Section I. Overview: COVID-19’s Implications on Mental Health and Substance Abuse Disorder

Beginning March 2020, the coronavirus pandemic, caused by the viral strain known as SARS CoV-2 (better known as COVID-19), has created widespread public health and medical crises across populations, communities, and service sectors – nationally and in the state. North Carolinians have experienced mass hospitalizations, deaths, employment losses, and behavioral health consequences. COVID-19 has had a negative impact on persons living with mental health and substance use disorders, individual/developmental disabilities, and traumatic brain injuries (TBI) (hereafter all referred as behavioral health).

According to CDC data collected June 24–30, 2020, from a total of 5,412 adults from across the US who completed a web-based survey, 40% reported struggling with mental health or substance use. Among the respondents, 31% reported symptoms of anxiety and depression, and 26% reported trauma related disorder.

By mid-2020, COVID-19 had taken its toll – the mid-2020 Kaiser Family Foundation study found 53% of adults in the United States reported their mental health has been negatively impacted due to worry and stress over the coronavirus.

The Foundation’s study also reported the behavioral health issues people experience only four months after the onset of the national (and global) COVID-19 pandemic resulted in an economic recession with job losses, household income declines, and
housing and food insecurities). The initial sheltering in place, social isolation, quarantines, and disruptions in routine behaviors and norms attributed to ongoing stress and anxiety.

Quarantining and sheltering in place are evidence-based guidance designed to help protect. However, remaining where a person lives may not be safe if there is domestic violence and/or physical and mental abuse against intimate partners and children. High unemployment, wage loss, and the threat of housing evictions could initiate and perpetuate violence in families and for individuals. Violence in the home can lead to adverse physical and mental health outcomes, including a higher risk of chronic disease, substance use, depression, post-traumatic stress disorder, and risky sexual behaviors.

Section II: COVID-19’s Implications for Individuals with I/DD, TBI and other Disabilities

Individuals with Intellectual/Developmental Disabilities (I/DD), Traumatic Brain Injuries (TBIs) and other disabilities face additional challenges that can affect their mental health. It is well documented that chronic health conditions create an increased risk for infection and complications from COVID-19. According to the CDC, “adults with disabilities are three times more likely than adults without disabilities to have heart disease, stroke, diabetes or cancer.” Facing increased risk for COVID-19 and a disproportionate impact from social distancing and other efforts to stem the spread of the virus, implications for individuals with disabilities must be considered. Individuals with I/DD and TBI have a disproportionate negative impact from the social distancing and other isolating efforts to reduce spreading COVID.

Individuals with I/DD or TBI commonly depend on others for tasks such as personal care, accessing the community, supported employment, visiting family and friends, etc. Efforts to limit the spread of the virus further exacerbated social isolation within this community. Some people were able to rely on digital devices to connect with family, friends and resources such as physicians and mental health professionals, individuals with I/DD or TBI may not have access to devices/technology, internet or smart phones. Also, direct support professionals who provide support services may be unable or unwilling to provide the same level of support before the pandemic due to fears, family obligations, or other restrictions. For clients, skill loss, employment change, and decrease in established support networks are real threats. Caregivers are subject to fatigue and/or burnout and also loss or change in their employment.
For children and youth with I/DD, TBI or other disabilities, virtual learning environments and altered school schedules have created significant additional stress and mental health challenges for families. Special education services have been disrupted and children and youth may not have access to the same level of educational, physical, social and emotional interventions required to reach their full potential. Families in this situation are often faced with the unsurmountable challenge of meeting the needs of their children without critical supports.

Access to health care including in person physical and mental health appointments presents an additional concern. Appointments help assess the effectiveness of medication, screen for abuse or neglect, and determine physical conditions. While the increased use of telehealth creates additional important access for much of the population, telehealth may still be inaccessible to some individuals with disabilities. In addition, a fear of COVID-19 exposure and/or restrictions in health care environments may prevent some individuals from seeking medical or mental health care.

