



# The Impact of COVID-19 on Women with Behavioral Health Disorders

Presented by:

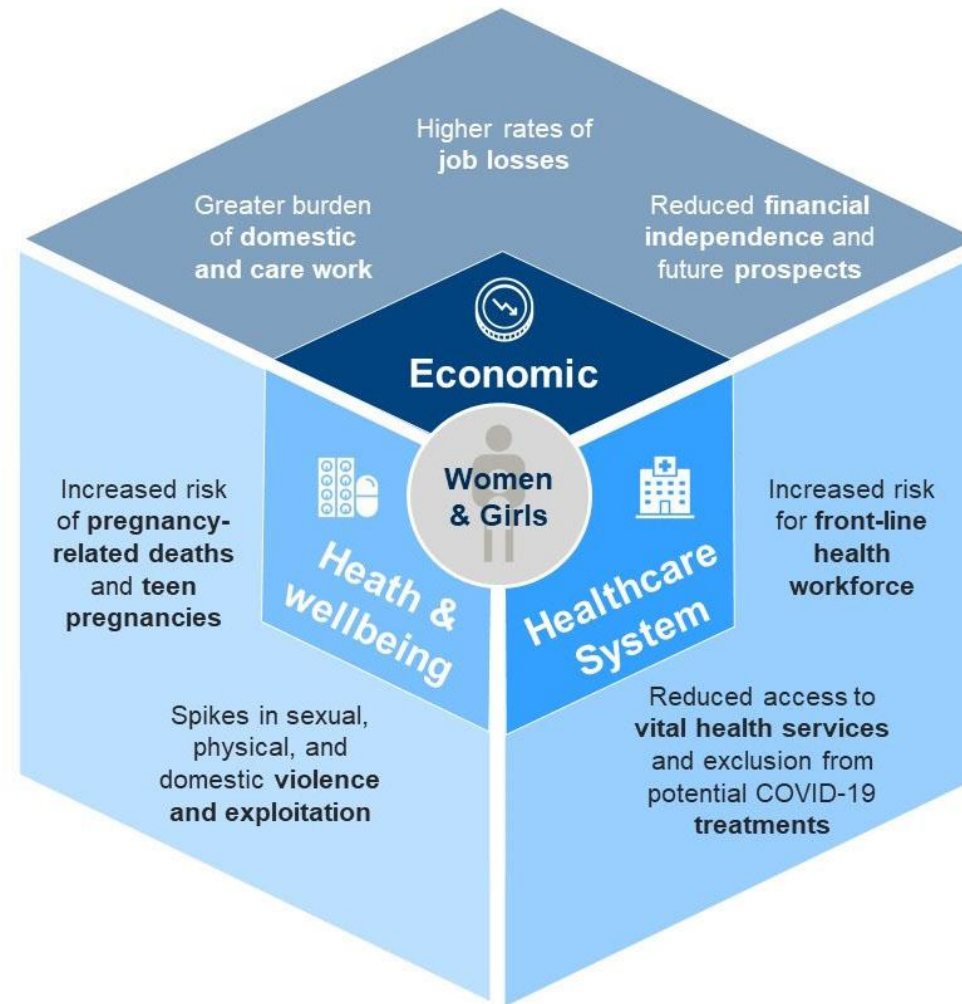
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# Agenda

- Identify risk factors unique to women brought on by COVID-19
- Identify risk factors for behavioral health and the overlap between COVID-19
- Understanding women with behavioral health issues as a vulnerable population
- Understand the specific vulnerabilities for central populations (pregnant & parenting women, women with substance use disorders, etc.)
- Identify resources

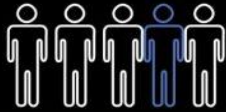
# Risk factors unique to women caused by the pandemic

<https://www.un.org/en/sections/issues-depth/gender-equality/>





Approximately 1 in 5 adults in the U.S experiences mental illness in a given year.



Suicide is the 10th leading cause of death in the United States. It accounts for the loss of more than 41,000 American lives each year.

U.S population 324,459,463

41,000 lost to suicide

Half of all mental health disorders show first signs before a person turns 14 years old, and

**3/4** of mental health disorders begin before age 24.



## Mental Health Awareness

Sources: <https://www.mentalhealth.gov/basics/mental-health-myths-facts>

One in 25 Americans lived with a serious mental illness, such as schizophrenia, bipolar disorder, or major depression.



