The COVID-19 pandemic presents unprecedented challenges to the short and long-term mental health of Tarrant County.

This report includes:

- A review of key areas of impact, implications on the mental health service delivery system in Tarrant County
- Discussion of pre-pandemic trends
- A call to action to strengthen the community’s capacity to respond to dynamically changing needs

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The COVID-19 pandemic presents unprecedented challenges to the short and long-term mental health of Tarrant County residents. In prior epidemics, the number of people whose mental health was impacted far outpaced the number of people who were infected[1].

VIOLENCE AND ABUSE
Families are under intense stressors exacerbated by social isolation and economic strain. Vulnerable children depend on adults in schools, faith, and other organizations to initiate protection against abuse. Official child abuse reports have declined[2]. and experts have raised concern about likely increases in actual abuse.[3][4] Cook Children’s reported an increase in severe incidents of abuse after shelter-in-place orders.[5].

Social distancing reduces the vital roles of outsiders who initiate referrals for assistance – examples include teachers making reports to CPS, neighbors and friends facilitating help-seeking behaviors. Police reports for domestic violence began to increase across the United States[6] in the weeks following COVID-19 social distancing orders.

ALCOHOL/DUPLICATE AND RELAPSE
Many will turn to alcohol as a coping response to the pandemic.[7] Alcohol purchases increased dramatically in the weeks following social distancing orders in the US[8], and the World Health Organization sounded alarms about short- and long-term consequences, including lowering immunity to the life-threatening virus and increases in overall health and mortality risks.[9].

DEPRESSION, GRIEF, AND LOSS
Social isolation and confinement resulting from COVID-19 are associated with increased depression and psychological distress.[10] Forty seven percent of adults who were sheltering-in-place reported a negative impact on their mental health.[11] Groups especially vulnerable to increased mental health impacts include older adults, those experiencing cognitive decline, and those experiencing mental health stressors prior to the pandemic.[3] With suicide and distress on the rise in Tarrant County prior to COVID-19, the exacerbation of depression, grief, and loss is a serious concern.[12]

ECONOMIC STRAIN
Economic stressors are associated with increases in mental health conditions, depression, substance abuse and suicidality.[13] The United States unemployment rate reached 14.7% in April 2020, the highest observed since the Great Depression. Of further concern is a forecasted rate of 9.5% in 12 months, comparable to recession rates from 2009.[14][15]

COVID-19 EXPOSED
Front-line health care workers, persons infected with the virus, and families with infected loved ones are likely to experience traumatic-stress symptoms, exhaustion, and grief.[3] The high mortality rate of the virus means that the potential and actual loss of lives leaves devastating consequences, with disparate impacts on African American communities.[16]

ONGOING IMPACT
When considering the added influence of long-term economic strain, communities should anticipate a snowball effect of mental health symptoms. Following disasters, up to half of directly exposed community members show signs of post-traumatic stress disorder while 10% of those in the
vicinity (non-exposed) demonstrate PTSD symptoms.\textsuperscript{17} \textsuperscript{18} Lingering trauma symptoms, sleep disturbances, depression, anxiety, and suicidality are expected for years to come.\textsuperscript{19} \textsuperscript{20}

The end of a viral pandemic is unpredictable, and this uncertainty can result in a chronic sense of fatigue and fear\textsuperscript{1}. One of the major causes of such psychological distress is stress itself, in other words, the problem is the problem. Watchful waiting for the “next event” becomes emotionally exhausting and magnifies vulnerabilities into a continuum of day-to-day life issues\textsuperscript{21}. With the pandemic, communities face repeated threats and exposures. Comparably, in the Gulf Coast region of Texas where communities face repeated hurricanes, residents showed poorer self-rated physical and mental health than non-exposed parts of the US.\textsuperscript{22}

**MENTAL HEALTH NEEDS AND SERVICES: AN INVERSE RELATIONSHIP**

As the need for mental health support increases, actual service utilization in Tarrant County is declining in some sectors. Typical service delivery methods, such as office visits, were suspended with varying plans to resume. These plans will be further deterred by June 2020 upward trend of COVID-19 cases. In addition, when services are available, individuals’ perceptions of being safe remains a concern. These and other factors influence the job security of mental health practitioners. In fact, a national survey of behavioral health organizations showed that 61.8% of organizations closed at least one program due to COVID-19, and 46.7% have had to, or plan to, lay off or furlough employees.\textsuperscript{23}

The secondary consequences resulting from efforts to deter the spread of the virus has created an additional set of conditions that exacerbate day to day stress.

