

## Psychological and Social Impact of COVID-19

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The high numbers of COVID-19 infections and deaths, economic difficulties, uncertainty about the future, as well as the approaches needed to contain the spread of the virus are all playing critical roles in the short and long-term social and psychological impact of the COVID-19 pandemic. Inequities based on race and socioeconomic status influence the rates of infection and deaths and steps that are needed to achieve recovery. This commentary focuses on similarities and differences after other disasters and efforts being initiated to provide support and recovery.

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While the psychological and social impact of the COVID-19 pandemic shares some similarities to past disasters, there are also major differences that need to be considered to support response and recovery for both individuals and communities (Pfefferbaum & North, 2020). One major difference is that natural disasters impact designated regions of a community, state, or country, allowing those not impacted to be available to help with recovery. A second difference is that it is possible to predict, with some variations, the duration of natural and technological disasters; however, with the COVID-19 pandemic, the duration and, therefore, recovery process and ramifications, are far less certain. Third, and perhaps most important, is that recovery from natural and technological disasters is helped to a great extent by supportive in-person relationships that are unavailable during COVID-19 (Masten, Narayan, Silverman, & Osofsky, 2015). Psychological and social well-being is affected significantly by “stay at home” orders, social distancing, and other safety precautions needed to contain the pandemic that preclude social relationships (APA, 2020). Further, the psychological and social impact is influenced by people’s fears of becoming sick as well as having to cope with friends and family being sick and dying mostly alone from COVID-19.

The number of fatalities from COVID-19 also take a toll on psychological well-being. Following Hurricane Katrina, Louisiana experienced an estimated 1,700–2,200 fatalities. In contrast, as of

May, 2020, there are already more than 2,281 fatalities in Louisiana from COVID-19 (NOLA.com, 2020). The death rate for the African American population is 2.65 times the rate for all other groups. As with many major disasters, socioeconomic difficulties and preexisting health conditions are contributing to racial disparities in COVID-19 (Gold et al., 2020).

The mental health repercussions following disasters like Hurricane Katrina have been significant with both adults and children reporting high incidences of depression, anxiety, posttraumatic stress disorder, and substance abuse that went down slowly over time with growing family and community stability (Kessler et al., 2008; H. Osofsky, Osofsky, Kronenberg, Brennan, & Hansel, 2009; J. Osofsky, Osofsky, Weems, King, & Hansel, 2015). Early reports indicate that COVID-19 in the United States is impacting mental health with increases in anxiety, depression, substance use, and an exacerbation of previous mental health problems (NOLA.com, 2020; Pfefferbaum & North, 2020; Galea, Merchant, & Lurie, 2020). Crisis counseling including Psychological First Aid (Ruzek et al., 2007) is being provided remotely but generally with limited clinical services and outreach support for individuals and families dealing with the stresses of temporary or permanent layoffs, decline in income, having to provide remote learning for children, and worries about illness and possible death. Mental health support also focuses on the importance of establishing new routines and schedules for daily life including time for meals, self-care, and time with children for not only virtual schoolwork, but also for positive play or conversation. The new routines also need to include virtual ways to maintain friendships and family relationships using telephone or social media if available. While systematic reporting has been hampered with Stay at Home orders, concerns have been raised about possible increases in child abuse and domestic violence with perpetrators and victims living in close quarters (Campbell, 2020). Additional stress is contributed by family members not being able to be with loved ones when they are severely ill or dying from the virus as well as older adults living at home, in nursing homes, or retirement communities.


The issue of inequities with COVID-19 are striking. In Louisiana, African Americans represent 32.7% of the population but account for 70% of the deaths from COVID-19. As mentioned above, this figure is likely related to having less access to sensitive

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health care, which has contributed to a higher percentage of underlying conditions such as heart disease, hypertension, diabetes, and respiratory problems, which places them at higher risk if they become sick with COVID-19. In addition, 22% of New Orleans residents have no computer connectivity, and 17% only have cellular connectivity, which limits their ability to connect with others for support and services including accessing health care virtually and remote schooling for children (<https://www.datacenterresearch.org/covid-19-data-and-information/demographic-data>).

At Louisiana State University Health Sciences Center (LSUHSC), a commitment has been made through the formation of the Academic Collaborative for Health Equity to increase knowledge of and address inequities in health care throughout the medical center. To address mental health issues with COVID-19, LSUHSC Department of Psychiatry is providing access to mental health support services using both telehealth and telephone, with urgent visits being scheduled in person with full precautions for both patients and doctors. In addition, the Department of Psychiatry faculty, in collaboration with the Mayor of New Orleans, the city health department, police department, fire department, and emergency medical services, are initiating no-cost confidential virtual support and clinical services. The services will be provided for those agencies, city employees, and others requesting services using home-based telehealth and telephone for those without Internet connectivity for adults, children, and family members. In addition to COVID-19 being a public health emergency, mental health issues are an important component of the pandemic and need to be addressed to support individuals, children, and families.

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