

Virtual Pre-Conference

# Continuity of HIV Care in the Presence of COVID-19



## Managing Mental Health Conditions in a COVID-19 Context

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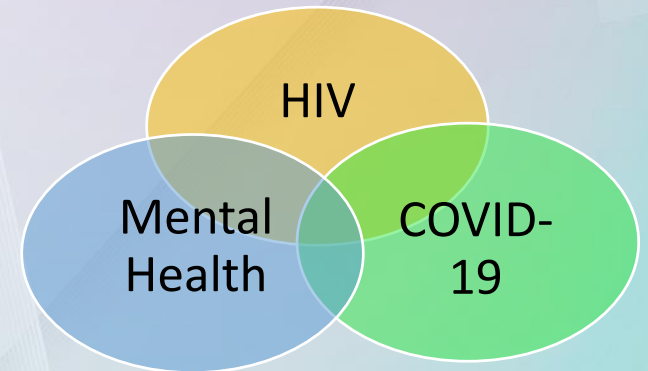


May 6, 2020

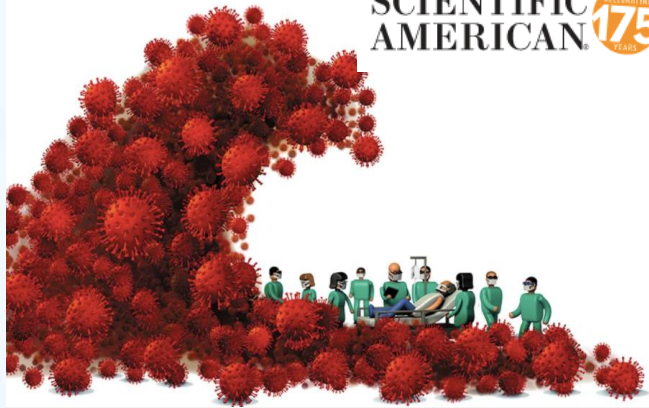
# OUTLINE



- Psychological challenges in the HIV and COVID-19 pandemics: similarities and differences
- Mental health challenges associated with the COVID-19 pandemic
- Strategies for coping with the COVID-19 pandemic
- Impact on the healthcare system
- Hope for the future: changes and innovations

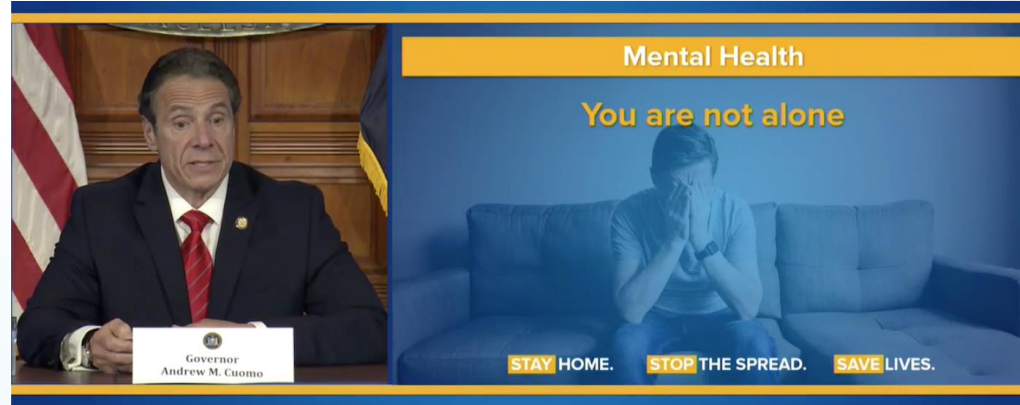






## Psychological Trauma Is the Next Crisis for Coronavirus Health Workers

Hero worship alone doesn't protect frontline clinicians from distress



**Coronavirus is causing a mental health crisis. Here's how to fight it.**



**American Psychological Association** @APA · Apr 30

The **#COVID19** pandemic is not only a threat to our physical health, but to our **mental health** as well. Dr. Roxane Cohen Silver says that it's important to acknowledge the collective trauma we are all experiencing and identifies some ways to help us cope.