- Recently unemployed or underemployed adults are emotionally impacted by financial insecurity and meeting basic needs for food, payment of past due bills, and maintain stable housing.
- Parents are homeschooling children, while many are simultaneously juggling working from home. The socioeconomic context of vulnerable consumers groups varies as they struggle to get their needs met.
- Essential workers, especially healthcare professionals, are overscheduled and overexposed to the trauma of responding to COVID-19 infections and deaths. As COVID-19 cases continue to trend upward in Texas, so will the impact on essential workers. In addition, many of these workers are parents of young children, or children of older parents. The fatigue, stress, and physical deterioration can impact family support, regardless of the best intentions of all members.
- Individuals and family members experiencing increases in conflict, depression, and/or substance misuse may not know how, or be in a place of readiness, to access outside assistance.

**IMPLICATIONS FOR THE STATE OF TEXAS**

The Meadows Mental Health Policy Institute has calculated statistical models predicting the relationship between COVID-19, signs of economic downturn, and resulting increases in deaths due to suicide, overdose and violence.\textsuperscript{24} These are shown in the figure below.
PRIOR TO PANDEMIC

- **Tarrant County faced a shortage of psychiatrists and other licensed mental health providers.** [25] Among the five largest counties in Texas, Tarrant County has the second worst ratio of mental health providers to residents at 820 to 1. [26]

  **This is a critical concern** – In 2016, the number of behavioral health counselors was 9,620 and the need for counselors was expected to climb to 17,140 by 2030 [24].

- Multiple Tarrant County community assessments and monitoring of behavioral health indicators showed numerous areas of risk [26] [27] [28] [25] and heightened concern before the pandemic.

  The Healthy North Texas Community Health Dashboard show these trends from 2011-2017:
✓ Upward trends in suicide rates

Measures of frequent mental distress are available as a county health ranking indicator [26] (from Behavioral Risk Factor Surveillance System and are administered in every state.

✓ Upward trends of residents reporting mental distress. Mental distress includes the percent of adults who stated that their mental health (stress, depression, and/or problems with emotions) was not good for 14 or more of the prior 30 days.

✓ Medicare recipients treated for depression climbed significantly since 2010. Approximately 1 in 5 residents over the age of 65 were already experiencing depression.

*Medicare is a federal health insurance program for those 65 and older & those with certain disabilities or health conditions.
✓ Interpersonal Violence & Abuse in Tarrant County in 2018:
  o 5,842 children in Tarrant County were identified as victims of abuse or neglect, with 78% of parents being the most likely to perpetrate those harms [28].
  o 1 in 3 women affected by intimate partner violence; with
  o 52 women killed by current or former partners between 2013 and 2017, 65% of those murdered after the relationship ended [29].
✓ Substance use
  o Approximately 1 in 10 adult females and 1 in 5 adult males in Tarrant County report monthly binge drinking and 5% of women and 10% of men report heavy drinking [28].
  o In all of Region 3, which includes Dallas and 17 other surrounding counties, Tarrant County represented 60% of those who received substance use disorder treatment in 2015 from state funded programs [30].
✓ Poverty and Economic Strain
  o Economic stressors were a significant concern for families in Tarrant County prior to the COVID-19 pandemic, with underemployment, food insecurity, housing instability, and transportation barriers creating interwoven layers of strain [31].
  o In Tarrant County, 16% of households were food insecure [26] and 25% of households were classified as ALICD: Asset Limited, Income constrained, and employed, living above the poverty level but below basic cost of living [32].
  o US Census data released in September 2019 showed the number of people in Fort Worth whose income was below the poverty level increased by almost 3%, from 13% in 2017 to 15.6% in 2018 [33].
SURVEY RESULTS OF TARRANT COUNTY MENTAL HEALTH ORGANIZATION LEADERSHIP

The Mental Health Connection of Tarrant County sent a rapid assessment survey in May 2020 to 28 organizational leaders in order to “test the temperature” of leadership regarding the challenges presented with COVID-19. Findings are summarized below:

<table>
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<th>Percentage</th>
<th>Need/Situation</th>
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<tbody>
<tr>
<td>89%</td>
<td>Expect mental health service needs to increase as result of COVID</td>
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<tr>
<td>84%</td>
<td>Need resources to support self-care of mental health staff</td>
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<tr>
<td>63%</td>
<td>Significantly concerned about revenue gaps resulting from changes in contracts, billing and decreased fundraising.</td>
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<tr>
<td>53%</td>
<td>Lacks resources and expertise needed to respond effectively to the changing mental health needs of the community</td>
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<tr>
<td>46%</td>
<td>Significant need to hire additional mental health staff</td>
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**NEEDED TANGIBLE SUPPORT:**
Over half reported a need for the following in the next 18 months:

- 89% will need personal protective gear
- 84% will need resources to screen consumers and workforce for COVID-19
- 68% will need equipment or other resources to offer secure e-health services

**A CALL TO ACTION**

In the wake of this catastrophic pandemic, Tarrant County must be a forward-thinking community implementing transformational strategies to build our “community resilience.” In the midst of mass layoffs, anticipatory anxiety of COVID-19 spikes, and fear of long-term economic consequences, the challenges must be met with successful, innovative and effective ways to address the mental health needs left in the wake of this tragic time. Tarrant County must also be prepared for upcoming setbacks.

