Mental Health Treatment Approaches in a World With Covid: You Can Do It!

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Outline

• Virtual sessions
  – Tips on doing clinical work virtually
  – Crisis sessions right now

• Psychological First Aid
  – Maslow's hierarchy of needs
  – Specifics for children

• Fears
• How to help the people we serve and their families
  – Schedule/routine
  – Activities
  – Answering questions
  – Just being there

• Post-covid
  – Psychopathology
  – Resilience

Video Technology & Its Pluses

• Technology
  – Set expectations for quality of image/sound

• The frame- lighting, background, clothing, eye contact, gestures, sound, visitors, headphones, resting face

• Pluses- see people at home, meet family, see surroundings (clues), patients like it especially kids
  – Closest we get to home visits
How to Work Clinically

• The process
  – Your focus, getting used to a screen
  – Forget you are on a screen and do what you normally do in outreaches
  – Structuring the family or support systems a bit
    • You need to talk a bit more, keep it going
  – Make your clinical observations, mental status exam etc.
  – Can have patient show you their tremor, gait, and some physical exam findings

Psychological First Aid

• Preventative intervention to decrease rates of PTSD in a disaster
  – Goal to prevent later MDD, PTSD, ETOH use disorders
  – Evidence informed
  – Adopted by American Red Cross & Nat'l Center for PTSD
  – Start at base of Maslow's hierarchy of needs and work upwards
Psychological 1st Aid Components

- Provide for basic needs
- Protect from further harm
- Decrease agitation and arousal
  - Support those most in distress
- Give families social support
- Provide information, foster communication and education
- Orient to available services
- Use effective communication strategies
  - From presentation by Craig Katz, MD (Mt Sinai School of Medicine)

Who Will You Help?
Psychological First Aid

<table>
<thead>
<tr>
<th>Safety &amp; Physical Needs</th>
<th>Survivors</th>
<th>Bereaved</th>
<th>Responders</th>
<th>Economically Impacted</th>
<th>Community at large</th>
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<tbody>
<tr>
<td>Medical Needs</td>
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<td>Mental Health Needs</td>
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<td>Psychosocial needs</td>
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Psychological First Aid for Kids

- Listen, Protect, & Connect
  - Listen- observe for signs, symptoms
  - Protect- prevent overexposure to trauma, protect from too much information
  - Connect- help kids reach out to friends, teachers, neighbors electronically
Covid & Kids - Chinese Studies

• Increase in clinginess, distraction, irritability, & fear of asking questions about epidemic (2/2020)
• 3-6yo: clinginess, fear family will contract
• 6-18yo: inattention, persistent inquiry
• All ages: clinging, inattention, irritability
• In high epidemic areas, increased fear/anxiety in kids
  (Jiao et al, 2020)

Important Elements in Intervening During Mass Traumatic Events

• Promote a sense of safety
• Promote calming
• Promote a sense of self & collective efficacy
• Promote connectedness
• Promote hope
  (Hobfoll 2007)

Basics

• Have to start with basic needs
• Offering support is most important (oxygen)
  – 1st Fellow human - compassionate
  – 2nd health professional
  – 3rd mental health professional
• No empirical data on use of psychopharm in immediate aftermath
  – Clinically ativan (benzo) short term rec
    – C Katz (Disaster Psychiatry Outreach)
Fears

- Fear of illness
- Fear for older family members
- Fear of not seeing family members
- Fear of being alone/lonely
- Fear of going stir crazy
- Fear for their children if parents become ill
- Fear of being stuck in an apartment, a city, inside
- Fear of being in a shutdown city in crisis
- Fear not getting supplies (groceries)
- Fear of hospitals overwhelmed

- Fear about economy, lost jobs, unemployment
- Fear effects of school being closed
- Fear of not seeing friends
- Fear of being stuck at home with family, siblings
- Fear of being stuck in tight quarters, no space to quarantine
- Fear of losing job
- Fear of having work while having children at home
- Fear of future - unemployed, no money
- Fear of falling behind (students)

Additional Fears - Essential Workers

- Fear for getting exposure/sick at work
- Fear for making own family sick
- Fear of taking public transportation
- Fear/stress about obtaining childcare
- Fear/guilt that cannot do enough
- Fear for losing one’s job

How Can Our Clinical Work Possibly Help Now?