Mental health impacts for those with I/DD, TBI or other disabilities can manifest in the same ways as the general population. But it is important to consider the additional barriers and stressors that may be experienced by those who may be more at risk for COVID-19 and reply more heavily on the social supports.

**OVERCOMING BARRIERS: STIGMA AND OTHER OBSTACLES**

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<td>Comparing and contrasting the definitions of public stigma and self-stigma</td>
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<table>
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<th>Public stigma</th>
<th>Self-stigma</th>
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<td><strong>Stereotype</strong></td>
<td>Negative belief about a group (e.g., dangerousness, incompetence, character weakness)</td>
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<tr>
<td><strong>Prejudice</strong></td>
<td>Agreement with belief and or negative emotional reaction (e.g., anger, fear)</td>
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<tr>
<td><strong>Discrimination</strong></td>
<td>Behavior response to prejudice (e.g., avoidance, withhold employment and housing opportunities, withhold help)</td>
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**Stigma can:**
- Undermine social cohesion, community inclusion, and encourage social isolation.
- Drive people to hide an illness to avoid discrimination and suffer in silence and self-treat.
- Prevent people from seeking needed health care
- Discourage them from adopting healthy behaviors
- Lead to devastating outcomes e.g. suicidal ideation, disease chronicity, exacerbation of illness, reinforcing trauma
It is important, especially during this challenging COVID-19 pandemic when many people are suffering in silence, that we all work towards eradicating stigma and creating a safe and open pathway for people who are in need of BH or IDD/TBI support and treatment to ask for help and get the help they need to support health and wellness, sustained recovery, and resilience. So how can you help be a supportive resource and eradicate stigma: A few responses (behaviors, beliefs, perceptions) to monitor:

**A few responses (behaviors, beliefs, perceptions) to monitor:**

1. **Fear and Exclusion:** Avoid responding to or seeing persons with a BH, IDD or TBI as individuals who should be feared and, therefore, be kept out of most communities. Support community inclusion and equity across service sectors including at the community level.

2. **Authoritarianism:** Rid yourself and reject the belief of others that persons with a BH, IDD, or TBI are irresponsible, so life decisions should be made for them or by others. Allow people to exercise self-determination and seek to support versus disregarding the self-efficacy and determination of persons with lived BH, IDD, or TBI experience.

3. **Overbearing and dehumanizing benevolence:** Yes, benevolence can come in many ways and despite good intentions, benevolence that renders adults as children can be dehumanizing and overbearing. Avoid seeing persons with a BH, IDD, or TBI lived experience as childlike and or unable to make their own decisions.

4. **Complicit bystander:** Refuse to remain silent when others are reinforcing stigmas or stigmatizing others. Speak up with you see people with a lived BH, IDD, or TBI experience being discriminated against. Seek solutions to remove barriers preventing access to care and inclusive environments and positive experiences for persons with living with a BH, IDD, or TBI condition.

5. **Willful ignorance and closed mindedness:** Be willing to learn more and challenge what you think you know about persons with BH, IDD or TBI conditions. Prejudice and discrimination are manifested out of ignorance and lack of knowledge. The more you learn about those whom you perceive as the “other” the more likely your biases and prejudices will dissipate and change for the better.

**What you can do to overcome self-stigma?**

1. Understand what stigma is: it’s really not about you. Don’t internalize another person’s or group’s behavior.
2. Seek professional help to overcome the effect that being stigmatized is having especially if it is preventing you from asking for help.
3. Be a resource for others; share your experience. Shine the light on what is happening. Force stigma out front.
4. Be an advocate—speak up
5. Join a support network or organization that advocates for persons with lived BH, IDD or TBI experience.
Section III: Hope and Help – Resources and Aid

A message, “How are You Doing?” from Dr. Carrie Brown, Chief Medical Officer, Chief Medical Office for Behavioral Health and Intellectual/Developmental Disabilities, North Carolina Department of Health and Human Services

Focusing on your mental health is vitally important including ensuring you know social distancing does not mean being totally disconnected from others and that it is okay to ask for help as Dr. Jaquetta Foushee advises, “To Minimize the Mental Health Effects of COVID-19”:

For additional COVID-19 related videos to view and share visit: https://www.youtube.com/playlist?list=PLUadR7S9ykdIO5IWNW3yCJ8lBUGZ3c6gY
Save the following SCOOP message to share with people in your network:

If you are feeling overwhelmed with emotions such as sadness, depression, and anxiety, Hope4NC Helpline (1-855-587-3463) connects North Carolinians to additional mental health and resilience supports that help them cope and build resilience during times of crisis. Hope4NC is now available 24 hours per day, seven days a week to speak to a live person.

