

Creative New Jersey's Statewide Conversations – COVID-19 Response

Call #5 – April 29, 2020

Editor's note: This summary covers the general topics and resources shared during the fifth call in a [series of statewide conversations](#) hosted by Creative New Jersey to bring together our network and help people across our state keep connected, share information, and unite in solidarity as we navigate the Coronavirus response in New Jersey.

To register for Creative New Jersey's Statewide Conversations on COVID-19 Response, click the following link: <https://bit.ly/34WETWm>. Calls take place every Wednesday in April and May 2020 (April 1, 8, 15, 22 and 29; May 6, 13, 20, and 27) at 10am.

SUMMARY

Topic: Protecting Our Mental Health during the Pandemic

Guest speaker #1: Jaime Angelini, Director of Consumer Services – Mental Health Association in NJ – Atlantic County

<https://www.mhanj.org/>

Guest speaker #2: Megan Sullivan, Deputy Director – Disaster and Terrorism Branch, Div. of Mental Health and Addition Services – NJ Dept. of Human Services

<https://bit.ly/2ye1Vib>

Guest speaker #3: Dr. Diana Salvador, PsyD, Clinical Director – Dept. of Children and Families – Children's System of Care

<https://www.nj.gov/dcf/about/divisions/dcsc/>

CREATIVE NEW JERSEY'S STATEWIDE CONVERSATIONS COVID-19 RESPONSE
• EVERY WEDNESDAY AT 10AM ON ZOOM
DIFFERENT TOPICS ADDRESSED EACH WEEK •

Call # 5
April 29th

TOPIC: Protecting Our Mental Health During the Pandemic

Registration is Required
www.creativenj.org

GUEST SPEAKERS FOR CALL # 5

 Jaime Angelini Director of Consumer Services Mental Health Association of NJ Atlantic County	 Megan Sullivan Deputy Director Disaster and Terrorism Branch Division of Mental Health and Addition Services NJ Department of Human Services.	 Dr. Diana Salvador, PsyD Clinical Director Department of Children and Families, Children's System of Care
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Join us for these collaborative, interactive conversations

Resources shared by speakers and participants during the call include:

- Mental and Behavioral Health Resources
- Crisis Hotlines for immediate mental and emotional support – including hotlines specifically for youth, LGBTQ and Veterans
- Resource banks – general and for immigrant communities
- Other mental health resources or suggestions

Watch the full recording of this conversation here: <https://youtu.be/BNRDM1w2oAw>

Jaime Angelini (Mental Health Association in NJ – Atlantic County (MHANJ))

<https://www.mhanj.org/>

Jaime Angelini is a Mental Health Advocate and Educator and has been working in the field for 19 years. The good news for New Jersey, although it stems from another disaster is that a lot of disaster mental health work was done after Superstorm Sandy. The learning and response work around mental health as a result of Sandy is the closest we have for comparison to our current situation dealing with COVID-19, and we're applying those past lessons to our current response. Angelini spoke broadly about what the MHANJ has been doing:

Since NHANJ Staff began working from home:

- Started to figure out how to offer their services and program online so that consumers and families living with mental health challenges could have access as soon as possible and minimize disruptions to routines for those with mental health challenges. That included:
 - Converted all of their in-person support groups into virtual meetings
- MHANJ went beyond scope of work to work with the need of the community during the pandemic.
 - Created new groups to provide services that addressed the additional needs of parents, teachers, health care workers
 - They are not providing about 50 different online support groups in addition to services provided through phone calls and case management.
 - They are tapping into new folks they didn't see before – MHANJ has received calls for support from out of the state as well.
- **EMOTIONAL SUPPORT CALL LINE -- 866.202.4357**: MHANJ offers a Call line to help those who need general emotional support but not necessarily traditional counseling.
 - This is an avenue for people to talk about their reactions, and for us to help by validating their reactions, promoting coping skills and ways to mitigate stress. If the caller needs additional support then our call line staff can make that referral.
 - MHANJ is hearing from all sorts of people - parents, healthcare workers, frontline workers.
 - Everyone's reactions to this will be different and we want to validate everyone's reactions.
 - Parents are struggling with Kids/ Health Care professionals are concerned
 - Call is free and services are available in Spanish.
 - Average call is about 23 minutes, whereas pre-pandemic the average call was about 10-12 minutes.