**We Are Doctors Who Study Trauma. Here's How To Cope With The C...**  
 "We are experiencing collective trauma unlike anything previously experienced in America," two experts say.  
[huffpost.com](https://www.huffpost.com)



**Mayor of London (gov.uk/coronavirus)** @MayorofLondon · 1m

Whilst we may be apart, I want you to know that you're not alone. Free help is available to any Londoner struggling with their **mental health** in this **crisis**. We've put together a list of some great organisations who can support you. Take a look:

**IT'S OKAY IF YOU  
DON'T FEEL OKAY.  
HELP IS AVAILABLE.**

#LONDONTOGETHER



Free online tools and resources for mental health

[www.good-thinking.uk](https://www.good-thinking.uk)



# HIV

## Psychological Impact: Early Days

## COVID-19



Lack of Effective  
Therapy

Experimental  
Treatments

Fear of Contagion

Isolation

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Shame

Secrecy

Discrimination





HIV

# Multiple Loss and Grief

COVID-19



Overwhelmed:

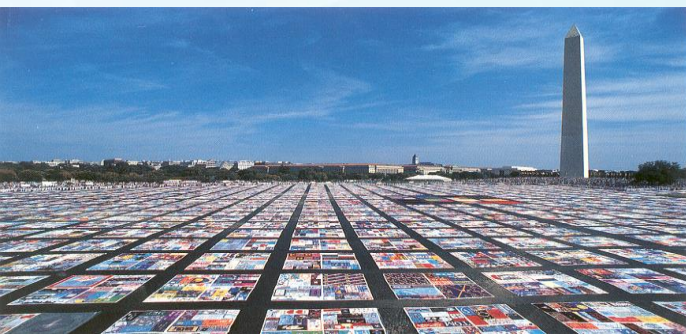
Hospitals

Morgues

Funeral Homes  
Cemeteries

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Economic  
Hardships

Emotional  
Toll





# Other “Early Day” Commonalities: COVID and HIV



- Confusing and conflicting messaging about how to behave, contributing to **fear, anxiety, and insecurity**
- Lack of - or poorly coordinated - gov't response; dependency on **community** organization, **activism**, and volunteerism
- Misinformation and politicization of the issues, contributing to **frustration, anger, and more fear**

Dr. Anthony Fauci in a Leadership Role



Dr. Anthony Fauci (right); President Reagan and members of the President's Commission on AIDS in 1987.

Credit...Diana Walker/The LIFE Images Collection, via Getty Images

# HIV and COVID: Striking Commonality



## Concentrated Burden in Vulnerable Communities

- Racial and ethnic minorities; immigrants
- Those with reduced financial means
- Those with lack of adequate healthcare access
  - During COVID: "Essential workers" - not able to "shelter in place" (often synonymous with above demographics)
- For PLWH: vulnerability for "re-traumatization"
- Those with mental health conditions may also have increased vulnerability to coronavirus acquisition

# Mental illness is a risk factor for HIV acquisition



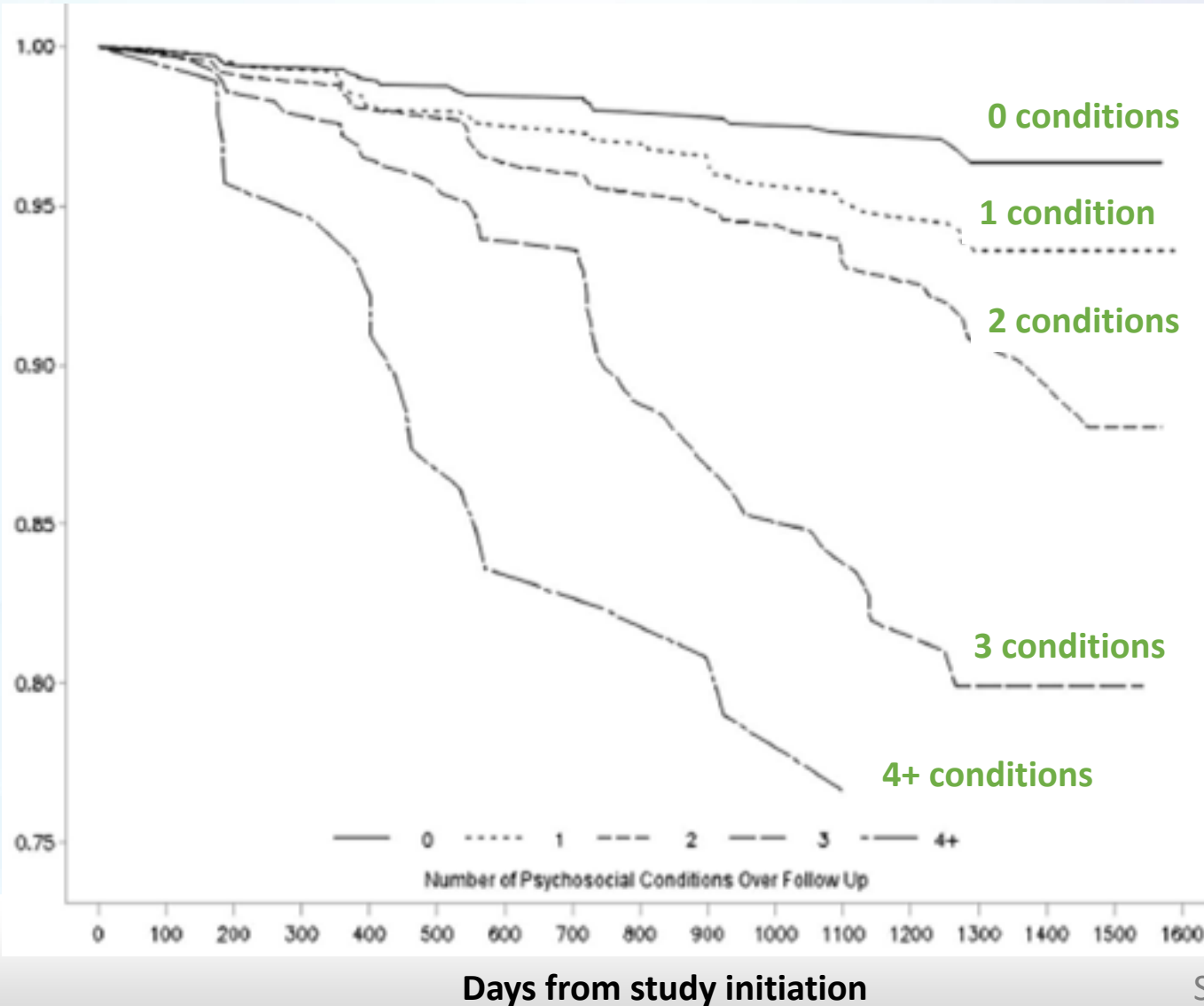
- Mental illness contributes 4 to 10X increased risk for acquiring HIV
- Mood disorders + alcohol/substance use + other conditions contribute even higher risk



# Multiple Co-occurring Conditions Magnify HIV Risk



Probability of remaining HIV seronegative

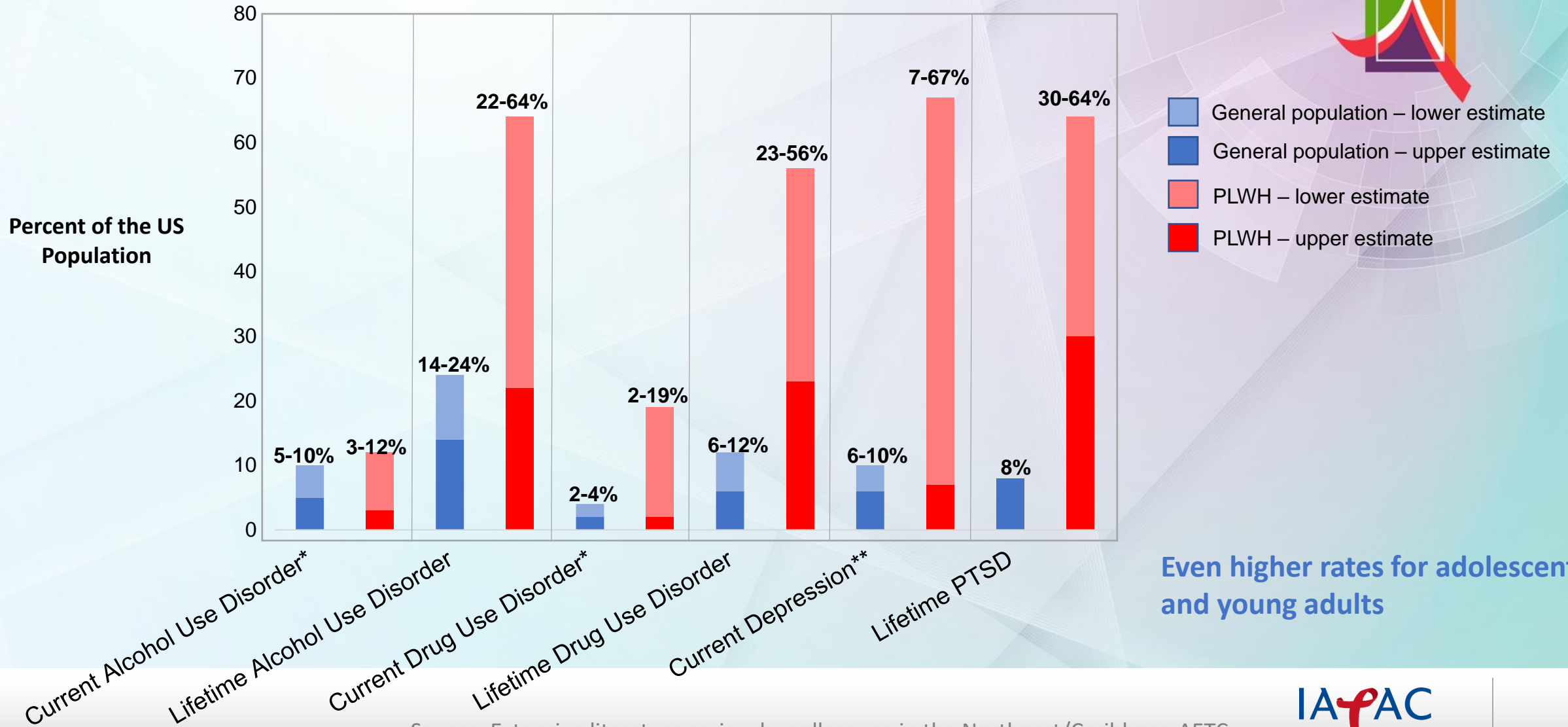


- 4295 MSM from 6 US cities
- Co-occurring conditions
  - Depressive symptoms
  - Heavy alcohol use
  - Stimulant use
  - Poly drug use
  - Childhood sexual abuse

**Probability of staying HIV negative goes down as number of conditions increases**

Source: Mimiaga et al. JAIDS, 2015

# Rates of Selected Psychiatric Disorders: United States General Population vs PLWH



Source: Extensive literature review by colleagues in the Northeast/Caribbean AETC  
See also Remien, Stirratt, Nguyen et al., AIDS, 2019



# The Most Common Mental Health-Related Problems that are High among People Living with HIV



|   |                                   |
|---|-----------------------------------|
| ■ Depression                                  | 7-67%                             |
| ■ Alcohol and other substance use disorders   | 2-19% (Current) 22-64% (Lifetime) |
| ■ Anxiety disorders                           | up to 40%                         |
| ■ PTSD (lifetime)                             | 40-64%                            |
| ■ HIV-related symptomatic Cognitive Disorders | 28-50%                            |
| ■ Pain  | 28-97%                            |
| ■ Insomnia                                    | up to 60%                         |

These are also some of the same MH problems that are now emerging during the COVID-19 Pandemic.

# Psychiatric Vulnerabilities in the COVID-19 Pandemic



- Increased rates of depression, anxiety, substance use, and PTSD disorders have been found to follow natural disasters, such as earthquakes, hurricanes, tsunamis, or floods
- People with pre-existing vulnerabilities to psychiatric disorders including anxiety, depression, obsessional symptoms, substance use, suicidal behavior, and impulse control disorders are likely to be especially vulnerable to stress-related symptoms
- Long after the physical threat of infection has subsided, psychological sequelae in vulnerable people, and behavioral effects of persistent distress will likely be ongoing



# Psychological Challenges in the COVID-19 Pandemic



- Physical/Social Isolation
  - Loneliness
- Coping with Loss: personal and community
- Anxiety
- Increased use of alcohol, tobacco and other drugs
- Difficulty sleeping and/or concentrating
- Potential job loss → lower self-esteem
- Especially difficult for populations with pre-existing mental health conditions

# Signs of Distress During the COVID-19 Crisis



- Feelings of numbness, disbelief, anxiety or fear
- Changes in appetite, energy, and activity levels
- Difficulty concentrating
- Difficulty sleeping or nightmares and upsetting thoughts and images
- Physical reactions, such as headaches, body pain, stomach problems, and skin rashes
- Worsening of chronic health problems
- Anger or short temper
- Increased use of alcohol, tobacco, or other drugs



# COVID Illness and Neurological Sequela



- Over 1/3 of patients are developing neurological symptoms
  - Encephalitis
  - Strokes
  - Seizures
  - **Hallucinations**
  - **Inflammation in the brain and CNS**
- COVID-19 crosses the blood-brain barriers; thus can have neuropsychiatric consequences

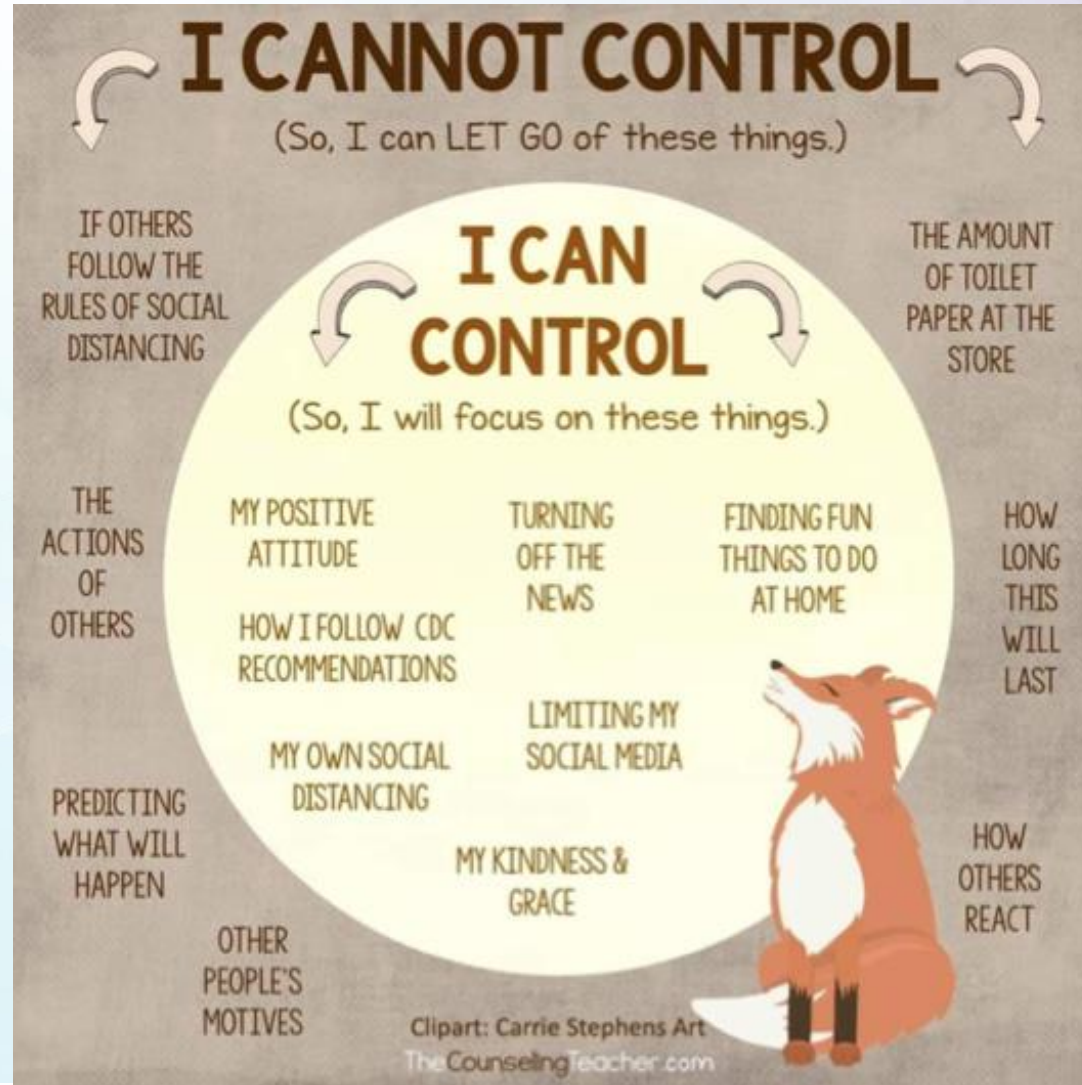
# Unique Challenges for Healthcare Providers



- The scale of this pandemic can be overwhelming, and standard training plans and responsibilities have been significantly altered - having to work outside of areas or expertise
- Many are thrust into an unprecedented situation of caring for an overwhelming number of patients for whom no specific effective treatment exists
- Many are expected to provide intubation services to patients in the hospital with respiratory distress, but the PPE provisions and protocol are totally inadequate
- Many are helping extraordinary numbers of patients manage their anxiety, and for dying patients, connecting them to their families for the last time, or being alone with them as they die
- The work is likely highly intense and involves non-stop critical care; and can include physical isolation from family
- Message to Providers: Regardless of how healthy or well adjusted you are, the experience of stress, anxiety, frustration, and other emotions are likely to emerge



# Tips for Everyone: Coping



Slide courtesy of Ann Marie Albano, PhD, ABPP



### **HOPE**

Cultivate optimism. Accept change, be flexible, and remember struggles are transient.

### **REFLECT**

Journal to identify coping skills that were effective in the past. Find meaning in this event and purpose in your role in it.

### **CULTIVATE GRATITUDE**

Savor small positive experiences. Identify 5 things daily for which you are grateful.

### **CONNECT**

Invest meaningfully in your relationships. Practice vulnerability and seek support from trustworthy and compassionate individuals.

### **PRACTICE MINDFULNESS**

Do what centers you. Breathe, meditate, get outside, use your 5 senses to ground yourself. Be aware of unhelpful thought patterns. Redirect rumination to problem solving.

### **LIVE YOUR VALUES**

Remind yourself what is truly important to you, and let that guide your actions. What is one small way you can live your values today?

### **BE FLEXIBLE**

Practice flexibility of mind and behavior by noticing and accepting changes in circumstances and forging novel and creative paths forward.

### **ENGAGE IN SELF CARE**

Check in with yourself. Are you getting your basic needs met? Do one pleasurable activity every day.

### **FORGIVE**

Be generous with yourself and others. Difficulties present opportunities for growth, self-discovery, and learning. Be realistic with your expectations.

## **GROWING RESILIENCE**

### **Tips to Weather Harsh Seasons**

Anna E. Allmann, Ph.D

Research indicates that stressors and adverse life events pose challenges for many people's mental health. Resilience is a set of traits and skills individuals use to adapt and even thrive during adversity. Growth mindset suggests that with practice, people can grow in resilience. Here are 9 evidence-based methods to improve your coping strategies now.

