FAMILY MENTAL HEALTH IN THE TIME OF COVID-19
Patrick McGrath and Stanley Kutcher | May 25, 2020

Most of us have experienced the challenges of distancing and isolation necessary to contain the COVID-19 pandemic. It wears you down. For most families these create challenges in daily life: more stress, some arguments, hurt feelings and some reluctance to venture forward as restrictions lessen. Many, though, have learned to improve relationships and develop new skills. Families with good mental health cope with challenges that they face. Some may have benefited from self-management programs that have proliferated during this time, others have adapted using age-old techniques of personal support and advice from others.

However, emerging data suggest that for an important minority of families, perhaps as many as 25%, the challenges at this time are much greater. These families often, but not always, were dealing with significant mental health problems before the pandemic. These families with poor mental health, stumble from one crisis to another.

Imagine: A child’s turmoil, living with an Anxiety Disorder, overwhelmed by relentless news about infection and death; the teenager struggling with Depression who as a result of their illness only sees catastrophe ahead; the young person with a psychotic illness whose mental state interferes with their ability to adapt to the new reality; the angry aggressive child whose behaviours dominate every aspect of family life; the woman being beaten behind the closed doors of COVID-19 imposed isolation; the young parent who has taken to drink or drugs to manage the stress and the single parent living with Depression who is trying to do their best in parenting their child, while verging on relapse. For these Canadians, the pandemic has made mental health problems worse.

Prior to COVID-19, Canada had been failing these families. Mental health has been the poor relative of our health system. The waitlists have been long and for many, the care is simply not available. Only a fortunate proportion of families dealing with significant mental health problems received high quality, evidence based care. With the pandemic their needs have increased and we must respond.

Mental health problems affect all social classes but the poor experience greater challenges and have fewer resources. The Canada Emergency Response Benefit, if it were to become a guaranteed annual income program would help lift this unfair burden. Similarly, the At Home/Chez Soi research study has demonstrated a positive impact in combatting severe mental health problems through supported housing. These social interventions must be adapted and widely applied.

Post COVID-19 we need more than the same, inadequate, services with a bit of virtual care tacked on.

We need systems of care that will help overcome the shortage of specialized professionals, and increase access to those most in need. And yes, we need these services to be delivered both virtually and face to face. If we are to serve the numbers who need help, we must make maximal use of highly trained paraprofessionals working in defined roles with adequate support. Mobile crisis teams should be
available in all communities. These can effectively and efficiently reach out to people when their needs are greatest. And we need widespread, aggressive, science-based assistance for the children who are failing to learn in school because of behavioral and emotional problems. These programs are intensive and balance the less extensive programs for families who are doing well and can use a bit more.

We need to continue to expand programs in schools that will teach about mental health as well as helping young people learn to better regulate their emotions. Providers, such as personnel working in food banks, could be trained to help identify people who are experiencing domestic violence. Then, we need specific programs to assist those abused. Teachers need training how to reach out, support and identify those young people in need. Waitlists in mental health need to be seen as urgent as waitlists in cancer care.

The impact of COVID-19 on the mental health of individuals and families is challenging us to think more creatively about how we deliver mental health care. We must take up this challenge, innovate and invest primarily where the needs are greatest, for those who are seriously impaired, not just in programs for those who can use a bit of additional learning. It is only then that we can move forward and better serve all Canadians.

Dr. Patrick McGrath is Professor Emeritus in Psychiatry at Dalhousie University, Chair of the Board of the Strongest Families Institute in Halifax Nova Scotia and Chair of the Royal Society of Canada’s Mental Health Working Group in the COVID-19 Task Force.

Dr. Stanley Kutcher is Professor Emeritus in Psychiatry at Dalhousie University and is an Independent Senator representing Nova Scotia.