

COVID-19 and the repercussions for mental health in Toronto

Multiple sources indicate that the pandemic is producing a mental health crisis in Canada and abroad. Morneau Shepell's mental health index saw the biggest drop in April that they have ever recorded, with a decline of 12 points out of 100 versus their benchmark. They found that 16% of Canadians experienced a very negative mental health impact owing to the crisis while 80% reported at least some sort of negative mental health impact.

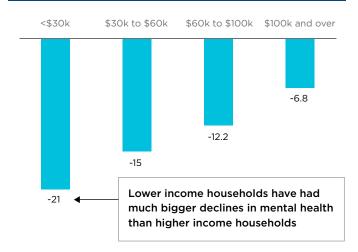
A mid-April poll of Ontario residents by Forum Research and Mainstreet Research found that 22.4% of residents in the City of Toronto reported extremely or very high stress in mid-April, slightly higher than in the rest of the province (19.4%).²

Concerns about mental health appear to be growing too as the pandemic unfolds. Mental health related searches on the 211 Central Region website increased by 151% from the first to the third weeks of April.³

Financial strain a leading cause of mental health issues

Apart from the obvious threats to physical wellbeing, the financial impacts of COVID-19 continue to be devastating for many, with 7.3 million people nationally filing for emergency benefits as of April 26, 2020.4 This is more than one third of the labour force. This is contributing to mental health challenges for many people. According to Morneau Shepell, those at the bottom of the income distribution have had far larger declines in mental health than those at the top: results showed a 21-point decline in mental health for those with less than \$30,000 in household income compared to a 7% decline for those with at least \$100,000 in household income. While those who were unemployed had bigger declines in mental health than those who remained working, the greatest factor was absence of emergency savings, which contributed to a 24-point drop in mental health.





Sources: Morneau Shepell's April 2020 Mental Health Index.



Morneau Shepell's respondents identified personal finances (27%) and fear of losing a loved one (26%) as the two most common reasons cited for mental health challenges. This is no surprise to Criss Habal, executive director of Progress Place, which operates a peer support line for those suffering from anxiety, depression, and isolation. Habal says: "I don't know if you can really separate finances from mental health. The members we work with were always marginalized and living in poverty. That's always an ongoing theme and now we're hearing it even more."

According to Susan Davis, executive director of the Gerstein Crisis Centre, "All the fault lines in our system have been widened. Those who weren't well supported before are now even less well supported." Toronto Foundation's 2018 social capital study found that those struggling to pay their bills had some of the highest rates of mental health challenges of any segment in the population. The study also showed that racialized people, newcomers, those with disabilities, and younger Canadians all were under higher financial strain, indicating that these groups are likely going to bear the brunt of the mental health challenges.

Our last brief discussed how these financial challenges have unfolded in the domain of food security. Data from 211 in Toronto shows that they are seeing 12 times as many contacts per day related to food security in early April versus in February, as people are desperately trying to get access to food banks and food delivery. Unsurprisingly, those who are severely food insecure have drastically high rates of depressive and suicidal thoughts, incidences of major depression, and physician diagnosed anxiety or mood disorders.⁷

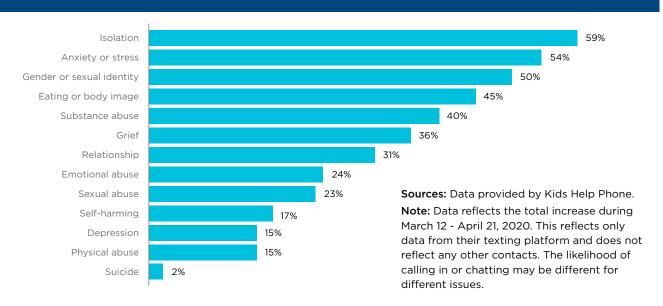
Mental health issues growing for all ages but the types of challenges are different

Morneau Shepell's report found that those aged 20 to 29 had one of the biggest decreases in their mental health of nearly any group with a 22-point decline in their mental health index, almost 6 times higher than those 60 to 69. Their survey did not break out results for seniors 70 and older or for those under 20.

Data from Kids Help Phone show that many children are struggling. Aaron Sanderson, senior vice president at Kids Help Phone reported a 350% increase in service requests. "We haven't seen the volumes abate," says Sanderson. "In fact, the largest daily increase was weeks after the crisis started." Contacts from youth experiencing panic attacks for the first time are on the rise, with text messages concerning anxiety increasing by 54%. Struggles with social isolation are also leading to high call and text volume, as is gender or sexual identify, eating or body image, and substance abuse. Sanderson indicated that while the number of acute calls has increased, the percentage of calls that were severe has remained quite similar, year over year, resulting in an "increase in the absolute number of children who are in imminent danger, while also increasing referrals to child welfare," he adds. Kids Help Phone data also shows that 76% of people reaching out would not have reached out to anyone else while 84% felt better after their conversation, showing the importance these supports are playing for children and youth.



