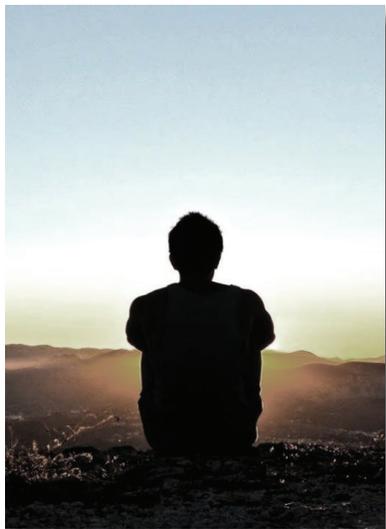




# The Mental Health Toll from the Coronavirus

This article is from Tom Insel.

## The Mental Health Toll from the Coronavirus Could Rival that of the Disease Itself



Tom Insel has watched the nation grapple with plenty of psychologically challenging situations over his long career in the field of mental health. The psychiatrist became director of the National Institute of Mental Health (NIMH) in the months following 9/11 when Americans were traumatized over the twin tower bombings. He watched residents of Louisiana and Mississippi dig out from the waterlogged rubble of Hurricane Katrina. He's seen mass shootings in Tucson, Fort Hood, and Newtown.

But nothing in Insel's experience has tested the nation's psychological resilience like COVID-19, which has millions of Americans living in fear of contracting a deadly new disease, hunkering down in involuntary confinement, contemplating rising unemployment and the prospect of a worldwide economic collapse, cut off and worried about loved ones, besieged by a parade of bad news, and tormented by boredom, fear, and loneliness.

Mental health experts are now bracing for what Insel calls a "mental health tsunami." They're anticipating a steep rise in the diseases of isolation—suicides, opioid abuse, domestic violence, and depression—that will unfold over the next few months and could stretch on for years.





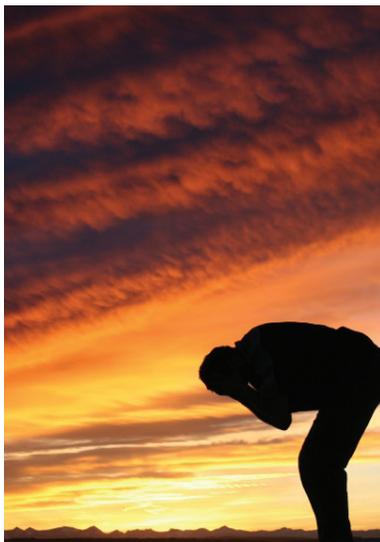
The plague is not only fueling these mental health problems. The same economic collapse that is putting people out of work is also eroding the ability of society to deal with the crisis. In particular peril are the federally funded mental health clinics that treat millions of the poorest and sickest. Two months into a crisis that could last years, they are already on the edge of failure.

Casualties from the mental health problems are expected to rival the pandemic itself. Deaths from drug overdoses and suicide totaled about 110,000 a year before COVID-19 struck. Historically, each five percent increase in the unemployment rate leads to about 3,000 additional suicides and 4,800 overdose deaths, says Insel. That means an unemployment rate of 20 percent would cause an additional 20,000 deaths.

*"We've never seen a moment where the demand for mental health care will be as great as it's going to be in the next few months and next couple of years,"* says Insel. *"If you add the spike in suicides and drug overdoses we are likely to see, to those we were already expecting, the psychological toll from deaths of despair in the months ahead could very likely surpass the final mortality numbers for COVID."*

### **The Disaster Model**

Mental health fallout usually follows a disaster. In hurricanes, there's generally a 60 to 90 day lag from the "acute" phase of the crisis before the full psychological fallout is felt. Once the imperative to survive the immediate calamity passes and people begin to grapple with what they have just been through and what it means for the future, their resilience faces its true test. The psychological impact begins to show in a rise in suicides, alcohol and drug related incidences, and new mental health related cases. Economic downturns typically take a couple of years before the impact begins to show in the statistics that suggest the true mental costs on the population.



The 2003 SARS epidemic was followed by a 30 percent increase in suicide deaths among those 65 and older in Hong Kong. Half the population remained anxious in the months that followed. As many as 50 percent of New Orleans residents who were present during hurricane Katrina experienced a diagnosable mental disorder such as PTSD, major depression, or an anxiety disorder.

*"Likewise,"* says Stefan Hofmann, a clinical psychologist who directs Boston University's Psychotherapy and Emotion Research Laboratory at the Center for Anxiety and Related Disorders, *"once the viral pandemic passes, there will be the pandemic of emotional distress."* Hofmann predicts the full extent of the damage won't be clear for months, and it may unfold at a different pace for different people.





In a national survey of more than 20,000 responses to Barna/Gloo research, emotional stress is the most commonly identified challenge, beyond immediate health, food, and financial issues, during this pandemic. However, one simple but powerful practice can be used for reducing anxiety and deepening connection, and that is when our conversations move from head-to-head to heart-to-heart. We'll describe this deepening of relational exchanges as we practice "hope-filled" conversations even in a pandemic.

You might say for example: *"When this coronavirus crisis passes, what are you looking forward to? I know I'm looking forward to more time with kids and grandkids and a night out with a couple of friends at a nice restaurant, where they actually wait on you! What about you?"*

Next, we listen for how we respond heart-to-heart. We listen, so we can care! In this case, we practice responding to what we have just heard in one of three ways through celebration, common interest, or compassion.

**1. We can celebrate!**

*"Matt, I'll look forward to you being able to do that." (air high five)*

**2. We can find common interests.**

*"I'm also looking forward to seeing a lot more of my family too. Let's plan to compare stories about our time reengaging with family."*



**3. We can express compassion.**

When I asked a friend this, "what are you looking forward to," question during a recent ZOOM meeting, I was shocked when he said, *"I'm looking forward to getting out of the house to see other family and grandkids since my wife and special needs daughter are quarantined at home with the virus!"*

I had not heard this news. So, don't be surprised when you ask about hope, if it uncovers pain and a heart-to-heart response. You then respond with compassion.

*"I'm very sorry you're going through that, and I'll be praying for your safety and getting to see your family soon."*

Neither celebration nor anything else but compassion met my friend heart-to-heart! Now is a great time for hope-filled conversations at home or with friends, while sheltering in place or online. Our heart-to-heart connecting through hope-filled conversations means, ***"You're not alone, and I care!"***

