Behavioral Health During and After the Pandemic

The response of the behavioral health system to the COVID pandemic has been rapid and remarkable. But it is, of course, imperfect and incomplete. What are the challenges still to be met? And what will happen after the pandemic, hopefully, ends and we move on to a new normal?

What Has Been Done to Address the Psychological Fallout of the Pandemic

Over just a couple of months, governments, charities, local communities, volunteers, and behavioral health providers have stepped up to respond to the widespread psychological fallout of the pandemic. This has included addressing the needs of people with pre-existing behavioral health conditions, who are at risk of exacerbation and relapse as well as the needs of people who develop new mental and/or substance use disorders during the pandemic. It has also included efforts to address the emotional distress that many people, with and without diagnosable disorders, have experienced—fears regarding illness and death, isolation and loneliness, loss of a sense of control, hopelessness, family tensions, grief, and more.

Living through the pandemic has been challenging and emotionally charged for most people, but especially for people who are without adequate income, food, and shelter; for those who are at highest risk of sickness and death; for racial and ethnic minorities; and for the healthcare providers and other essential workers who are on the frontlines of this massive struggle to survive.

To read Michael B. Friedman, LMSW’s full article and get tips on how to contain the psychological fallout, continuing challenges and getting ready for the new normal, visit:
Socioemotional challenges and crises are felt across the full spectrum of the population, not sparing any ethnic, racial, nationality, or age group. The personal and interpersonal consequences have been far-reaching in this current environment for both those with prior vulnerabilities and emotional challenges, as well as those with no prior noticeable or significant psychological hardship. It appears that everyone is affected to different degrees. Life as we knew it has been put on hold and is hostage to a VIRUS, an entity that is one micron thick. Everyone has made sacrifices and adjustments trying to cope, perhaps looking forward to a NEW NORMAL eventually emerging. These are unprecedented times for us all, and the uncertainty can be overwhelming.

Increased anxiety, despair, profound losses, isolation, loneliness, and overall much more stress and sense of uncertainty about the future are among the many factors having compromised our individual and collective sense of safety. These unusual global pressures have significantly contributed to the need for socioemotional support for millions of individuals and families with a notable increase in calls to hotlines and profound increases in uses of psychotropic medications, family discord, including domestic violence, economic constraints, the potential for substance abuse and many other unhealthy and self-destructive behaviors. Fear, stress, and uncertainty beg for all to try to establish a new sense of safety and balance and equilibrium.

What Can We Do to Prevent Suicide?

We know that the thoughts of suicide are not unusual and may cross many people’s minds in harder times. Suicide is one of the more preventable causes of death. Although all suicides cannot be prevented, most can, as most people who may think about it, have some part of them that has not given up on life/living. In order for almost everyone in society to be able to be a helper, we need to continue to address stigma, biases, and myths associated with mental illness and suicide.

Education is essential. Almost everyone thinking about suicide is looking to be approached and open a discussion as to why they contemplate thoughts of suicide. Anyone can think about suicide. Many individuals work themselves out of it, and others take further steps. Individuals preoccupied with thoughts of suicide must know that they can share their thoughts and talk about it. Above all, they must be aware there are caring individuals in the community or their personal, social, and workplace who will listen. Necessary helping steps are simple, and anyone can learn them.

To read Max Banilivy, PhD’s full article visit: https://behavioralhealthnews.org/suicide-prevention-intervention-and-postvention-in-the-time-of-covid-19/
Dear Valued Referral Source,

Thank you for your continued referrals during this difficult time. We wanted to take this opportunity to say thank you to the healthcare professionals, first responders and unseen heroes for their continued work during the COVID-19 Pandemic. Thank you for all that you are doing and for your ongoing referrals.

Sincerely,

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Greene County Crisis Line: 1-800-417-9460
Washington County 24-Hour Crisis Hotline: 1-877-225-3567
National Suicide Prevention Lifeline: 1-800-273-8255
Greenbriar Treatment Facility: 1-800-637-4673