MHANJ is interested in partnerships with organizations: We want to help you! We are here to provide emotional support for NJ's people: We haven't gone through anything like this before and we don't know how long the mental health need will be. If interested, please contact us to let us know: jangelini@mhanj.org

For Free Emotional Support: CALL 866-202-HELP (4357)

Solicite apoyo emocional gratuito de personal capacitado: 866-202-HELP (4357)

7 Dias por Semana de 8am a 9pm

**During the COVID-19 Pandemic
your mental health is vital.**

**Call for free emotional support
from trained staff.**

866-202-Help (4357)
7 Days per Week 8am to 8pm
Multilingual Services Available

New Jersey
MentalHealthCares
NJ Hope and Healing

**Durante la pandemia de COVID-19,
su salud mental es vital.**

**Solicite apoyo emocional gratuito
de personal capacitado.**

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New Jersey
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You can also download the two MHANJ slides pictured above here: <https://bit.ly/2SmMFnz>

If you or someone you know is in a **crisis situation** and having thoughts of **death, dying and/or suicide**, contact the following resources **24 hours a day, 7 days a week**.

- [NJ Hopeline](#): 1-855-654-6735
- [National Suicide Prevention Lifeline](#): 1-800-273-8255
- [National Crisis Text Line](#): text the word "BRAVE" to 741-741
- [Trevor Lifeline](#) (LGBTQ specific crisis line): 866-488-7386 or text "Trevor" to 1-202-304-1200
- [Veteran's Crisis Line](#) (National Suicide Prevention Lifeline): 1-800-273-8255 or text 838255

Questions for MHANJ included:

Q: How do Spanish speakers get tracked to a Spanish language counselor?

A: We have bi-lingual staff on call lines and specific support groups in Spanish.

Q: Is NJ Mental Health talking about the longer-term issues? After Hurricane Sandy we saw mental health issues emerging sometimes 6 months, 12 months, even 24 months later. Are you considering this?

A: Yes, we absolutely are. We are planning for the short and long term. We will see individuals that bounce back and then we will see individuals struggling with getting back to their "pre-disaster" way of functioning. We provided services and counseling at least two years after Sandy and we have to remember that as people come out of this and return back to "normal" life, life will still will work differently – things have changed. We need to help New Jerseyans the best we can now and later.

Megan Sullivan (Disaster and Terrorism Branch, Div. of Mental Health and Addition Services – NJ Dept. of Human Services)

--DHS - Disaster & Terrorism Branch: <https://www.state.nj.us/humanservices/dmhas/home/disaster/>

--Division of Mental Health and Addiction Services, NJ Dept. of Human Services:
<https://www.state.nj.us/humanservices/dmhas/home/>

The Disaster and Terrorism Branch of the Division of Mental Health and Addiction Services became an official branch of NJ State government after 9/11, but they have been working on mental health since Hurricane Floyd (1999). The Branch is constantly planning for disaster, and one of the key pieces of their work is the Disaster Response Crisis Counselor (DRCC) program which is funded in part by Federal Emergency Management Agency (FEMA) and Substance Abuse and Mental Health Services Administration (SAMHSA).

In some ways, what people are experiencing in terms of mental health more closely mirrors post-9/11 symptoms than post-hurricane symptoms - there is more ambient fear:

- Everyone is a little on edge
- We're not sure if we are safe
- Maybe we know someone who has COVID-10 or suffered a loss, or maybe we've been directly affected
- Financial stress due to economic impacts

The **Disaster Response Crisis Counselor** program – called **NJ Hope and Healing**, here, is looking at all of these impacts in their planning. The DRCC has about 500 crisis counseling volunteers available around the state at any given time:

- Trains people in psychological first aid using the FEMA-based “neighbor helping neighbor” model. You do not need to be a licensed clinician to be a volunteer providing psychological first aid in this program, and DRCC has volunteers ready to respond.
- Was awarded the “Immediate Services Program” funding from FEMA & SAMSA to meet current emotional needs of people being affected by COVID-19 -- which is everyone in some form or another: The COVID-19 pandemic is very different than the effects of Hurricane Sandy on mental health. The pandemic affects the whole state, unlike other disasters that affect a finite group of people.
- Our state is now entering a phase where crisis counseling programs need to be available for the short term and long term.
- DRCC is Offering webinars on coping with stress.
- DRCC is supporting the Mental Health Association in NJ’s (MHANJ) call lines by developing programs to help NHANJ shorten call for the times by:
 - Having crisis counselors and graduate interns that received training has enabled a proactive approach by reaching out and calling people back that have called the mental health care line.
- The whole mindset of the DRCC is focused on outreach – not forcing people to come to them but to reach out to the most vulnerable populations for mental health stresses – people like:
 - First responders: DRCC is offering Zoom support drop-in sessions for EMS/first responders/healthcare workers
 - People with access challenges and functional needs (such as dialysis patients)