In the face of wide-spread trauma, communities can mobilize social support networks and display ingenuity in adapting to change. Military psychologists have studied the phenomenon of “post-traumatic growth” and report that many infantry officers who completed combat reported the development of self-efficacy, a deeper sense of love, courage and gratitude. There is evidence to consider that “post-traumatic growth” will be a bequest as we move from calamity to a new reality.

**Whole Society Approach**

Global pandemic experts recommend a coordinated set of actions that promote resilience and offer mental health supports in all sectors, including education, faith, health, mental health, business, non-profit, governmental, etc.; 

The mental health and emergency management communities should work together to identify, develop, and disseminate evidence-based resources related to disaster mental health, mental health triage and referral, needs of special populations, and death notification and bereavement care.
Risk-communication efforts should anticipate the complexities of emerging issues such as prevention directives, vaccine availability and acceptability, and needed evidence-based interventions relevant to pandemics and should address a range of psychosocial concerns [36]

**Planning**

There is a need to plan for and use new resources to strategically build an infrastructure that has the capacity to respond effectively to future wide-spread crises. [3] Despite the growing body of evidence in support of the effectiveness of e-health interventions for mental health, they remain significantly underutilized and communities lack training and resources to effectively deliver care remotely [37]. Unprecedented change calls for a pivot to restructure the delivery of health and mental health services [38].

*Moving Forward Together: A Call to Action for Tarrant County to Meet the Behavioral Health Challenges for the Future*, provides a useful framework for Tarrant County to assess the impact of new approaches to achieving an integrated continuum for community behavioral health and wellbeing.

<table>
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<tr>
<th>Moving Forward Together: A Call to Action for Tarrant County to Meet the Behavioral Health Challenges for the Future</th>
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<tbody>
<tr>
<td>Health behaviors and the social and physical environment in which individuals live, work and learn have a stronger influence on well-being than clinical services alone. [41]</td>
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<tr>
<td><strong>Moving Forward Together includes:</strong></td>
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<tr>
<td>1) Making behavioral health a shared value</td>
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<td>2) Fostering cross-sector collaboration to improve population well-being</td>
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<tr>
<td>3) Creating healthier, more equitable communities</td>
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<tr>
<td>4) Strengthening integration of behavioral health services and systems county-wide</td>
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- **Formalization of a community partnership**

An approach for Tarrant County’s behavioral healthcare delivery system is to be holistic, collaborative, and dynamic, utilizing alliances to engage countywide planning and implementation for all healthcare providers to prevent behavioral health conditions of high prevalence and cost that are amenable to change.

- **Data Access**

Data-driven decision-making will be crucial to an effective community response. Indicators of community mental health and resilience are needed to establish priorities and monitor progress. Unfortunately, most publicly available indicator data is one or more years old when it becomes available or is shared in community assessments. While these data are valuable to monitor trends and establish baselines, community disaster responses require a more rapid and accessible assessment process. Currently, trend data can be found at:

- Population Health Institute County Health Rankings  
- DFW Hospital Council Foundation: www.healthytexas.org
- Tarrant County Public Health: http://access.tarrantcounty.com/en.html

Rapid collection and assessment of data will likely be less rigorous than these indicator sources and it will be crucial for community partners to use rapid measures with a clear understanding of their
limitations. However, as part of an overall strategic planning process, the combination of rapid measures and existing indicators can help guide an effective community response.

**Current local data assess needed for mental health/substance misuse resource allocation and funding requests** - As part of an overall strategic planning process, the combination of rapid measures and existing indicators is key in guiding an effective community response. It is essential in being able to quickly identify and respond to changing mental health needs and key in communicating, relevant, current, local data for the requisition of needed funding and tangible supports for organizations. There is a need for more effective integration of mental health assessments and COVID-19 testing, screening and screening protocols. [38].

**A NEW NORMAL**

In the face of wide-spread trauma, communities can mobilize social support networks and display ingenuity in adapting to change. [3] From the ashes, there is the likelihood of a more compassionate, resilient, and thriving community for all who live here.
Works Cited


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The report citation is: