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For Immediate Release

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COVID-19 Worry May Develop into Clinical Anxiety

Here are mental health tips to cope with aspects of a physical virus.

NASHVILLE, Tenn. – As the number of cases of COVID-19 increase, so does the associated anxiety. In fact, some normal worrying has actually shifted to clinical anxiety.

“For the general public, the mental health effects of COVID-19 are as important to address as are the physical health effects. For the one in five Tennesseans who already have mental health conditions, we need to take personal, professional, and policy measures now to address these real symptoms and conditions,” said Tom Starling, CEO of Mental Health America of the MidSouth (MHA).

Individuals who are beginning to experience “forced” isolation should heed this advice:

- Use your smart phone to stay connected to family and friends. Shift from texting to voice or video calling to feel more connected.
- Remain comfortable. Do the things you already enjoy doing at home. Just do more of them.
- Practice stress relief whenever you feel anxiety: deep breathing, yoga, exercise, reading, preparing the garden, eating some ice cream – whatever works for you.
- Abstain from anything you consider to be unhealthy for you, such as excess drinking, which will just increase your anxiety afterwards.
- Keep looking forward. Make some plans for six months down the road.

Professionals and clinical entities who interact with both ill and well people should use the following precautions:

- Screen all patients for anxiety at both sick- and well-care visits.
- Take extra time with patients to decide if they need more intensive treatment mental health treatment that they can be given right away. If left untreated, the mental health effects could last for weeks or months and return unexpectedly.
- Manage health care capacity to be able to respond to mental health crises as they arise during the next weeks and months.
- Refer people to a variety of informational and support resources for mental health follow-up, and don’t give up if there are no clinicians immediately available to take a referral.

Policy leaders should consider the following:

- Connect constituents to information, resources, and people who can help them with their anxiety.
- Understand that when constituents are contacting you, they are worried and susceptible to anxiety. Do not solely focus on minimizing concerns about your constituents’ physical health.

- Understand that every cancellation and every disruption in routine that will occur because of control and containment efforts will likely cause more clinical anxiety that will need to be managed.
- Put some of the dollars that have been appropriated to fight COVID-19 toward mental health. This won't take away from our overall response to the coronavirus. It will enhance it.

MHA has noticed a slight uptick in the increased number of anxiety screenings on its website. However, the percentage of people scoring moderately or severely anxious has remained the same. Upon completing a screening, individuals see tools that offer support, and in the near future these supports will offer tools and resources to address the pandemic.

This virus will likely ebb in time, and MHA is confident that everything will become physically normal in a few weeks or months – even for most who get COVID-19. However, the mental effects will linger for those who lose loved ones and for those whose anxiety, post-traumatic stress, and other serious conditions are left untreated. There is no health without mental health.

Mental Health America of the MidSouth is a 74-year-old nonprofit agency based in Nashville with staff across Tennessee, and the organization provides free education, training, screenings, and referrals to people concerned about mental health and wellness. Its programs focus on suicide prevention, Alzheimer's support, anti-bullying in schools, workplace wellness, community education, screenings, and referrals. Staff can be reached at (615) 269-5355 or at www.mhaMidSouth.org.

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