Additional resources:
- Hope4Healers Helpline: 919-226-2002
- National Suicide Prevention Lifeline: 1-800-273-TALK or 1-800-273-8255
- Alcohol and Drug Council of NC (ADCN): TEXT 919-908-3196 • CALL 800-688-4232
- Problem Gambling Hotline: 877-718-5543
- NC4Vets: 844-NC4-VETS or 844-624-8387
- NC Division of Mental Health, Developmental Disabilities, and Substance Abuse Services: PHONE: 984-236-5300 • TOLL FREE: 855-262-1946 • SPANISH: 800-662-7030 • EMAIL: dmh.advocacy@dhhs.nc.gov

Get the SCOOP on managing stress.

Stay connected to family and friends.
Compassion for yourself and others.
Observe your use of substances.
Ok to ask for help.
Physical activity to improve your mood.

NC Department of Health and Human Services • Division of Mental Health, Developmental Disabilities, and Substance Abuse Services
www.ncdhhs.gov/divisions/mh/ddss • Call 984-236-5000 • NCDHHS is an equal opportunity employer and provider. • 10/20
RESOURCES RELATED TO MENTAL HEALTH, SUBSTANCE USE DISORDERS, AND IDD DURING THE COVID-19 PANDEMIC — FOR INDIVIDUALS

The Hope4NC Helpline (1-855-587-3463) connects North Carolinians to additional mental health and resilience supports that help them cope and build resilience during times of crisis. It is available to everyone in North Carolina’s 100 counties during the COVID-19 crisis. Hope4NC includes a Crisis Counseling Program tailored for COVID-19, which will provide immediate crisis counseling services to individuals affected by the ongoing COVID-19 public health crisis.

- This initiative is in partnership with all seven of the state’s Local Management Entities/Managed Care Organizations and REAL Crisis Intervention Inc. in Greenville. Hope4NC is now available for you 24 hours per day, seven days a week to speak to a live person.

The Hope4Healers Helpline (919-226-2002) is an initiative in partnership with the North Carolina Psychological Foundation. It provides mental health and resilience supports for health care professionals, emergency medical specialists, first responders, other staff who work in health care settings and their families throughout the state who are experiencing stress from being on the front lines of the state’s COVID-19 response.

- Hope4Healers is also available 24 hours per day, seven days a week for people to reach out for support from a licensed mental health professional.

The Stronghearts Native Helpline (1-844-762-8483) is a safe domestic, dating and sexual violence helpline for American Indians and Alaska Natives, offering culturally appropriate support and advocacy daily from 7 a.m. to 10 p.m. CT.

- The line is anonymous and confidential. Callers reaching out after hours may connect with The National Domestic Violence Hotline, a non-Native based 24-7 domestic violence helpline by selecting option one. Learn more about their services: https://www.strongheartshelpline.org/about/
- IMMEDIATE HELP is available on their website by using online chat to connect one-on-one with a live advocate. Learn more about chat advocacy here: https://www.strongheartshelpline.org/get-help/chat-advocacy/

NORTH CAROLINIAN ORGANIZATIONS WHO CAN HELP

- The Autism Society of North Carolina improves the lives of individuals with autism, supports their families, and educates communities. www.autismsociety-nc.org
- The Brain Injury Association of North Carolina is a statewide non-profit organization striving to better the lives of individuals living with brain injury. https://www.bianc.net/
- The Disability Rights North Carolina is a legal advocacy agency that fights for the rights of people with disabilities in North Carolina. They handle cases
involving discrimination, abuse and other rights violations. All of our services are at no cost to North Carolinians with disabilities. https://disabilityrightsnc.org/

- **The North Carolina Children and Youth with Special Health Care Needs Help Line (1-800-737-3028)** is a free information and referral source for caregivers of and professionals who work with children and youth who have or are at risk for chronic physical, developmental, behavioral or emotional conditions, needing health services beyond the care that a child typically needs.

