

Caring for Mental Health in a World of Uncertainty

Post-pandemic America is facing a mental health crisis, but collaboration and creativity in healthcare aim to improve the nation's mental wellness.

By Lee Warren

IN THE WAKE of the unprecedented global events of the past few years, our country is grappling with a profound mental health crisis. Recent studies underscore the heightened likelihood of an escalating burden of mental health disorders in the post-pandemic era, reflecting a spectrum of challenges, from anxiety and depression to substance abuse and suicidal tendencies. As we navigate this era of uncertainty, the statistics paint a concerning picture.

Each year, more than 20 percent of U.S. adults experience mental illness (57.8 million in 2021); just over five percent experience serious mental illness; and nearly 17 percent of U.S. youth between the ages of 6 and 17 experienced a mental health disorder in 2016. And, suicide is the second leading cause of death among people between the ages of 10 and 14.¹

Table 1. Annual Prevalence Rates of Any Mental Illness Among All U.S. Adults by Demographic Group

Demographic	Prevalence
All adults	23%
Asian adults	16%
Native Hawaiian or Pacific Islander Adults	18%
Black Adults	21%
Hispanic or Latino Adults	21%
White Adults	24%
American Indian or Alaskan Native Adults	27%
Adults who Report Mixed/Multiracial	35%
Lesbian, Gay or Bisexual Adults	50%

Source: National Alliance on Mental Illness. You Are Not Alone. Accessed at www.nami.org/NAMI/media/NAMI-Media/Infographics/NAMI_YouAreNotAlone_2023.pdf.

Mental illnesses include varying degrees of severity, ranging from mild to moderate to severe. In a 2021 study, the prevalence of any mental illness (AMI) was higher among females (27.2 percent) than males (18.1 percent). Young adults aged 18 to 25 years had the highest prevalence of AMI (33.7 percent) compared to adults aged 26 to 49 years (28.1 percent) or aged 50 and older (15.0 percent).² And, some demographics are more susceptible than others to mental health challenges (Table 1).

The Pandemic Effect

In December 2021, the *New York Times* asked 1,320 mental health professionals how their patients were coping as pandemic restrictions eased. Nine out of 10 therapists said the number of clients seeking care is on the rise, and most are experiencing a significant surge in appointment calls and longer waiting lists.³

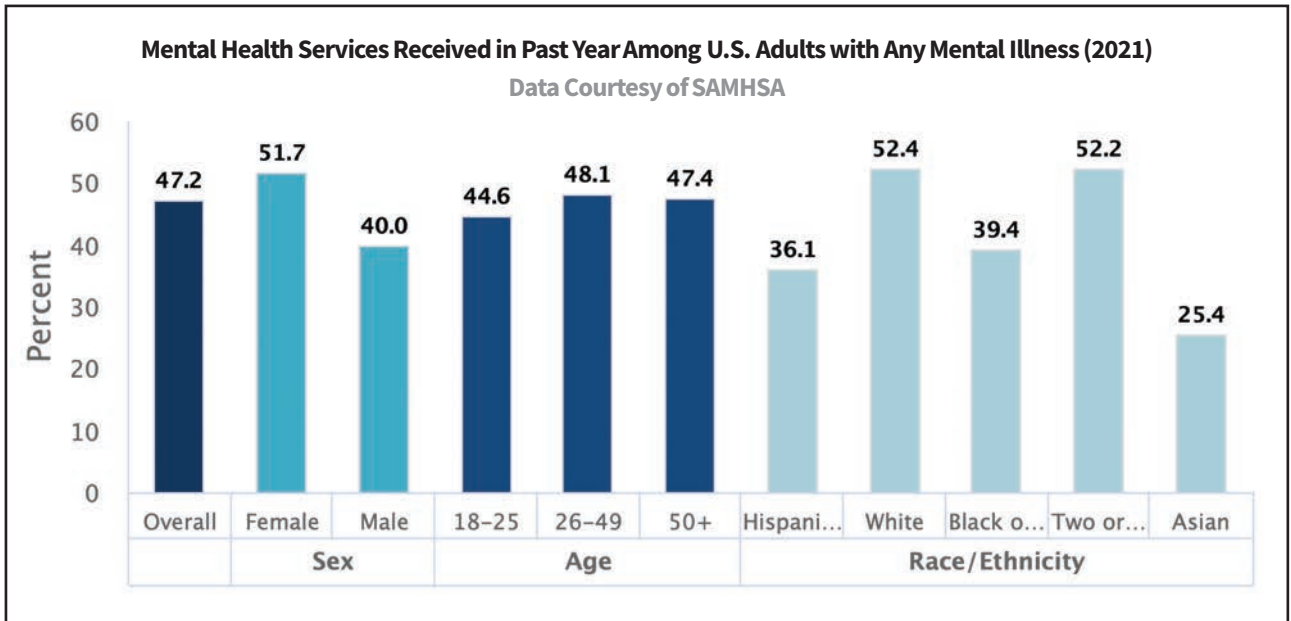
One Boston University study revealed that depression rates tripled, and symptoms worsened during the pandemic. The statistics reveal an increase in depressive symptoms in Americans from 2021 (32.8 percent) compared to 2020 (27.8 percent), with just 8.5 percent before the pandemic.⁴

During the pandemic, at least four in 10 adults (41 percent) experienced high levels of psychological distress, and more than a third (37 percent) of high school students reported mental health challenges.⁵

But the pandemic isn't the only cause. The list of additional reasons for the mental health crisis is a long one, including but not limited to patients with social and economic inequalities, public health emergencies, traumatic events, economic stressors, the death of a loved one, divorce, political unrest, war, genetic factors, chronic homelessness, loneliness, climate change, childhood sexual abuse, as well as exposure to toxins, alcohol or drugs while in the womb. Further, technology also contributes to feelings of isolation, loneliness and depression among an older demographic that struggles to use it, and students are facing challenges that are unique to their generation in the form of cyberbullying.