Change in volume of text messages to Kids Help Phone from Ontario by topic area since COVID-19 began



These increases are placing incredible demands on a mental health system for children and youth that was already under strain. Hospital visits resulting from mental health and addictions doubled from 2007 to 2017 for youth 15 to 24.8 These surges added to a system that was already overwhelmed by volume. Children's Mental Health Ontario reported in January 2020 that the waitlist for public mental health services had more than 28,000 children and youth on it, more than double the volume of 12,000 in 2017.9

While several polls have found older adults as a whole have reported fewer mental health issues than those younger, call volumes to support lines tell a very different story. Michelle German, vice president of policy and strategy at Woodgreen, which runs the Toronto Senior Helpline with partners, suggests that for those who are isolated, the challenges have been unprecedented. "After we joined the City's mental health strategy two weekends before Easter, we had 10 times the number of calls we would normally see on a statutory holiday. Instead of 15 to 20, we saw 200 to 300 calls," notes German. What she calls "exponential growth" has led to skyrocketing costs for which there is no corresponding revenue.

Mental health service providers facing unprecedented demand in volume and complexity

The severe financial strain and social isolation are stretching the capacity of crisis lines across the city. The Gerstein Crisis Centre's line has seen triple their usual volume. Executive Director Susan Davis says that with physical programs closed they have had to re-deploy staff to manage the call volume. With the end to social distancing they will face a very real funding gap should the high demand continue, as staff now on the phone lines will need to return to face-to-face leaving, phone support under-staffed. Progress Place's Habal points to another gap: in this new virtual support universe, high-quality technology solutions are required to manage increases in volume and complexity, but those systems are expensive.



This isn't just a volume issue. Social isolation is driving those with complex pre-existing mental health conditions to go to the phones when they would otherwise have received support in person and it is exacerbating conditions too. "We are seeing increased calls from people who are living with mental health issues but are normally well-served by the system," says Davis. "All the distress coping mechanisms are being disrupted while they experience additional pressures."

As text message data shows for Kids Help Phone, far more kids are also reaching out for help with eating and body image, with volumes surging by 45%. According to data provided by Suzanne Phillips, program manager at the National Eating Disorder Information Centre, they have also seen increases in calls, chats, and website traffic. Their YouTube views on their coping tool series have doubled as more people seek out tools to help them through increased challenges.

This is not surprising to Kaitlyn Axelrod, program and outreach coordinator at Sheena's Place, which provides support to adults who are directly or indirectly impacted by an eating disorder. "We are seeing an increase in a lot of symptoms," says Axelrod. Living in uncertain times can lead to feeling out of control, triggering eating disorder symptoms. Changes in structure or routine, increased isolation, and conversations about food scarcity and hoarding can also have this effect. Axelrod says that "eating disorders thrive in isolation." At Sheena's Place they have never been able to keep up with demand. Now in the current high-needs environment and with the cancellation of their fundraising gala, they have had to cut back services.

While it's too early to tell how severe these issues will remain over the coming years, some of these impacts on mental health will prove to be long-term. Medical journal The Lancet published a review of the psychological impacts of quarantine in February 2020, and found that the psychological consequences can persist for some for years after the quarantine and that the longer quarantines go on, the more severe the psychological impact. In studies they cited, they found that three years after the SARS outbreak, hospital workers who had been quarantined had higher rates of post-traumatic stress disorder as well as higher rates of alcohol abuse or dependency symptoms. As well, following quarantine, many healthcare workers continued social avoidance behaviours even three years later. Many of the consequences of the pandemic will remain with us for a long period of time, and mental health will be no exception. Governments and philanthropy must stay focused on this growing and changing health challenge, and prioritize providing sufficient resources for the short and long-term.

Brief prepared by Steven Ayer of Common Good Strategies on behalf of Toronto Foundation.

We would also like to acknowledge Aina-Nia Grant from the City of Toronto for outlining the elements of the City's strategy for dealing with mental health and providing recommendations for organizations to speak with.



Having mental health issues?

There are numerous community organizations available to help you and there is always a phone line available with 24-hour support.

In an immediate crisis?

The Gerstein Crisis Centre's Crisis Hotline is available 24-hours at a day, 7 days a week at (416) 929-5200.

Need help for children and youth?

Text CONNECT to 686868 or call Kids Help Phone. They can be reached at 1-800-668-6868.

Feeling lonely or isolated and need someone to talk?

Progress Place's Warmline can be reached between 12pm - 8pm at 416-323-3721 and between 8pm and midnight at 416-960-WARM (9276).

Are you a senior 65 and older?

The Toronto Senior's Helpline helps those 65 and older with emotional support for loneliness and isolation, short-term crisis management and referral, and service in-person if necessary. They can be reached at 416-217-2077

Struggling with an eating disorder?

The National Eating Disorder Information Centre's hotline can be reached at 416-340-4156 or 1-866-NEDIC-20 or visit nedic.ca to access resources or instant chat support.

Looking to connect with appropriate local organizations?

You can dial 211 on any phone to talk to a representative or visit 211 Central's COVID-19 website, which has the most updated information on services available: https://covid19.211central.ca/. Their support can help you find food, mental health supports, housing supports, and more.

Looking for wellness resources?

Wellness Together Canada is a joint initiative of many leading mental health organizations. Their online portal https://ca.portal.gs/ provides free online resources, tools, apps and connections to trained volunteers and qualified mental health professionals when needed, or text WELLNESS to 741741.

Endnotes



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