- **First in Families of North Carolina**, FIFNC, helps people with disabilities and their families to believe in their dreams, achieve their goals and give back to others. www.fifnc.org

- **Using the Licensed Professional Counselors Association of North Carolina**, families/individuals may locate a North Carolina Licensed Professional Counselor www.lpcacn.org

- **National Alliance on Mental Illness (NAMI) North Carolina** works with dedicated community volunteer leaders to raise awareness and provide essential education, advocacy, and support so people affected by mental illness can build better lives. https://naminc.org/

- **Professional Organizations that Can Help**
  - National Association of Social Workers- North Carolina Chapter www.naswnc.org
  - North Carolina Psychological Association https://www.ncpsychology.org/
  - North Carolina Psychiatric Association https://www.ncpsychiatry.org/
  - North Carolina Families United https://www.ncfamiliesunited.org/
  - Alcohol and Drug Council of North Carolina https://www.alcoholdrughelp.org/
  - Recovery Resource Hub https://www.recoveryresourcehub.org/

**COMMUNITY SUPPORTS/RESOURCES FOR INDIVIDUALS WITH I/DD AND OTHER DISABILITIES AND THEIR FAMILIES**

- **Autism Society of North Carolina (ASNC)** provides information about autism, services and supports available to individuals with autism and their families and how to navigate them. They also have Autism Resource Specialists with lived experiences who provide support for families. www.autismsociety-nc.org

- **Brain Injury Association of North Carolina (BIANC)** is an organization that offers workshops and trainings, support for individuals and families, a resource directory, and a Family Helpline for families to call about resources related to brain injury. www.bianc.net

- **Centers for Independent Living** are non-residential, 501 (c) (3) non-profit corporations. They are consumer-controlled, community-based organizations that provide programs and services for people with all types of disabilities and their families. For a list of NC Centers for Independent Living: https://ncsilc.org/centers/
• **Children with Special Health Care Needs Help Line: 1-800-737-3028** is a service offered by the Department of Public Health, Children and Youth Branch to assist families whose children have special health care needs in locating services, supports and resources for through referral and information. CYSHCN.Helpline@dhhs.nc.gov

• **Exceptional Children’s Assistance Center** is an organization that helps individuals and families navigate the special education system and process. They have a robust website with information, toolkits and more about things such as IEPs, 504 plans, advocacy tips and mental health concerns. They offer workshops for parents and have Parent Educators that can provide individual information or assistance. [www.ecac-parentcenter.org](http://www.ecac-parentcenter.org)

• **Family Support Network of NC** is an organization that provides support and education to families of children with special needs. They offer Parent-to-Parent Support, support groups and workshops as well as assistance with navigating systems and referrals to other services and resources throughout the community. [http://www.fsnnc.org](http://www.fsnnc.org)

• **First in Families of North Carolina** is an organization that compliments formal services, provides support when other resources are not available and connect individuals with disabilities and their families to other services. [http://fifnc.org](http://fifnc.org)

• **Local Management Entities-Managed Care Organizations (LME-MCOs)** are public managed care organizations that provide comprehensive behavioral health services for children and adults with mental health, developmental disabilities, traumatic brain injury, and substance use needs. To inquire about or request services, call the appropriate LME-MCO’s Access Line. [https://www.ncdhhs.gov/providers/lme-mco-directory](https://www.ncdhhs.gov/providers/lme-mco-directory)

• **NC Division of Aging and Adult Services** works to promote the independence and enhance the dignity of North Carolina's older adults, persons with disabilities and their families through a community-based system of opportunities, services, benefits and protections. [https://www.ncdhhs.gov/divisions/daas](https://www.ncdhhs.gov/divisions/daas)

