns such as depression , bipolar, ADHD, schizophrenia are more prevalent than the general population and increase with age.
 - So we are left with a huge pile of puzzle pieces and limited instructions

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Then we have the issue of ...

Loss of services and
structure and uncertainty

Increase demand and
increased stress levels of
care givers



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We could do whole class on school based issues...

- However I think it is important to acknowledge that it is one of the largest stressors on caregivers right now of school age children
- We do not know what loss or gains that may be occurring during this time.
- For some students virtual learning may reduce the stress, be more productive and bring more success in the school s
- For some it may be more anxiety , increase the social isolation or social skills
- For some younger students virtual learning may be exceptionally challenging because of the high need for caregiver assistance.

No matter what The struggles, anxiety and concerns are very present for caregivers

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I don't know about you but I tend to feel permanently exhausted these days...

**I FEEL LIKE I'M ALREADY
TIRED TOMORROW**



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So what do we do.... We fight, we resist, we find hope... because that is what we are the best at...



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Resiliency What is that???

- The capacity to recovery quickly from difficulties, toughness, the ability of an object to spring back into shape, elasticity; (paraphrased from Oxford language dictionary) .
- Psychological Resilience is the ability to mentally or emotionally cope with a crisis or return to a pre-crisis status quickly. Resilience exists when a person used mental processes and behaviors in promoting personal assets and protecting self from the potential negative effects of stressors – Wikipedia
- It is about regaining that sense of purpose and direction, having that foundation that we will be ok no matter what

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Three types of Resilience

- Psychological/Emotional : how we emotionally respond and react: trauma is common area discussed in resiliency , depression anxiety, worry
- Physical: how our bodies recovery and heal: illness, injury
- Community : how our communities respond and comeback : natural disasters, mass shootings, national emergencies,

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The 7 C's of Resilience (designed for youth and children)

- Control: provide opportunities which tend to provide a sense of control
 - Competence:, learn ask questions because familiar with the problem and issue, seek knowledge
 - Coping: know you coping strategies, be willing to learn new ones,
 - Confidence: what works, what are you good at, what can you do to help another
 - Connection: express feelings, try to stay connected, phone, media,
 - Character: explore or validate your values, learn about who you are
 - Contribution: How can you make it better for others and yourself
- Kenneth Ginsburg M.D. from his book, A parents Guide to Building Resilience in Children and Teens: Giving your Child Roots and Wings

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5 key Stress Resilience Skills

- Self Awareness: how does your body react, thoughts, feelings ,
- Attention- flexibility and maintaining of focus, being able to be in the hear and now (mindfulness)
- Letting go – physical - muscle tension, but also calming the body responses
- Letting go – mentally - being able to separate from the narrative that keeps you stuck , changing negative or unhelpful beliefs, acceptance,
- Accessing and sustaining positive emotion – focus on the positive aspects, practice gratitude,
- It is about the balance of the Mind-body connection.
- The Stress Resilient Mind website by Glyn Blackett

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5 tips to build your emotional resilience

- Sit with yourself: learn how to be uncomfortable
- Engage in self care
- Make plans with friends or in general
- Make time for Gratitude
- Allow your self time to feel, grieve, be angry, worry, anxious but do not stay stuck there,
- Dr. Neeta Bhushan . Shine website

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Self care: what we can do

- Eat healthy/stay hydrated
- Exercise (if possible), stretch, yoga,
- Know your resources/facts, have a plan
- Take breaks from watching the news, social media
- Maintain a routine, wake up, bedtime, eating
- Get restful sleep , meditate , deep breathing
- Get outside when possible
- Connect with others; social distance, online meeting platforms, such as
 - Face time, video conferencing, zoom, google, skype, telephone calls,
- Read, journal, create art, find a hobby ,
- Focus on priorities, manage time, find balance, to do lists
- Find ways to be accountable to others, help another
- Connect with spiritual path
- LAUGH !!

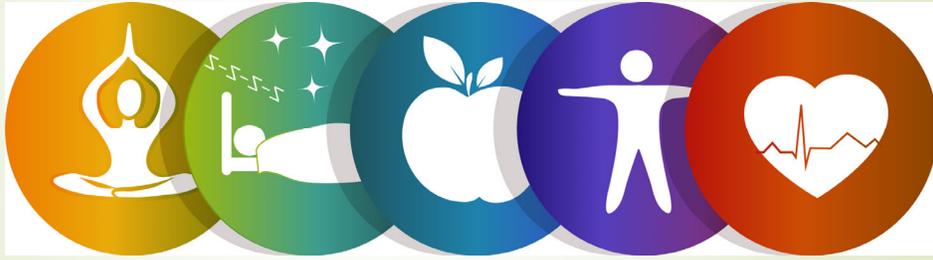
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Conclusion

- We are making history right now...
- We are learning a new normal or way of being
- We are moving from struggling to thriving, change is happening
- Although many are struggling with mental health issues there is hope
- There is purpose
- There is help
- WE can and will adapt and survive this
- We will build our sense of community
- We will go from Despair to Resiliency

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What will you do for self care and help practice and foster resiliency ?



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We can and will put the puzzle back together... it is what we do...



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Hotlines Locally and Nationally

- Numbers you call if you are concerned about someone being suicidal or in need of psychiatric care :
- 911 for true emergencies or their non emergency numbers for welfare checks
- MPNN COPE Line 1-800-542-2673 (10 counties MPNN Serves)
- REACH : 1-888-244-2989 ID/DD individuals in crisis
- Warm Line Virginia: 1-866-400-6428 M-F 9am to 9 pm and Sat and Sunday 5pm to 9pm Peer ran line for support
- National Suicide Prevention Lifeline : 1-800-273-8255 or 988 (recently approved and functional July 16, 2022)

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What can we do continued:

- Disaster Distress hotline: 1-800-846-8517 English or 1-800-985-5990 Spanish
- Veteran Crisis line: 1-800-273-8255 or text 838255
- Trevor Project LGBTQ youth: 1-866-488-7386
- Trans lifeline: 1-877-565-8860
- Domestic Violence : 1-800-799-7233
- Sexual Assault: 1-800-656-4673
- Strong Hearts Native helpline: 1-844-763-8483
- Parent Helpline: 1-855-427-2736
- AA/NA google for current locations or virtual meetings

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- Stepping Out of Isolation: Autistic People and Covid -19. Journal Autism in Adulthood, by Jac den Houting Phd. April 2020

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THANK YOU VERY MUCH FOR YOUR TIME !!!

Remember to be **Kind** it cost nothing but it could change a life.

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