Person-Centered Mental Health Care in the New Normal

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The COVID-19 pandemic has had a devastating impact on the mental health of our society—especially kids, seniors, and those with disabilities. I speak from experience as someone with autism; anxiety; non-epileptic seizures caused by past trauma, stress, and anxiety; and as someone from a family with history of mental health challenges. At the start of the pandemic in March 2020, I suffered my first panic/anxiety attack, given all the chaos COVID-19 began to cause.

There are many others like me. Given our high risk for long-COVID and poor outcomes, medical providers need to be trained on not making assumptions that physical issues are "all in our heads;" especially for people who have pre-existing anxiety issues and those who most likely had COVID-19 but never tested positive and developed ailments seen in long-COVID.

COVID-19 has also been shown to worsen mental health challenges in autism and other neurodiverse populations.[1] One study showed that COVID-19 often presents worsening neuropsychiatric symptoms in the autism population.[2] In other words, COVID-19 worsens anxiety, concentration, sleep, gut issues, vitamin absorption, and so forth.[3] COVID19 has been shown to lead to development of PTSD in people with autism.[4]

To address these issues, society and our health care system must treat physical health and mental health equally. Medical providers need to be trained to not make assumptions that physical issues are "all in our heads"—especially when treating people with pre-existing anxiety issues and patients who, despite never testing positive, develop ailments seen in long-COVID. We also need improved

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[1] https://www.wcax.com/2022/06/08/study-suggests-autism-increases-risk-covid-complications/
[2] Long COVID Syndrome Presenting as Neuropsychiatric Exacerbations in Autism Spectrum Disorder: Insights for Treatment - PubMed (nih.gov)
[3] https://pubmed.ncbi.nlm.nih.gov/36579544/
[4] https://www.sciencedirect.com/science/article/pii/S1750946722001295

access to functional medicine and touch therapies—like massage, acupuncture, zero balancing, and myofascial release—that are essential when dealing with issues that Western medicine may not fully address.

We must seize this moment in history to create a more equal, person-centered new normal that leaves no one behind. The time is now to use the opportunities the pandemic has presented us to develop a robust person-centered mental health system and culture that is free of stigma. For far too long mental health issues have been dealt with under a "hush hush" or "we don't talk about this" mentality. This is due to stigma around psychiatric disabilities, like bipolar disorder, depression, post-traumatic stress disorder (PTSD), and anxiety. Society views mental health issues as the person's fault—and seniors, people of color, people living in poverty, and people with disabilities bear the highest burden.

One major example of how our current mental health system is not person-centered New York City's policy to force people with mental health challenges to be involuntarily hospitalized against their will.[5] A more person-centered solution would be to invest in Universal Basic Income, which has been shown to improve mental health and wellbeing.

The pandemic has also given us a new opportunity to tackle chronic poverty and societal challenges. For instance, having access to hazard pay and stimulus checks were very helpful in supporting people with disabilities, low-wage essential workers, and others, to afford the high cost of living, PPE, and work-from-home necessities. The stimulus checks were also a big help with the cost of mental health. Money should never be a barrier to anyone seeking care.

Last, but not least, COVID-19 has put a spotlight on the importance of self-care, especially in the workforce and schools. We must expand options for therapy and support groups, and make them affordable to low-income populations, seniors, other minorities, and the disability community. Additionally, telehealth is a great option to have because it gives us more choice and makes it easy to access services without worrying about travel.

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[5] https://www.cnn.com/2023/02/04/us/new-york-city-involuntary-commitment-directive/index.html#:~:text=New%20York%20state%20enacted%20a,humanely%20treating%20mentally%20ill%20people.

Following are just some ways we can reduce stigma and make the mental health system more person-centered:

1. Talk openly in the business and educational world about mental health challenges by creating a culture where people feel OK to say, "I have a mental health diagnosis."
2. Educate policymakers on the need to reduce barriers to mental health care.
3. Add mental health days as part of school and work benefits packages.
4. Increase Medicaid and Medicare rates and expand mental health coverage in all federal health care programs for people with disabilities, low-income, and other vulnerable populations.
5. Encourage the media to do PSAs on mental health stigma on the radio, social media, etc.
6. Fund peer-run mental health groups through Medicaid, Medicare, and private insurance to allow mental health providers to hire people with lived experience to support those new to mental health systems.
7. Move away from the "quick fixes" of always treating mental health challenges with drugs. In other words, focus on treatments with the least amount of side effects, given that many people with disabilities can't tolerate intense side effects.
8. Embrace and include alternative medicine as a part of standard treatment options (for example, massage, myofascial release, acupuncture, zero balancing, etc.).
9. Be proactive in reducing burnout at work.
10. Consider the benefits of moving our society to a 4-day work/school week. Every "TGIF" — (Thank Goodness It's Friday) is "quiet Friday" (day of no email and no meetings!)
11. Study and pilot Universal Basic Income (UBI) and Guaranteed Income programs that have been shown to improve mental health.[6] [7]
12. Train medical students, long-term care providers, and employers on how to be trauma sensitive. This is essential especially for people with autism who are often more sensitive to big or little traumas.

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[6] https://www.sciencedirect.com/science/article/abs/pii/S0277953621007061
[7] https://www.psychologytoday.com/us/blog/hygieias-workshop/202009/universal-basic-income-and-mental-health

13. Prioritize well-being and slowing down in all aspects of life. The pandemic exposed how our society often neglects mental health and self-care. It is important for businesses to create a work culture that celebrates and supports self-care. As humans, we are not machines. The health of staff is vital to a healthy bottom-line. Our "hustle culture" is also not beneficial to people with disabilities and chronic health issues.

14. We must challenge ourselves to create a healthier new normal regardless of whether we are off the clock or not, remote, or face-to-face in the business world.[8]

This blog is the work of Nicole LeBlanc and does not necessarily represent the views of the NCAPPS program at HSRI, the Administration for Community Living or the Centers for Medicare and Medicaid Services.

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[8] https://www.bizjournals.com/sanfrancisco/news/2022/10/07/the-new-normal-let-s-make-well-being-endemic-in-o.html