The risk of homelessness is

**10 to 20** times greater for those who are living with a mental illness.



Mood disorders, including major depression, dysthymic disorder and bipolar disorder, are the third most common cause of hospitalization in the US.



## WHO IS AFFECTED?

**7.7**  
**MILLION**

Adults have co-occurring mental and substance use disorders. This doesn't mean that one caused the other and it can be difficult to determine which came first.

Of the 20.3 million adults with **substance use disorders**,

**37.9%**

also had **mental illnesses**.



Among the 42.1 million adults with **mental illness**,

**18.2%**

also had **substance use disorders**.



National Institute  
on Drug Abuse

Source: Han, et al. Prevalence, Treatment, and Unmet Treatment Needs of US Adults with Mental Health and Substance Use Disorders. 2017.

# Onset of COVID- 19 & Behavioral Health

## **Isolation**

- Benchmark of behavioral health
- Diagnostic criteria for Depressive Disorders

## **Fear, worry & stress**

- Normal reaction to uncertainty
- Individuals with anxiety disorders (PTSD) are already living with these symptoms (Fight, flight, freeze)

## **Decrease in access to community based supports**

- Mental health clinics temporarily closed or operating at a reduced capacity (phased reopening happening now)
- Transportation Barriers
- Access to medications
- Limited capacity of all providers to offer timely telehealth options (insurance reimbursement & barriers)



# Dysregulation in the “new normal”

## Domestic

- Increased risk of IPV and Child abuse
- Housing & Food insecurity
- Lack of personal time to implement coping strategies

## Familial

- Loss of childcare & home schooling
- Additional responsibilities schooling children
- Helping children cope and process change

## Industrial

- Economic impact for those with job loss or reduced schedules
- Working from home
- Temporary unemployment

# Pregnant Women



## Prenatal care

- Some testing requires in person visitation
- Support people not generally allowed- miss events such as ultrasounds

## Increased anxiety/ uncertainty about what birthing experience might look like

- Limitations to number of support people for labor & delivery and recovery
- Testing for COVID-19
- Separation of mother/baby in positive cases
- Breastfeeding
- Child Abuse Prevention & Treatment Act (CAPTA)

## Reduced community capacity of supports

- Mommy & me groups, breastfeeding support, child care, etc.
- Post-partum aftercare & screening for PPD & PPA

# Specific Risk factors for individuals with Substance Use Disorders

# Isolation

- Using alone increases risk of overdose & death
- No one to provide Naloxone to reverse overdose
- Reduced access to AA/NA meetings, sponsors, in-person treatment, medications, etc.

# Availability

- Increased risk due to stimulus funding
- Unable to participate in conventional coping techniques
- Boredom



# Opioid Use Disorder

## Connecticut remains in an opioid epidemic

Projections in data suggest increase in overall overdose fatalities

- CT Statewide Opioid Reporting Directive (SWORD) reports that in April 2020 10% of overdoses were fatal which is the highest monthly fatality percentage  
<https://portal.ct.gov/DPH/Emergency-Medical-Services/EMS/OEMS---SWORD>

# Pregnancy and COVID-19



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Audrey Lennon  
02/06/20



# Resources



## DMHAS System of care & COVID- 19 Response

- Real-time bed availability for SUD treatment  
[www.ctaddictionservices.com](http://www.ctaddictionservices.com)
- <https://portal.ct.gov/DMHAS/Newsworthy/News-Items/DMHAS-Response-to-COVID-19>
- Women's REACH Program:  
<https://portal.ct.gov/DMHAS/Programs-and-services/women/womens-reach-program>

## InTheRooms.com

- a free online recovery tool that offers 130 weekly online meetings for those recovering from alcoholism or drug addiction. The meetings require only an internet connection and a device and provide support from those in recovery from around the world
- [www.intherooms.com](http://www.intherooms.com)

## Uniformed Services University

- **COVID-19 PANDEMIC RESPONSE RESOURCES**

A collection of 150+ free tools, trainings, webinars and resources, broken down into content specific subgroups. Examples include resources for health care workers; resources for families; resources for community leaders.

- This site provides the collective information and resources from:
  - World Health Organization (WHO)
  - Center for Disease Control and Prevention (CDC)
  - Walter Reed Army Institute of Research (WRAIR)
  - Substance Abuse & Mental Services Administration (SAMHSA)
  - Department of Veterans Affairs National Center for PTSD (VA)
  - National Child Traumatic Stress Network (NCTSN)

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# References