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IMPACTS TO WELLNESS/ MENTAL HEALTH

Are we prepared for the mental health crisis brought on by COVID-19?

Faced with an insurmountable burden due to the COVID-19 pandemic, healthcare systems have experienced an unprecedented impact to their bottom-line operating expenses and have stretched abilities to provide care to their patients.

The impacts were so significant that the American Health Association (AHA) reported that hospital systems have collectively lost over \$200 billion from March through May and are estimated to lose up to \$350 billion through the end of 2020.

During this time period, lost revenue from elective procedures, additional costs for staff training and overtime, and the costs of additional personal protective equipment (PPE) to protect staff have placed our health providers in a vulnerable spot.

HMC Architects has specialized in the planning and design of healthcare spaces for the last 80 years. Through the lens of research, we are exploring the pandemic as an opportunity to learn, reinvent, and most importantly help our clients amid this crisis, and their financial hardship.

As part of this ongoing research effort, we are committed to sharing our findings with the industry on five main areas of Technology, Adaptability and Flexibility, Regulatory/

Budgetary/Institutional Impacts, Space Needs Restructuring, and Impact to Wellness/Mental Health. In this article, we are discussing impact to wellness and mental health as it relates to the healthcare sector.

MENTAL HEALTH EMERGENCY

The SARS-CoV-2 coronavirus and the economic fallout due to business shutdowns during the last five months of 2020 has pushed us into a mental health crisis with anxiety and depression on the rise. Social distancing, isolation, and an economic upheaval not seen since The Great Depression has resulted in a surge of people seeking mental health help, and the U.S. seems ill-prepared to meet the new and hidden consequences of the virus. These symptoms of depression and anxiety have crept into our psychological system as well.

A June 2020 study by the *Journal of American Medical Association (JAMA)* reported that “COVID-19 introduced stressors to mental health, including loneliness stemming from social isolation, fear of contracting the disease, economic strain, and uncertainty about the future.” The study found that symptoms of the disease increased threefold from four percent in 2018 to 14 percent in 2020.

According to a May 4, 2020 *Wall Street Journal* article titled, “Coronavirus Pandemic is Pushing



America into a Mental Health Crisis,” by William Wan, “Federal agencies and experts warn that a historic wave of mental health problems is approaching: depression, substance abuse, post-traumatic stress disorder, and suicide.”

“Our mental health system was vastly underfunded, fragmented, and difficult to access before the pandemic — and is even less prepared to handle this coming surge,” said Susan Borja, who leads the traumatic stress research program at the National Institute of Mental Health (NIMH).

The data is heart pounding as “nearly half of Americans report the coronavirus crisis is harmful to their mental health,” according to a Kaiser Family Foundation poll. Unfortunately, even though the United States Congress has already passed trillions of dollars in emergency coronavirus funding, only a small portion is allocated for mental health.

Experts testify that mental health trails our initial fear and physical concerns about the virus and that minimal attention is being paid to the lagging physical toll the disease has wrought, which may have a lasting effect on society, families, and relationships.

However, it is the economic effects of the pandemic that has mental health experts alarmed. A study of the great recession established significant links between economic disruption, suicide, and substance abuse. Studies that began in 2007 found that every one percentage point increase in the unemployment rate equated to a 1.6 percent increase in suicide.

TRAUMA ON THE FRONTLINES

The scope of the COVID-19 pandemic has been swift and striking, particularly for healthcare workers. Frontline workers—including healthcare providers, factory workers, grocery store workers, and transportation/delivery people—are especially vulnerable to the coming storm of mental health problems.

Data from crisis hotlines shows social isolation, unemployment, and forced quarantines are having a significant effect on people’s mental health. A recent study of over 1,200 doctors and nurses in China found that half reported depression and slightly less than half reported anxiety and insomnia.

Workload, pressure, and chaos have always been pressure points for doctors and nurses who work in an increasingly dysfunctional health delivery system. And as one mental health expert characterized, “The teapot can only boil for so long.”

Unfortunately, this rising wave of mental injuries will be met in the coming months by a severely broken system. The way the U.S. treats mental illness, experts say, is decidedly different compared with physical illness.

According to the same article in *The Wall Street Journal*, “In the United States, one in five adults endure the consequences of mental illness each year. Yet less than half receive treatment, federal statistics show. While suicide rates have fallen around the world, the rate in the U.S. has climbed every year since 1999, increasing 33 percent in the past two decades.”



COVID-19 has highlighted conflicting messages provided by politicians, scientists, and news media outlets, which has created confusion about best practices to fight the pandemic.



Before COVID-19, a cancer patient could safely secure an oncologist or access an infusion therapy clinic. But patients impacted by mental health issues consistently struggle to find providers willing to cover costs. As many mental health and drug addiction centers are a community based, the pandemic has many on the ropes and the edge of financial collapse with more than half saying that they will have to shut their doors in less than three months. Many have already closed programs.

The cost of improved access is estimated at \$40 billion to save treatment providers and centers and that an additional \$10 billion is needed to respond to the coronavirus pandemic. The NIMH reported that it was

provided less than one percent of the amount requested by mental health groups or about \$425 million in emergency funding.

“According to Chuck Ingoglia, president and CEO of the National Council for Behavioral Health, “There is a loss of mental health services when we need them the most.” COVID-19 has highlighted conflicting messages provided by politicians, scientists, and news media outlets, which has created confusion about best practices to fight the pandemic. The competing stream of information has many people wondering where the truth lies, leading to distrust of government authorities, providing another layer of distress and anxiety on top of the potential physical toll the virus represents.

When it comes to mental health, we believe COVID-19 will impact us in the following ways:

Short-term

- Increased symptoms of anxiety, depression, and obsessive-compulsive disorder
- Negative effects due to self-isolation
- Fear of falling ill and dying
- Fear of losing livelihoods/losing job not be able to work due to illness
- Increase rate of alcoholism and drug addiction
- Increased rate of suicides
- Increases in domestic abuse cases
- Inability to focus and decreased concentration skills for children
- Deterioration of social networks due to isolation
- Increased use of telehealth and temporary relaxation of funding restrictions

Long-term

- Rethinking of the American mental healthcare system
- Increased funding and support for essential workers
- Increased research about chronic stress and effects on overall health
- Increased use of telehealth and social media group therapies
- Increased access to mental health providers by telehealth
- Increased awareness and funding for mental health services
- Data-driven research identifying mental health impacts on rural and urban dwellers
- Increases in therapist-led social media support groups
- The de-stigmatization of mental health and a refocus on holistic care



The invisible nature of this virus and the confusion it has caused requires cool-headed and coordinated messaging from government officials to undo underlying anxieties.



SUMMARY

While many experts acknowledge that everyone is experiencing COVID-19 related stress, they also agree that the effect for most will be temporary. The challenge will be to identify and treat those who develop deeper problems. As the pandemic and economic downturn has affected minority communities disproportionately, the impact on these communities will be even more significant.

There are potential bright spots for post-pandemic mental health.

Increased use of telemedicine could make services more accessible—especially for those

who have access. The pandemic spotlight has highlighted the connections between mental health, drug and alcohol addiction, homelessness, and access to care; reforms may trigger additional focus and better treatment options.

Mental health issues often lag physical health concerns. The invisible nature of this virus and the confusion it has caused requires cool-headed and coordinated messaging from government officials to undo underlying anxieties. As the pandemic has revealed, there are linkages between mental health, economic security, and social strata.

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