- Giving structure and support
- Being available to check in
  - They are not alone
  - Most crises people come together, here they have to stay apart
  - Offer to have more frequent shorter sessions
- Assisting as bridge to care manager and medical and psychiatric providers
Schedule/Routine

- Help individuals, families, and systems work on **schedules and routines**
  - Decreases anxiety
  - Increases predictability
  - Time goes by faster when we are occupied

- Plan for crises when coping overwhelmed
  - Lack of structure, people being cooped up, want to go outside

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Crisis Sessions - Work on Schedule/Routine

- Make schedule with patient
  - Healthy habits
  - Exercise
    - What can you do in the apartment?
      - Dance, yoga, stretches
      - Cosmic kids yoga
  - Projects/Activities - long, slow ones
    - Structured around strengths, skills, and interests
    - Puzzles
    - Sensory – play dough, kinetic sand, water trays
  - Facetime sessions with friends/family
  - Help them map out the next month
    - Help them plan for new normal, even once things start to open
An initiative of the New York State Office for People With Developmental Disabilities

Covid Questions

• They will ask you and see you as medical expert, even if you don’t feel like it
• What does quarantine actually mean?
  – Adult with recent hepatitis going to grocery store and having helper travel by subway to work for her
• Recommend limiting media exposure- being strategic about it
  – Traumatizing itself
  – Think dosage that is beneficial

Activities---

• Puzzles
• Board games
• Clean closet
• Redecorate, reorganize- work on project you never have time for
• Play dough, kinetic sand, fidget toys
• Facetime get togethers
• Art projects, cooking
• Look outside
• Sit near a sunny window- some sun everyday if possible
• Youtube (e.g. guitar lessons, yoga lessons)
• Access virtual tours of museums, zoos, places online
• Monterey Bay Aquarium webcams
• Free Coursera course (Yale course)- Science of Wellbeing

How Are We All Doing?

• How can we use each other during this time?
• How can we stay in balance ourselves?
• How can we modulate our own fear and anxiety?
• How can we keep it positive?
Risk Factors for Post-Pandemic Psychopathology

- Dose of trauma, level of exposure to traumatic events
- Prior exposure to trauma
- Prior psychiatric history
- Problems in living prior to pandemic (e.g. poverty, overcrowded living condition, etc)
- Lack of perceived or actual social supports after pandemic
- Presence of "secondary stresses" (e.g. unemployed)
- Female
- Middle age
- Minority ethnic background

- From presentation by Craig Katz, MD (Disaster Psychiatry Outreach)

Sequencing

Early On / Now
- Psychological first aid
- Basic psychosocial health
- Our START work

As Time Goes On...
- Monitor for re-emergence of prior psychiatric symptoms
- Triage and referral for formal mental health treatments
Planning for Post-Covid

• Increase need for mental health
• PTSD, depression, alcohol use disorders
  – In study of health care providers, post-SARS, very high rates of these

Resilience

• Realistic optimism
• Facing fear
• Moral compass
• Spirituality
• Social support
• Resilient role models
• Physical fitness
• Cognitive/emotional flexibility
• Meaning and purpose
  • Research of Dennis Charney, MD (Mt Sinai School of Med)

Nurturing Resilience in Kids - Suggestions for Families

• Increase communication with children to address their fears & concerns
• Play collaborative games to decrease loneliness
• Physical activities
• Music/singing to reduce worry/fear/stress
• Sleep hygiene
• Relaxation strategies
• Model positive attitude to decrease stress
• Distract attention toward more productive/positive activities

(Jiao et al., 2020)
Thank You!