



January 5, 2021

HEALTH ALERT: Mental Health and Substance Use During the Pandemic

Summary

San Mateo County Health is providing updated information regarding: 1) adverse mental health conditions, substance use, and other impacts of toxic stress caused by the coronavirus disease 2019 (COVID-19) pandemic; 2) the virus and its epidemiology; and 3) recommendations for healthcare and social services to prevent, identify, and treat mental health and substance use conditions.

Background

In its August 14th Morbidity & Mortality Weekly Report (MMWR), the CDC reported “elevated levels of mental health conditions, substance use, and suicide ideation.” In a survey of 5,412 adults in the U.S. during the week of June 24-30, 2020, 41% reported at least one adverse mental or behavioral health condition. Compared to pre-pandemic periods in 2019, the prevalence of anxiety disorder (25%) was 3x higher and depression (24%) was 4x higher among adults. As the pandemic has worsened and surged since then, the increase of toxic stress, “pandemic fatigue,” and social isolation are affecting both mental health outcomes and COVID-19 transmission.

In its [December 17th Health Advisory](#), the CDC alerted healthcare professionals about the “substantial increases in drug overdose deaths across the United States.” with the largest increase coinciding with the widespread mitigation measures from March – May, 2020. The CDC highlighted “the need for essential services to remain accessible for those most at risk of overdose and the need to expand prevention and response activities.”

In San Mateo County, clinicians and healthcare programs report a substantial increase in youth and young adults with significant mental health issues and more cases of substance use. An epidemic of mental health and substance use issues appears evident in the increased need for acute services, such as those provided by the county’s [Behavioral Health and Recovery Services](#):

- Number of calls to the Behavioral Health & Recovery Services Access Call Center have been increasing since March 2020. Length of calls has increased as well.





- Referrals to the behavioral health clinicians embedded in primary care increased for adults (by 51%) and youth (by 100%).
- 31% increase in number of domestic violence victims served from March to November 2020 versus the same time period in 2019.
- 430% increase in overdose-related referrals to our Medication Assisted Treatment outreach/response team.
- 21% increase in San Mateo Medical Center Emergency Department treatment of opioid use disorders since March 2020, compared to the same period last year.

Despite these indicators of increased mental health and substance use disorders, the pandemic has disrupted access to key health and social services. In the December 11th, MMWR report of increasing percentage of emergency department visits related to child abuse that resulted in hospitalization, the CDC “raises concerns that victims might not have received care and that severity of injuries remained stable or worsened.” Health experts and CDC emphasize “the COVID-19 pandemic and the social and economic effects of mitigation measures, such as loss of income, increased stress related to parental child care and schooling responsibilities, and increased substance use and mental health conditions among adults, increase the risk for child abuse and neglect.”

There is concern that the pandemic has disrupted access to mental health and substance use disorder services on a local level. While we have evidence of increased distress as evidenced by increased calls and referrals as described above, the actual number of people receiving/presenting for services in San Mateo County since the beginning of the pandemic has not increased accordingly. It is concerning that people are not getting treatment and support they need.

Communicable Disease

As the COVID-19 pandemic continues to grow, the science of the virus is better understood. Its transmissibility and virulence impact mental health services, including transmissibility by the daily activities that affect the well-being of our population. Clinical and community services must balance the risks of infection with the benefits of ensuring mental health and local epidemiology in San Mateo County. Four general principles include:

- a. **Transmission without symptoms.** Over half of the cases were infected by individuals who did not have symptoms. *Clinicians and clients may be infectious without any symptoms. Wearing a mask is important.*
- b. **Airborne transmission** of SARS-CoV-2 can occur, particularly with special circumstances. Although most SARS-CoV-2 spreads primarily within a short range



(less than 6 ft), the circumstances in which airborne transmission may increase include: enclosed spaces, prolonged exposure to respiratory particles (particularly from singing, shouting, and talking), or inadequate ventilation. *Because many mental health and substance abuse treatment services have been in enclosed spaces, modifying programs and facilities can reduce transmission while maintaining essential services.*

- c. **Risk of severe illness with COVID-19 significantly increases with age.** Compared to young adults 18-29 years old with COVID-19, older adults 65-74 years old are 5 times more likely to be hospitalized and 90 times more likely to die. Adults with certain underlying medical conditions are also at increased risk of severe illness.
- d. **The 20-39 years age group has the highest number of cases** in San Mateo County. Within the 2-week surge of cases in San Mateo during early November, there was a fourfold increase among whites and twofold among Latinx. *Because many infected young adults have little or no symptoms, they may unknowingly transmit the infection to their own family or extended families of others.*

Recommendations

San Mateo County Health recommends that clinicians and administrators of health care and social service programs strongly consider the increased prevalence of mental health conditions, substance use, and toxic stress in planning their services during this sustained pandemic.

