

## Our Pandemic Perspective in January 2022

*Summarized by Thomas T. Thomas*

We are all unwilling participants in this historic pandemic. Heading into January of the third year, it was time to take stock and share our perspective of where families of individuals with mental illness have been, where we're going, and what lies ahead.

NAMI East Bay President **Liz Rebensdorf**, a former school psychologist and now a leader of support groups, called together a round-table discussion by five providers with direct access to and knowledge of the situation on the front lines. Here is their report.

"Families are first responders to people with mental illness," Rebensdorf said. These women have experience, either professionally or as a volunteer, with families dealing with mental illness. She asked them to share, first, observations from the past year or so and how people are coping with the pandemic's effects, and then share something positive.

**Beverly Bergman** is a Family Caregiver Advocacy Specialist with the Mental Health Association of Alameda County who works out of the lobby of the John George Pavilion when it is not locked down due to Covid-19. She also has a daughter with bipolar disease and dual diagnosis.

"It isn't easy to get mental health treatment in the county these days," she said. "People, even those in full-service partnerships, just don't show up for appointments." She used to help people get benefits and now she just tries to help families. She also noted that it's more difficult to get police to execute a 5150, because they are now reluctant to put their hands on other people.

**Patty Espeseth** is Chief Administrative Officer of the Alameda Health System, in charge of intake at John George, and also is a support group leader with Alameda County NAMI. She calls family caregivers "unpaid social workers" and "the people who get it." She said it was easier to be a provider these days than a family caregiver.

Although the Omicron variant is less deadly, she said that deaths are still occurring. And the testing is not helping, because people come into the hospital for other issues, receive a positive test with no symptoms, and must be quarantined. People with mental health issues usually have nowhere else to go and can't be moved, and so the hospitals become "Covid hotels."

The staff have set up special zones in the hospital: red for people with the disease, yellow for those under investigation, and green for people without Covid. "All of this is hard on folks and the staff," she said.

**Rebecca Woolis** is a family therapist and author of [\*When Someone You Love Has a Mental Illness\*](#). She had long experience with public mental health programs and case management in Marin County, San Jose, and at Berkeley's Bonita House and the Creative Living Center before she semi-retired into private practice.

“For people with mental health issues,” she said, “the pandemic has exacerbated symptoms like paranoia and obsessive-compulsive reactions.” With the isolation, there are less available services and people are afraid of getting sick. People with dual diagnosis are also more prone to relapse.

For providers of mental health services, especially access teams in the community, isolation, anger, and anxiety are creating physical problems and difficulty sleeping. “Frustration, isolation, and fear affect all of us, including family members,” Woolis said. “Relationships are stressed.”

**Katy Polony** is a Family Advocate on one of four In-Home Outreach Teams (IHOTs) in the county and a co-founder of Families Advocating for the Seriously Mentally Ill (FASMI).

Polony said she took the IHOT position in order to acquaint herself with the system for the benefit of her mentally ill son. “IHOT teams in the county connect people to services they do not want,” she said.

About half the people IHOT reaches are in families, and half are on the streets—and both groups go in and out of jail. IHOT has a family advocate to collaborate with family caregivers. On the streets, mentally ill people acquire methamphetamine and fentanyl habits, Polony said.

“The families who call the IHOT are desperate and frightened,” she said. “And it’s become more difficult to get their loved one hospitalized.” Police want to de-escalate rather than enforce a 5150. They tell parents to get a restraining order, which turns the situation into a criminal matter, and then the police are forced to take the family member into custody.

FASMI is fighting the dysfunction in the system. Their goals, Polony said, are more beds, more housing, and more full-service partnerships.

**Kate Kosmos** is a School Psychologist with the Oakland Public School District. She works as a therapist, trains school staff, and is on the faculty of Holy Names University.

The trend in schools these days is exhaustion and “pandemic fatigue,” and the workforce to support students is stressed. Professionals are seeing more truancy, more substance abuse, more psychiatric hospitalizations. There is a higher referral to special ed classes in kindergarten and first grade for behavior issues, because these students have missed thirteen months of personal development at a crucial time in their lives.

**Liz Rebensdorf** said support group members reported more anxiety and depression, more isolation, more resort to device use, and more edginess. Families were experiencing interpersonal problems due to the pandemic, climate change, and politics.

Family members with schizophrenia, hypervigilance, and body dysmorphia were reacting especially badly to the pandemic. “It’s not nuanced,” she said.

Then, as to positive trends and observations, **Beverly Bergman** reported that her daughter, after several relapses, has been sober now for six months.

**Patty Espeseth** said the pandemic had been a “great equalizer,” that people were all in the same boat, and she was seeing them be “a little kinder” to each other. As someone in inpatient treatment, she was happy to see people get better

on medication.

She said there was a lot of pride among the staff of her “safety-net hospital,” because they were “working at a place that takes care of everybody.”

**Rebecca Woolis** noted that the isolation of the pandemic and people keeping social distance was actually a relief to people with social anxiety.

Woolis said there was now more general awareness about mental health needs and the lack of services. She also noted that people were bonding as a community and using technology to connect with friends and family who were far away. Telehealth was also becoming more accepted, including for mental health services.

**Katy Polony** said that when the pandemic hit, it almost crushed them: the caseload increased while the number of practitioners decreased. They got through, though, and the pride and camaraderie—the sense that they were doing the best they could and keeping people alive—was bringing the team together.

She noted that FASMI has also helped her turn anger at a dysfunctional system into being able to accomplish something good. The group is spurring people to advocacy—and she announced a February 13 sleep-in on the county Board of Supervisors’ steps.

**Kate Kosmos** described “amazing things” happening in the Oakland schools, including the breakfast and lunch programs that continued feeding thousands of children, not just students, because for some it was their only meal of the day.

Kosmos was seeing people reach out and check in, with technology enabling their conversations. During the toilet paper and other shortages, she saw people switching supplies between households. She also saw more families doing art together; they were channeling their emotions into creative expression.

She also saw people out walking in the evening, after the period of lockdowns, having the resilience to grow from hard experience.

**Liz Rebensdorf** described what people in the support groups were doing for themselves: getting out among nature, getting more exercise, and exploring webinars and online docent tours. She said that one group had started a weekly dance session on Zoom. People were stretching out of their comfort zones, she said.

Rebensdorf also described some recent state legislative moves that would help with mental health issues during the crisis.

[Senate Bill 224](#) would provide for age-appropriate mental health awareness in education.

[Assembly Bill 988](#) would provide special crisis hotline centers for suicide prevention.

And a new program, [CalAIM](#), would seek to improve MediCal services with whole-person approaches to care, improved quality outcomes, and seamless navigation for MediCal enrollees.

In closing, Rebensdorf described a contact she had with a tech-support service person working from home. When asked, the woman said her four children studying at home were becoming closer, and that was a positive thing.