• **NC Division of Vocational Rehabilitation Services (DVRS)** helps people with disabilities achieve their goals for employment and independence. If you have a disability that prevents you from achieving career success or independence in the community of your choice, DVRS can connect you to services and resources to help you meet your goals. [https://www.ncdhhs.gov/divisions/dvrs](https://www.ncdhhs.gov/divisions/dvrs)

• **The Arc of North Carolina** is an organization for people with I/DD and their families that offers direct supports as well as a variety of programs related to housing, guardianship, employment, skill building, resource navigation, etc. There are local chapters throughout NC. [https://www.arcnc.org](https://www.arcnc.org)
RESOURCES TO HELP MANAGE YOUR MENTAL HEALTH

- **Tips to reduce anxiety and stress**: The American Psychological Association shares tips to cope with COVID-19 and the impact of social distancing on one’s mental health.

- **Tips for social distancing, quarantine, and isolation**: The Substance Abuse and Mental Health Services Administration suggests ways to cope and support oneself during an infectious disease outbreak.

- **Looking after your mental health**: The World Health Organization has published tips and advice to look after one’s mental health and help others who may need extra support and care.

- **Additional resources available to support mental health and coping with COVID-19**: The Suicide Prevention Resource Center compiled a selection of web pages and information from key organizations in the field. Resources are available for general audiences, mental health professionals, health care workers/first responders, community leaders, American Indians/Alaska Natives, colleges/universities, schools, parents/caregivers, teenagers, older adults, Hispanics/Latinos, LGBTQ, faith communities, and workplaces.

RESOURCES FOR PERSONS DEALING WITH INTIMATE PARTNER VIOLENCE AND CHILD ABUSE


- **Addiction Technology Transfer Center (ATTC)** offers a one-hour self-paced course based on industry awareness about Intimate Partner Violence (IPV): https://healtheknowledge.org/course/view.php?id=18

- **“Intersection of Domestic Violence or Intimate Partner Violence and Addiction”** (Webinar) by the National Hispanic and Latino ATTC: https://attcnetwork.org/centers/national-hispanic-and-latino-attc/product/intersection-domestic-violence-or-intimate

- **Supporting Survivors’ Access to Substance Use Disorder and Mental Health Services During the COVID-19 Emergency** released by The National Center on Domestic Violence, Trauma & Mental Health (a SAMHSA partner): www.nationalcenterdvtraumamh.org/2020/03/covid-19-resources-for-advocates/

- **National Domestic Violence Hotline**: 1-800-799-SAFE (7233), www.thehotline.org/resources/staying-safe-during-covid-19/

- **Strong Hearts Native Helpline** provides domestic violence support for Native/American Indians, www.strongheartshelpline.org/get-help/