- People living in recovery from substance abuse or those dealing with active substance abuse. Relapse rates go up during a time of crisis. And it's particularly important to monitor the continuity of operation plans for those dealing with opiate disorders and who need regular treatment services.
- People dealing with domestic violence – we know that reporting is down, which is not necessarily an indication that it's happening less, but that it's not being reported.
- Undocumented populations - Undocumented populations are afraid to go to any kind of agencies
- Partnerships: DRCC looks at who is already working on this most efficiently and develops partnership with those organizations. Right now, the DRCC program and is partnering with:
 - **Mental Health Association in NJ (MHANJ)**: <https://www.mhanj.org/>
 - **Catholic Charities** locations throughout the state – there are branches in Camden, Metuchen, Newark, Paterson, Trenton, and many other cities and towns across our state.
 - **Family Services Bureau** in North Jersey (part of New Community Corporation) – in particular because of the FSB's languages capacity – they have staff who speak a lot of different languages, and can help to reach lots of people who speak languages other than English.
<https://www.newcommunity.org/services/health-care-and-behavioral-health/family-service-bureau-of-newark/>

One in five people were already suffering a level of anxiety prior to the pandemic, so this type of situation increases those numbers!

- We want to be careful about naming what people are experiencing as PTSD (it's important to be careful about "diagnosing" people with something without proper evaluation. That said, what people are often feeling is a free-floating anxiety is absolutely real and that will affect people on different levels. That experience is important to address and its essential that there are plans in place to help.
- The Disaster and Terrorism Branch meets regularly with NJ Voluntary Organizations Active in Disaster (NJVOADs) to find out where the needs are. VOADs are often groups of nonprofits that are dealing with immediate needs in times of disaster and include social service agencies, food pantries, shelters, medical service providers, faith-based organizations and volunteer groups, among others.
 - NJVOAD: <http://www.njvoad.org/>

The Disaster and Terrorism Branch is planning also for the long term needs of the residents. When immediate health & safety is secure, people struggle to understand why they don't feel better, which can be for a host of reasons including feeling grief & loss, financial stressors, disruption of routines, how children may be doing, etc. The long-term recovery for mental health will continue:

- The average length of counseling programs run about 9 months, but:
 - After Superstorm Sandy, we ran counseling programs for 15 months
 - After 9/11, program ran for 3 years

If you'd like to learn more about the DRCC, other programs or how to get involved that are available, email Megan Sullivan at: megan.sullivan@dhs.nj.gov

Questions for the Disaster and Terrorism Branch included:

Q: How many people are in long term recovery from addiction?

A: Nationally, it's about 23 million.

Q: There is a stigma in Latino communities – aside from security issues – about seeking mental health services. Can you speak to this?

A: We partner with agencies that are already doing other things in those communities and have the relationships. It's never helpful if I come into a community and say, "Hi, I'm from the government and I'm here to help," – that doesn't go over well. There are often cultural stigmas for lots of different immigrant groups; sometimes seeking help with mental health issues is seen as a sign of weakness if you need to talk about it outside the family, and when that happens people don't want to participate in programs or seek services. We work with the trusted people in those communities – the culture brokers, the folks who already have "boots on the ground" and know how to reach people to help individuals in Latinx and other immigrant communities get the help they need.

Dr. Diana Salvador, Psy.D. (Dept. of Children and Families, Children's System of Care)

<https://www.nj.gov/dcf/about/divisions/dcsc/>

Dr. Diana Salvador is a child psychologist at the Dept. of Children and Families and she shared what some of the mental health effects are on children during the COVID-19 pandemic, as well as resources and ideas for building resiliency.

What we're seeing:

- **The biggest challenge our youth is facing: the disruption of their routine and the disconnection they are experiencing from others.**
 1. Schools are their most regimented place and the pandemic has taken away that routine which takes away a place of safety and comfort.
 2. Children are experiencing significant disconnection from others - people they are used to seeing on a daily basis (big and small), means they are not being able to maintain that connection in their day to day life and are losing their network of social support.
- **The combination of the two makes us look at this pandemic with a trauma lens.**
 - Younger kids know when there is a shift of how the world is functioning around them, even if they don't understand what's happening.
 - Older youth know that the pandemic is something significant and it can affect them and people they know and love -- and that brings about fear and anxiety, and can give rise to sadness, anger, hyperactivity
 - Kids could be affected developmentally and this fear and anxiety can show up in different ways based on who they are, their temperament, and their age.