Clinicians

Personal well being. You can't tend to the needs of others if you are overwhelmed yourself. Pay attention to your well-being.

- Manage stress on a daily basis (eat right, get enough sleep, exercise, do meaningful activities, take breaks, use relaxation techniques, establish routines, be realistic about what you can and cannot control).
- Talk to your manager, supervisor or colleagues about your well-being at work, particularly if you are worried about working in the COVID-19 response. If stress is consistently stopping you from doing your daily activities (e.g. going to work) then seek professional support.

Supportive communication

- Use active listening and make adjustments when communicating over the phone (make sure person is able to speak freely, clarify miscommunications, allow for pauses, minimize disruptions, make comments to normalize silences).



- Remind clients that it is normal to feel stressed and overwhelmed in the context of a global pandemic. This validation in itself can be tremendously helpful.

Practical support

- Maintain or increase frequency of screening for mental health symptoms, substance use, suicidal ideation, domestic violence, child abuse, and commercial sexual exploitation of children.
- Screen for basic necessities, food, shelter, clothing, and access to medications.
- Encourage clients to continue to engage with their faith communities for support in safe and socially distant activities.
- Encourage clients to connect with family and friends. Provide ideas and resources on how clients can continue to participate safely in activities such as eating out, social gatherings, physical activity, etc. Crushingthecurve.me is a good resource for youth/young adults.
- Provide social support for clients who have become more socially isolated, such as virtual social meetings on tablets/computers, safe home visits, and letters.

Supporting people who are experiencing stress

- Encourage the person to think of something they can do to feel better (take a walk, try relaxation techniques, listen to music, speak to a friend or family member, read a book).
- Advise people to minimize use of alcohol, drugs, caffeine, and nicotine, which may seem to help in the short term, but they can lead to lower mood, anxiety, difficulty sleeping and even aggression. They can cut down by reducing the amount available in their home and finding other ways to manage stress.
- Encourage people to continue to get the necessary physical, mental or substance use care as needed to maintain their health and wellness. Also, encourage patients to continue to take (and refill as needed) their prescription medications.

Specific situations

- Some people, based on the barriers, bias, and stigma associated with specific aspects of their identity, will face these situations more often and with more severity and may need targeted services and/or referrals.
- Personalize counseling and management in the context of social factors that increase risk such as income insecurity, needing to work outside the home, crowded living situation, limited social support systems, and heightened experiences of discrimination, racism, and stigma.



- Recommend engagement in online and virtual recovery and support groups for those in recovery.
- Be aware that some early symptoms of withdrawal and COVID-19 infection are similar (e.g., fever and muscle soreness).
- Remember that people who use drugs commonly have weaker immune systems, respiratory (breathing) problems, and other conditions that place them at a higher risk of COVID-19.
- Promote harm reduction strategies for people who use drugs and alcohol to prevent overdose, for example:
 - a. Follow [low risk guidelines](#) for safer alcohol consumption.
 - b. Prepare your drugs yourself.
 - c. Test your drugs in small doses and use slowly.
 - d. Avoid mixing alcohol with pills, heroin or fentanyl.
 - e. Don't share supplies.
 - f. Avoid injecting alone.
 - g. Keep Narcan on hand and ask someone to check on you.

Program Administrators

Support for staff

1. Address resiliency building and staff burn-out in the work force. Proactively encourage them to engage in positive self-care strategies and create an environment of collective care between teams.
2. Provide regular training for working in the COVID-19 response. Provide accurate, up-to-date and easy to understand information on staying safe during the COVID-19 pandemic.
3. Have regular meetings to discuss challenges, concerns and solutions. Encourage regular breaks and time for personal connection. Provide information to all staff and volunteers on mental health counseling and support available to them
4. Be aware of staff and volunteers who may be in vulnerable or marginalized situations, and who may require additional support.

Support for clients

1. Expand and improve telehealth videoconference services.
2. Ensure language access is available for telephone and video visits.
3. Identify populations at increased risk for psychological distress and unhealthy coping and provide targeted outreach services.
4. Provide list of community resources



5. The [Headspace app](#) is available for free to all San Mateo residents for meditation, relaxation, sleep and other stress management strategies.

For more information, please visit the San Mateo County Health COVID-19 website at <https://www.smchealth.org/coronavirus>.

More information from the World Health Organization on working with community members can be found here: <https://interagencystandingcommittee.org/system/files/2020-05/Basic%20Psychosocial%20Skills-%20A%20Guide%20for%20COVID-19%20Responders.pdf>.

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