# Managing Stress: Evidence-based Strategies



- Soothe yourself
  - Meditate, pray
  - deep & slow breathing
  - Relaxation exercises
  - Yoga, mindfulness
  - Stretching
- Hydrate & eat healthy when you can exercise
- Get some rest and when you can sufficient sleep
- Avoid excessive alcohol intake
- Reach out to others
- Don't make decisions now that result in major life changes
- Ask for assistance & delegate
- Turn off the news....limit how much and who you watch
- Go outdoors when possible!





# Tips for Those Working from Home



- There is no longer a built-in separation between work and home life
  - Providing telehealth & work from home may increase feelings of isolation and stress
  - Need to take time to settle in & check out of work/home
  - Try to set aside a specific room & time for telehealth sessions at home
  - Set "work hours" & leave time for breaks
  - Set schedules for time with your family and friends

# Distinction between Mental Distress and Mental Disorders during the COVID-19 crisis



## Mental Distress

Can occur in response to any adversity.

Commonly seen in response to the COVID-19 crisis.

Likely most severe among workers on the front lines of responding.

- Often does not meet criteria for a psychiatric diagnosis or require specialized mental health interventions.
- Often responds well to supportive strategies..

## Mental Disorders

Usually cause either persistent severe subjective distress and/or functional impairment.

Meets recognized diagnostic criteria (ICD, DSM).

Calls for evidenced informed mental health interventions such as medication and psychotherapy.

Rules have been relaxed for providing mental health services by virtual means

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END THE STIGMA & DISCRIMINATION OF MENTAL ILLNESS @ [bringchange2mind.org](http://bringchange2mind.org)





# Disruptions in “Routine” Healthcare Due to COVID-19 Pandemic



- Disruptions will further strain the mental health and primary care systems and expose limitations of its infrastructure, work force, and accessibility.

# What Needs to be Done?



- Efforts should begin with those who are at increased risk of adverse mental health outcomes
  - Pre-existing mental disorders vulnerable to such stressors
  - People who reside in high COVID-19 prevalence areas
  - People who live with someone affected by COVID-19
  - People who have a family member or close friend who has died of COVID-19
  - People who are socially isolated/ have little available emotional support
- For health care professionals:
  - Mitigating adverse mental health effects involve ensuring adequate protective personal equipment
  - Providing access to COVID-19 testing
  - Providing education concerning the disease, and training in COVID-19 management
  - Providing emotional and physical support, developing more flexible work schedules, and a commitment to support and care for workers who become ill
- Increased primary care mental health surveillance through routine screening for depression, anxiety, and substance use coupled with greater availability of mental health services within primary care
  - Will enable scale-up of mental health treatment in a familiar setting
  - Look to nurses and social workers to provide brief evidence-based psychotherapy to treat complicated grief, adjustment disorders, mild-moderate depression

# Looking Forward



- Psychiatry is particularly suited to use of virtual methods of providing mental health services. While telemedicine technology has existed for almost three decades, it took the impetus of the COVID-19 crisis to overcome the inertia of practitioners
- The COVID-19 pandemic presents new challenges to health and mental health care delivery – but also opportunities
- Developing support groups and peer counseling services, crisis helplines, expanding services and enhancing accessibility through the use of telemedicine, and formalizing linkages between primary care and specialty mental health services may help address some of the emerging mental health needs.
- Careful planning and integration of basic mental health services into outpatient primary care will be critical to minimizing the adverse mental health effects of the COVID-19 pandemic.



# Lessons Learned from the HIV and COVID-19 Epidemics May Help Advance Integrated Care



- Although the brain and the body form an integrated system, the care for them tends to exist in siloes



SAMHSA-HRSA CIH

*Doherty et al, 2013*

## COORDINATION

We discuss patients, exchange information if needed  
Collaboration from a distance

## CO-LOCATION

We are in the same facility, may share some functions/staffing, discuss patients

## INTEGRATION

System-wide transformation, merged practice, frequent communication as a team

Advances in tele-health care delivery can help overcome some obstacles to care integration

# Acknowledgements



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