- That said, all our kids are having, to some degree what is considered a normal healthy reaction to a healthy sense of fear that we're all feeling in our world right now.
- If families are already struggling with issues, the pandemic has now exacerbated those issues:
 - If children are in situations where they are already vulnerable to abuse and neglect, the pandemic compounds these issues, and the mental health behaviors that result need to be addressed in a more comprehensive fashion.
 - It is hard for kids/families that already are struggling with behavior health issues. When we think about youth and the family system around them - nothing's left untouched by the pandemic. This social and environmental challenges are compounded

What we can do:

- Want to try to move toward creating less disruption and more opportunities for connection
- This can be very simple.
- We can help our kids by tuning in and listening – giving them our full attention (without devices in hand or multitasking) and ask them how they are feeling, if there's anything they want to talk about.
- Work with them to create less disruption in their lives
 - Example: Create a schedule for a child at home to create some sort of routine
 - Others it requires more comprehensive support.
- Therapy is great for some people and is not as effective for others, so there are myriad ways we can help children work through this pandemic.
- In cases where therapy may not be a preferred option, relying on supportive faith-based relationships and families to provide support for children
- However, for those kids who start to develop a real deviation from their baseline, it's time to think about what additional supports can we mobilize in our communities to help support the entire family system. Deviations from baselines can include:
 - Lack of hygiene
 - Not engaging in daily living activities
 - Isolating
 - Significant mood shift for an extended period of time
 - Behavioral shifts (i.e. maybe an 11-year old is climbing into bed with mom and refusing to sleep in their own bed, when they weren't before)
- **Second Floor Hotline - youth of all ages can call or text and speak to someone who is a professional, 24/7.** It's a resource a lot of kids are comfortable with - it's anonymous and confidential.
 - Healthy adult on the other end of the line providing support and elevating the case if additional supports are determined to be needed
- Media consumption:
 - Important to pay attention to the messaging on social media. Watch what the kids are watching! There is a lot of "normalcy" around drinking (alcohol) and eating or other unhealthy habits. It is really important that we continue to eat well and take care of our bodies. Just because it's glorified on social media doesn't mean we should be practicing that.
 - If you are watching the news 24/7, so are your kids. We need to stay informed but it does not need to be on in the background all the time!

Children's System of Care Services:

- CSCS runs the state's behavioral health services across all counties, and to do that they contract with providers to deliver behavioral health therapeutic services, care management services, and family and peer support services.
- This buffet of services is unique: we are the only state in the nation that has such a far reach in terms of children's behavioral health services that are run by a state entity that are available to anyone who calls.
- These services are driven by youth and family voices – strengths based
- When a family reaches out for services, there is a thorough assessment of the challenges and needs the youth and family are dealing with, and also an assessment of their strengths so that those can be leveraged and can inform coping strategies when tailoring services for the youth and family
- **PerformCare** is the hub for these services around the state: <http://www.performcarenj.org/index.aspx>
 - Anyone can help outreach 24/7 to engage in services.
 - Also has a mobile response component which provides emergency crisis intervention services to families where a team will be dispatched – right now the team is virtually dispatched -- to assist.

Resiliency:

So often we are trained to look at the problems and struggles, but's important to remember that – by far -- so many of our families are far more resilient than they are struggling.

- Keep that in mind and figure out how to help our youth and families because there are a lot of strengths.
- **Two factors that build resilience - intrapersonal** (relationship with self) and **interpersonal** (relationship with others).
 - We can leverage those relationships and connections to build personal awareness about how people can take care of themselves, cope and get through this crisis.
- In Googling poetry by youth on "Voices of Youth": <https://www.voicesofyouth.org/tag/poetry>
 - One youth poet writing about the Coronavirus said: **"As Superman would say, 'You are much stronger than you think you are, trust me!'"**

Links to some resources Dr. Salvador mentioned:

- **PerformCare:** NJ's contracted system administrator for the NJ Children's System of Care behavioral health care service array: <http://www.performcarenj.org/index.aspx>
 - **PerformCare Hotline: 877-652-7624**
- **NCTSN:** Supporting Children During Coronavirus: <https://www.nctsn.org/sites/default/files/resources/fact-sheet/supportingchildren-covid-factsheet.pdf>
- **Child Mind Institute:** Supporting Teenagers and Young Adults During the Coronavirus Crisis: <https://childmind.org/article/supporting-teenagers-and-young-adults-during-the-coronavirus-crisis/>
- **World Health Organization:** COVID-19 Resources for Adolescents and Youth: https://www.who.int/maternal_child_adolescent/links/covid-19-mncah-resources-adolescents-and-youth/en/

- **American Academy of Pediatrics:** Teens & COVID-19 <https://www.healthychildren.org/English/health-issues/conditions/chest-lungs/Pages/Teens-and-COVID-19.aspx>
- **2nd Floor Hotline:** Anonymous and confidential call or text helpline for youth: <https://www.2ndfloor.org/>

Questions for Children's System of Care:

Q: Are there specific indicators that a parent or educator should look for as it relates to mental health in young people? I am concerned that some of my students may be disconnected and not in a good place.

*A: If a teacher feels there is a deviation from a child's baseline functioning - look for a sustained or pattered behavior change over time in areas like a significant change in mood, a change in functioning at home (eating, sleeping, hygiene). Look for a pattern of behavior over time. The best way is to ASK the kids how they are doing, or if there is anything they want to talk about. Keep the dialogue open and let kids know we are willing to listen and be present. When we do, kids will give us the clues we need if they need help. Using the PerformCare number is a very good resource to reach out to get feedback. **PerformCare Hotline: 877-652-7624***

Q: Are there specific techniques that people can practice at home to reduce anxiety?

A: There is a lot of research on the utility of mindfulness. Any kind of mindfulness technique (yoga, deep breathing, meditation, visual imagery, progressive relaxation) will help. Anything that helps physiologically calm the body will help calm the brain – that the number one, easiest go to for calming anxiety. There are a lot of apps and YouTube videos to help reduce anxiety and stress. Some recommendations from speakers and participants:

- *Gonoodle.com has a lot of mindfulness activities integrated for kids.*
- *CALM (not free, but for a nominal price)*
- *Breathe 2 Relax apps have great reviews for adults.*
- *Plus use the things you always do to cope with stress - exercise, eating right, sleeping. Go back to basics.*
- *"Meditation and Relaxion Pro" is a great meditation app that one participant uses daily.*
- *ShineApp*

RESOURCES

Additional resources shared by participants on our call:

Resource banks – general and for immigrant communities

- Kimi Wei is working on creating a resource bank for immigrants who don't have enough food, household and baby supplies. If you would like to help with this please contact me at 862-203-8814 or kimiwei88@gmail.com
 - Connect to more pandemic resources via her blog: <http://thewei.com/kimi>
 - Undocumented immigrants are at a real risk and unable to participate in most resources and ineligible based on their limitations.

- Monmouth Resource Net: Please feel free to add your resources here and we will share throughout the state. <http://www.monmouthresourcenet.org/news-events/news/coronavirus-resources/>
- Wicks Aircraft Supply has CLC Clean All-Purpose Surface Cleaner is an industrial grade, 75% isopropyl alcohol surface cleaner. www.WicksAircraft.com

Other mental health resources or suggestions:

- Mobile Response and Stabilization Services are accessible 24/7 through 877-652-7624.
- Despite the situation we're in there is an expectation of being productive, and yet people are struggling with the ability to meet deadlines and focus, particularly if they are being caretakers at home or as part of their work roles (think people working in first-responder, crisis or faith-based fields). We need to STOP and focus on BEING instead of DOING. It's not about lowering expectations - it's about CHANGING expectations.
- There is not beginning and end to this which makes it difficult. We have no way to pace ourselves.
- Struggle for people in "caretaking" roles is trying to find a balance – do they have anyone to take care of them, or are caretakers able to give themselves the freedom to take care of themselves.
 - It's challenging for some to ask for help. We can ask those closest to us to keep a watch on us and point it out because it is hard to see it within ourselves. Figure out what is an emergency for ME versus what is an emergency for YOU. They can be different. It is a way to prioritize what you may need to do for yourself first in order to continue to be able to support others.
- The Arts Wellbeing Collective out of Australia is a great program around the mental health and well-being in the theater community. <https://www.artswellbeingcollective.com.au/>
- Society for the Prevention of Teen Suicide: <https://www.sptsusa.org/>

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