RESOURCES ON CHILDREN FOR PARENTS

- **Helping children cope with changes resulting from COVID-19**: The National Association of School Psychologists provides tips on helping families adjust to a "new normal"
- **Parent/Caregiver guide to helping families cope with COVID-19**: The National Child Traumatic Stress Network includes age-appropriate tips for helping children cope with stress and uncertainty
- **Tips for parents during times of trauma**: Parents As Teachers outlines ways caregivers can maintain routines and respond to children’s needs. Parents and caregivers can also search for a Parents As Teachers program in their area
- **Supporting Individuals with Autism through Uncertain Times**: The UNC Frank Porter Graham Child Development Institute Autism Team developed this toolkit to provide strategies to help individuals with autism cope with the stress and uncertainty often felt during the pandemic.
- **Children with Special Health Care Needs Help Line: 1-800-737-3028** is a service offered by the Department of Public Health, Children and Youth Branch to assist families whose children have special health care needs in locating services, supports and resources for through referral and information. Email: CYSHCN.Helpline@dhhs.nc.gov
- **Exceptional Children’s Assistance Center** is an organization that helps individuals and families navigate the special education system and process. They have a robust website with information, toolkits and more about things such as IEPs, 504 plans, advocacy tips and mental health concerns. They offer workshops for parents and have Parent Educators that can provide individual information or assistance. [www.ecac-parentcenter.org](http://www.ecac-parentcenter.org)
- **The National Child Traumatic Stress Network** provides various resources, such as “What Is Child Trauma – Pandemic Resources”, “Helping Children Cope with COVID-19” and “Coping in Hard Times for Parents”
- Lessons from children’s book **Trinka and San Fighting the Big Virus**, available in both English and Spanish.
- **The American Academy of Child and Adolescent Psychiatry** has a main page with a number of excellent resources
- “Helping Homebound Children during the COVID-19 Outbreak” published by the Center for the Study of Traumatic Stress
- “Parenting during a Pandemic” published by the AAP
- The **Sesame Street Workshop** (helpful information on Caring for Each Other including resources for younger children, i.e. sesame stress in communities resources, how to talk to kids, printable activities, etc.) Available in English/Spanish
  – [https://www.sesamestreet.org/caring](https://www.sesamestreet.org/caring)
  – [https://sesamo.com/cuidandonos/](https://sesamo.com/cuidandonos/)
NORTH CAROLINA-SPECIFIC COVID-19 POLICIES AND GUIDANCE

- If you are an organization or agency that would like to find out how you can access Personal Protective Equipment (PPE), visit https://ncadmin.nc.gov/about-doa/divisions/purchase-and-contract/consolidated-ppe-supply-service-portal

PROMOTING HEALTHY BEHAVIORS THAT PREVENT AND REDUCE THE SPREAD OF COVID-19

Community stakeholders including providers, peer-led organizations, advocacy groups, CBOs and FBOs should remain vigilant in promoting and implementing strategies to encourage behaviors that reduce the spread of COVID-19 including practicing the 3Ws:

- **Wear** a cloth mask over your nose and mouth.
- **Wait** 6 feet apart. Avoid close contact.
- **Wash** your hands or use hand sanitizer.

**Wearing a face covering** over nose and mouth is an evidence-based preventive measure that can help reduce the risk of spreading the novel coronavirus COVID19. For details about why and how to wear a protective face covering appropriately visit DHHS’s website and link to https://covid19.ncdhhs.gov/information/individuals-families-and-communities/cloth-face-coverings-and-masks

Require the use of face coverings among staff and volunteers, when feasible. Face coverings (specifically covering your nose and mouth) are most essential in times when social distancing is difficult. Information should be provided to all staff and volunteers on proper use, removal, and washing of face coverings. There are instances when face coverings should not be used including on:
- Babies or children younger than 2 years old;
- Anyone who has trouble breathing;
- Anyone who is unconscious, incapacitated, or otherwise unable to remove the face covering without assistance.
Face coverings are meant to protect other people in case the wearer may have the virus and not know it. Face coverings are not meant to be a substitute for critical protective equipment such as surgical masks, respirators, or other medical personal protective equipment. Encourage clients and other stakeholders coming to your facility or attending events to bring and use face coverings.

**Wait:** As restrictions begin to ease related to interacting with others in public, make sure that you are maintaining a healthy distance between yourself and others when out in public. Wait until you are at least 6 feet (two arms length) between another person; maintain that distance as much as possible.

**Wash: Practice good hand hygiene and respiratory etiquette**

Fact: Washing your hands frequently and especially after contacting surfaces and others is an important hygiene practice to prevent the spread of COVID-19. Make sure that you are washing with soap and water for at least 20 seconds during each wash. If soap and water are not readily available, hand sanitizer that contains at least 60% alcohol can be used; rub hands together until dry.

It is also important to practice good respiratory etiquette by covering coughs and sneezes with a tissue or in your inner arm at the elbow to prevent the spread. This should be done even if you are wearing a face covering. If out in public or meeting and greeting someone, use alternate forms of greeting besides handshakes, hugs, and kissing. For example, introduce a new practice of waving, bowing or elbow touch.
References:


