COVID-19: Uncovering mental health disparities.

1 author:

Reggie Ferreira
Tulane University

49 PUBLICATIONS **379** CITATIONS

Some of the authors of this publication are also working on these related projects:

Intimate Partner Violence Approaches View project

Understanding and Ending the Generational Cycle of Preventable Wartime Behavioral Health Crises View project

INTRODUCTION

COVID-19: Uncovering Mental Health Disparities

Regardt J. Ferreira[1, 2]
[1] Tulane School of Social Work, Tulane University
[2] Department of Social Work, University of the Free State

Arguably one of the biggest disasters of the past century is the COVID-19/2019 novel coronavirus (2019-nCoV) pandemic. The World Health Organization declared the 2019-nCoV a global health emergency at the end of January 2020. Since then, our daily lives and routines have been altered significantly, due in large part to health and safety protocols (e.g., stay at home orders, travel bans/restrictions, lockdowns, social distancing etc.) instituted to curb the global spread of the virus.

The impact of disasters such as COVID-19 will also have more long-term effects, such as generating social and economic hardship, loss of employment, dissolution of personal relationships, and the long-term decline of physical and mental health (Ferreira, 2013). Extreme events such as the COVID-19 pandemic are not regarded as disasters until a vulnerable group of people is exposed to such an event. Particular social groups are more prone to damage, loss and suffering in the context of differing hazards such as a pandemic (Ferreira & Figley, 2015).

Cutter et al. (2003) noted that a subtype of vulnerability is social vulnerability. In its most simplistic form, social vulnerability is partially a product of social inequalities. The construct of social vulnerability comprises the individual characteristics of people, including age, race, health, income, type of dwelling unit, and employment. It is seen partially as the product of social inequalities that influence or shape the susceptibility of various groups to harm and that also governs their ability to respond or recover from adversity such as a disaster (Cutter et al., 2003).

COVID-19 also has an intense personal dimension. Many of us have been directly impacted either through infection or loss. Outside of our personal experiences, we have also come to the realization that the pandemic has had the biggest impact on the most socially vulnerable among us. At the time this was written (mid-February 2021), the global death total from the COVID-19 virus had surpassed a staggering 2.4 million deaths. On a daily basis, we are inundated with news reports of the virus's impact on the most vulnerable (e.g., elderly, minorities, immigrants, homeless, those with preexisting health conditions and the unemployed). COVID-19 has shown a bright light on the disparities that are evident in our society.

The secondary impacts of the virus have also been significant. Several empirical reports indicate higher than usual levels of stress (Ferreira et al., 2020), increased substance use and suicidal ideation (Czeisler et al., 2020), increased levels of intimate partner violence (Buttell & Ferreira, 2020), and reports of loneliness (Killgore et al., 2020) to note a few. There are several, newer secondary impacts being observed with far-reaching impacts on our mental health and overall functioning, that includes, but are not limited, to a fear of receiving a COVID-19 vaccine, isolation from the outside world, working from home adjustments, distrust of government and their handling of the virus response, homeschooling and parenting role challenges.

Call to Action

Given the differential impact of the COVID-19 pandemic on the psychosocial well-being of individuals, families, and communities, we must be compelled to address one of the biggest challenges of our time. The lack of attention to the mental and behavioral health needs of racial and ethnic minorities and the inadequate provision of culturally and linguistically appropriate mental health care in racial and ethnic minority communities demonstrate a clear need for encouraging collaboration and finding ways to close the gap in general community care, especially now during the COVID-19 era.

In September of 2020, I invited submissions directly related to the impact of the COVID-19 pandemic. I was particularly interested in empirical studies focused on mental health disparities, trauma, and resilience in the wake of COVID-19. The special call is the first in a collection of some of the most important research to be generated since the pandemic started with the main aim of investigating the impacts associated with COVID-19.

The special issue includes fourteen articles detailing empirical and theoretical approaches seeking to gain a better understanding of how COVID-19 impacts our overall well-being, with a special focus on uncovering mental health disparities. The first article is a commentary by founding *Traumatology* editor Dr. Charles Figley, and his approach to provide an understanding how the pandemic has caused people to suffer and helped them to grow. The second article is by Peterson who evaluated psychological reactions to the pandemic as a function of sexual identity. In the third article, Litam presents findings of the extent to which physicians, nurses, and other health care workers experience moral injury while working in a pandemic. The fourth article by Buttell and colleagues

Regardt J. Ferreira https://orcid.org/0000-0001-7047-9027
Correspondence concerning this article should be addressed to Regardt J. Ferreira, Tulane School of Social Work, Tulane University, 127 Elk Place, New Orleans, LA 70112-2627, United States. Email: rferrei@tulane.edu

investigated the prevalence of resilience and perceived stress among a sample that experienced intimate partner violence during the pandemic. Kira and colleagues present findings on the effects of COVID-19 and collective identity trauma (intersectional discrimination) on social status and wellbeing in the fifth article. Hibel and colleagues with the sixth article examined the psychological and economic toll of the COVID-19 pandemic on Latina mothers in primarily low-income essential worker families. The seventh article of the special issue by Sanders, focuses on the role of equity in addressing climate change: using law and policy to serve frontline communities. De los Santos investigates the impact of fear of COVID-19, job stress and turnover intentions of frontline nurses in the community: a cross sectional study in the Philippines. The ninth article, by Loeb and colleagues, focuses on how mental health professionals can address disparities in the context of the COVID-19 pandemic. The tenth article, by Derouiche, is a portrait of resilience among Tunisians locked down in times of COVID-19. The 11th article by Ezell focuses on intersectional trauma: COVID-19, the psychosocial contract and America's racialized public health lineage. Nguyen investigates the influence of COVID-19 stress on psychological well-being among Vietnamese adults: The role of self-compassion and gratitude with the 12th article. Shigemoto, explores state-level variabilities between perceived community resilience and posttraumatic stress symptoms during the COVID-19 pandemic: multilevel modeling approach. The final article in the special call by Lancaster investigates the health and emotional well-being of urban university students in the era of COVID-19.

Course for Action Through Research, Policy, and Practice

Currently, we are still dealing with the unprecedented primary impact and the myriad of deeply worrying secondary impacts of COVID-19. It is imperative that the research, practice and policy community adopt an innovative approach to our work in the context of COVID-19. It is equally important that we also investigate the secondary impacts of the pandemic, while also ensuring that we are solution focused with our approaches, and create recommendations that are not just feasible but sustainable. By addressing the root causes associated with disparities, we can chart a path forward and be more proactive to address future challenges such as social justice and climate change.

It is important to note that there are certain categories of people whose mental health will be disproportionately affected by COVID-19. Those include children, women, seniors, minorities, immigrants, people with disabilities, and people living in poverty, to name a few. Through collaborative policies and frameworks, leaders can be on the forefront of addressing COVID-19. It is also important that we have a dual layered approach by addressing other challenges faced within the context of COVID-19 (e.g., climate change and addressing issues of social justice). With a strategic approach and the implementation of mitigation measures, the adverse impacts of events such as COVID-19 and climate change in communities on the frontline can be mitigated and limit the traumatic impact that results in resilience disparities in our society (Ferreira, 2020). Finally, we all have the responsibility to educate those around us on the impacts of COVID-19 on our mental health and, where possible, reach out to those who may be more prone to be impacted and provide the needed resources to address mental health and resilience disparities.

Finally, I would like to thank all those associated with the special call, the editorial team, associate editors, editorial board members and reviewers at large for their contribution. The success of *Traumatology* is in large part due to this critically important work, so thank you!

References

Buttell, F., & Ferreira, R. J. (2020). The hidden disaster of COVID-19: Intimate partner violence. *Psychological Trauma: Theory, Research, Practice, and Policy*, *12*(S1), S197–S198. https://doi.org/10.1037/tra0000646

Cutter, S., Borhuff, B., & Shirley, W. (2003). Social vulnerability to hazards. *Social Science Quarterly*, *2*(84), 242–243.

Czeisler, M. É., Lane, R. I., Petrosky, E., Wiley, J. F., Christensen, A., Njai, R., Weaver, M. D., Robbins, R., Facer-Childs, E. R., Barger, L. K., Czeisler, C. A., Howard, M. E., & Rajaratnam, S. M. W. (2020). Mental health, substance use, and suicidal ideation during the COVID-19 Pandemic - United States, June 24–30, 2020. *MMWR. Morbidity and Mortality Weekly Report*, *69*(32), 1049–1057. https://doi.org/10.15585/mmwr.mm6932a1

Ferreira, R. J. (2013). Predictors of social vulnerability: a multilevel analysis. Electronic Theses and Dissertations. Paper 435

Ferreira, R. J. (2020). Climate change, resilience, and trauma: Course of action through research, policy, and practice. *Traumatology*, *26*(3), 246–247. https://doi.org/10.1037/trm0000282

Ferreira, R. J., & Figley, C. R. (2015). Mental health: Longer-term mental health needs of disaster survivors. In R. R. Watson, J. A. Tabor, J. E. Ehiri, & V. R. Pready (Eds.), *Handbook of public health in natural disasters: Nutrition, food, remediation and preparation* (pp. 125–139). Wageningen Academic Publishers.

Ferreira, R. J., Buttell, F., & Cannon, C. (2020). COVID-19: Immediate predictors of individual resilience. *Sustainability*, *12*(16), 6495–6411. https://doi.org/10.3390/su12166495

Killgore, W. D. S., Cloonan, S. A., Taylor, E. C., & Dailey, N. S. (2020). Loneliness: A signature mental health concern in the era of COVID-19. *Psychiatry Research*, *290*, Article 113117. https://doi.org/10.1016/j.psychres.2020.113117