The Medical Crisis

When considering all these modern mental health challenges, it's understandable why mental health services jumped by 38.8 percent among U.S. adults with commercial health insurance between 2019 and 2022.⁶ The increase has put a real strain on the healthcare system. Another study paints an even clearer, more disturbing picture: One-third of respondents could not get the mental health services they needed.



Eighty percent cited cost, and more than 60 percent pointed to shame and stigma as the primary obstacles.

Complicating matters further, 60 percent of psychologists do not have openings for new patients.⁷ In a study of more than 16,000 psychologists, more than half (56 percent) do not even keep waitlists. Of those who do, 17 percent reported their waitlist had shortened while more than double (38 percent) reported that their waitlist had grown over the previous 12 months. Not only is demand for services up, but psychologists are reporting an increase in the severity of symptoms among patients, and many say an increased length of treatment is necessary for existing patients. Perhaps it's no wonder that in that same study, 36 percent of psychologists said they are burned out.⁸

As a result, in another study, one in five psychologists (21 percent) said that they were planning to reduce their practice hours in the next year. The good news is nearly three-quarters (73 percent)

said they were able to practice self-care and nearly two-thirds (63 percent) said they were able to maintain a positive work-life balance.⁹

The Medical Response

For all these reasons, the medical response to the mental health crisis is complicated, multifaceted and, in some cases, broader than one might expect. Here are some approaches:

- *Telehealth.* The idea behind telehealth, which was used extensively during the pandemic, is that it allows patients to be seen faster and, therefore, diagnosed earlier so they can be more efficiently and effectively treated. Telehealth allows in-person therapists to focus on higher acuity patients who truly require them.

- *Digital self-help tools.* Wearable devices, sensors and mental health apps are being used to point patients toward proper diagnosis and care. These tools can provide remote monitoring, as well as real-time data collection and intervention. For example, some of these tools can

target trauma (such as post-traumatic stress disorder); some can help women adjust to menopause; and still others can help patients with anxiety. These allow patients to be treated for whichever specific mental or behavioral health issue they are experiencing.¹⁰

- *Integration of mental health into primary care.* Emphasizing a collaborative approach addresses mental health issues early on and eases the burden on providers. One study said more than four in five psychologists (86 percent) have worked alongside other healthcare providers. Seventy six percent of psychologists said they collaborate with psychiatrists; 45 percent said they collaborate with other physicians (occupational therapists [30 percent], physician assistants [41 percent], community health workers [30 percent] and speech language pathologists [28 percent]).⁹ Healthcare workers are also receiving ongoing training to enhance their understanding of many variations of mental health issues that patients face.

- *Crisis intervention programs and hotlines.* These services give distressed patients access to mental health professionals who can provide immediate support. In 2022, the National Suicide Prevention Lifeline’s 10-digit phone number changed to 988, making it easier to remember and quicker to dial. It offers crisis care and also links to the Veterans Crisis Line, putting people in crisis in reach of the professional help they need.

- *Community or county mental health center programs.* These facilities provide outpatient services, medication management, case management services and more. They often manage contracts with mental health service providers such as psychiatrists, psychologists, social workers and counselors, and make referrals. The centers often allow for emergency walk-in services and some have mobile crisis units.¹¹

- *School-based cognitive behavioral therapy.* This therapy is led by trained school staff or other designated health leaders. One study of such a group of 41 participating schools that taught emotional regulation, anxiety management and problem-solving were randomized into three arms: health-led, school-led and a comparison group of personal, social and health education that was provided by the school staff. The health-led group was more effective in decreasing social anxiety and generalized anxiety.¹²

- *Federal funding.* In 2022, the Department of Health and Human Services, through the Substance Abuse and Mental Health Services Administration and the Office of Minority Health, announced a \$35 million plan to fund opportunities to strengthen and expand community mental health services and suicide prevention programs for America’s children and young adults through seven types of grants.¹³

- *Mindfulness-based interventions.* These strategies incorporate mindfulness practices such as meditation, yoga and art therapy. This option is especially used among Generation Z, which is said to be one of the most stressed generations of our time.

- *Workplace mental health initiatives.* These programs are good options for helping employees reduce stress and promote a work-life balance, as well as overall health. Certified Angus Beef and TiER1 Performance Solutions are two such companies. Certified Angus Beef provides on-site wellness consultations with a clinical psychologist in addition to holding lunchtime learning sessions regarding mental health stigma, as well as promotion services that are available to employees. TiER1 Performance Solutions has a “Start the Conversation about Mental Illness Awareness” campaign that focuses on depression, anxiety, obsessive-compulsive disorder, schizophrenia, bipolar disorder and addictions.¹⁴

- *Artificial intelligence (AI).* AI is allowing doctors to obtain a more comprehensive understanding of patients’ mental health by gathering feedback and following trends.¹⁵ It’s also being used to analyze medical images to expedite pathology assessments. Further, it’s being used to assist with diagnoses faster and more accurately. And, AI can help minimize wait times for patients. Humber River Hospital in Toronto was the first in Canada to track and control patient flow with AI.

Ongoing Challenges, Original Solutions

While formidable challenges exist in our current mental health crisis, collective efforts are being made to address and alleviate the burden on our healthcare system. The array of options available today reflects a departure from

the limitations of the past, offering new avenues for individuals to seek and receive support. While the challenges are real, so are the solutions. It is crucial to continue fostering awareness, dismantling the stigma and advocating for improved access to mental health services. As communities consistently prioritize mental well-being, a sense of hope will emerge in the ongoing commitment to care for those genuinely in need. ❖

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