

Terri Johnson:

Okay. Good evening, everyone. Hello. Thank you for joining us for this Ask the Experts: Winter Mental Health Talk. It has been a rough year, and we've had multiple crises and a lot of us are feeling stress, anxiety, and depression.

Terri Johnson:

Now that we're in the holiday season and winter is a week away, less than that, people are also facing ongoing isolation and disappointment due to canceled and altered holiday celebrations.

Terri Johnson:

The short days and limited daylight also mean that some of us are affected by seasonal affective disorder or SAD, and that is why Community Health Plan of Washington has brought together this panel of mental and behavioral health experts to offer some advice and support.

Terri Johnson:

My name is Terri Johnson, and I am the social media and digital media manager here at Community Health Plan of Washington. I'm going to be acting as a host and pose some questions that we have fielded and that have been submitted into us over the last couple of weeks. But first let me introduce our panelists, who will be the experts and the ones answering the questions for us.

Terri Johnson:

To start off, I'm going to call on Dr. Terry Lee. Can you tell us a little bit about yourself, Dr. Terry Lee?

Dr. Terry Lee:

Hello, Terri, thanks for hosting us. And thank you to the audience for joining us. My name is Terry Lee. I'm the Community Health Plan of Washington senior behavioral health medical director. I'm a psychiatrist and child psychiatrist.

Terri Johnson:

And we have a special guest with us from Columbia Valley Community Health, Blake Edwards. Can you tell us a little about yourself and where Columbia Valley Community Health is at or what they're about?

Blake Edwards:

I'm Blake Edwards. I'm the behavioral health director for Columbia Valley Community Health, which is based in Wenatchee over here in North Central Washington. At CVCH, we provide a number of services, including primary care; but in the behavioral health department, we provide mental health and addiction assessment and treatment services. And I'm excited to be here with you.

Terri Johnson:

And then our third panelist is the chief medical officer here at Community Health Plan of Washington, Dr. Paul Sherman.

Paul Sherman:

Hi, I'm Paul Sherman, and I'm a pediatrician by background, but as Terri said, I'm currently the chief medical officer for Community Health Plan of Washington. And I wanted to join in with the rest of the panel in welcoming you tonight. This is, we believe, a really important conversation.

Paul Sherman:

At CHPW, we believe in the power of community and the community coming together to help us all live healthier and happier lives. And we believe this conversation is really important because there has been, over time, too much stigmatization of mental health and mental health treatment. And I realize the fact that almost all of us at some point in our life will have a significant behavioral health issue, and that getting help, getting treatment can make us healthier and happier. We know that according to the American Psychiatric Association, half of the people with serious mental illness do not get treatment.

Paul Sherman:

And especially now, as Terri was saying, putting the pandemic, seasonal affective disorder, the holidays together, we expect over the course of the second half of this year and early next year, that up to 60% of people in the state of Washington will have significant issues with depression, stress, or anxiety. And there are ways that we can help everyone who's affected come through it quicker and better.

Paul Sherman:

And lastly, I want to applaud all of you for participating, because just by being here you're showing that you are taking mental health and treatment for mental health issues seriously.

Terri Johnson:

Thank you very much. Yes, and I echo that. Thank you for everyone who's taking part in this conversation.

Terri Johnson:

One of the first questions, and probably one of the most frequent ones we get around the topic of mental health therapy, is just someone writing in: "I don't have a primary care provider, but I've been struggling with my mental health. Where can I find help?"

Terri Johnson:

Blake, could you answer that question for this person?

Blake Edwards:

Sure, Terri. I work at Columbia Valley Community Health. We are a community health center. We provide primary care and behavioral health services. There are 27 community health centers across the state of Washington, like CVCH. And community health centers, there are primary care providers that they can connect with. And in many cases, those primary care providers have behavioral health providers that they work alongside and that they can partner with to provide care. In many cases, a primary care provider can refer a patient to see a behavioral health provider that day or next day.

Blake Edwards:

But there are also many specialty behavioral health agencies around the state. We have a number of wonderful behavioral health agencies in my area, and I know there are around the state, that folks can connect with for mental health and addiction treatment services.

Blake Edwards:

And if you are having a hard time figuring out that next step, the state of Washington has what's called the Washington Recovery Help Line, which helps to provide some assistance with referring to provider agencies within the regions and to help connect you with a provider. And the number to that helpline is 1-866-789-1511. And the state of Washington has also set up a hotline called Washington Listens for 24-hour emotional support. That line is 1-833-681-0211.

Terri Johnson:

Thank you for that. And we'll make sure and have those numbers posted at the end if anyone is interested in picking those up that's in the audience listening. Further question from that, related question here is, "I don't have health insurance, but I'm experiencing overwhelming depression and anxiety. Are there low- or no-cost options for me?"

Terri Johnson:

Paul, would you be able to take that one?

Paul Sherman:

Yes, it'd be my pleasure. And there are low- or no-cost options, which I'll talk about in a moment, but first I wanted to emphasize more what Blake said about because you mentioned overwhelming depression and anxiety. If you have an urgent need, you could call one of the numbers that Blake suggested. If you don't have those at your fingertips, it's really easy to Google, put in your city or your county and crisis line, and options will pop up so you can use one of those.

Paul Sherman:

If you're having a less urgent need, there are low- or no-cost options, both as Blake said at the community health centers as well as the specialty behavioral health community centers. There are many across the state. There are some in all regions. Most are general and are designed for everyone, but there are also some specialty mental health services, like Consejo for Hispanic or Latino people, Asian Counseling and Referral Service, Seattle Counseling Service for sexual minorities. So lots of options.

Paul Sherman:

And as Blake said, Washington Listens can help connect you, but you can also just go to the community health center or the behavioral health service organization in your area. They can help you. They all have free or sliding-scale options. They can also help you determine whether you qualify for Medicaid for free, or hook you up with other services, and they can make sure that you get wherever you need to get the treatment you need.

Terri Johnson:

That's great. Thank you.

Terri Johnson:

Someone else wrote in, saying that they live in a remote part of the state and the nearest mental health provider is over an hour away. How can they get more accessible care for their mental health?

Terri Johnson:

Terry, would you be able to help with that one?

Dr. Terry Lee:

Sure. Yeah. Some of the audience may be aware that remote behavioral health services have really expanded during the pandemic. So you can get help by just using the Internet, your smartphone, or computer, FaceTime, and even the telephone. So, all of these types of services are covered, and they've really grown quite a bit.

Dr. Terry Lee:

So research would show, even pre-pandemic, that people living in remote areas really love using telepsychiatry. Actually, part of what held it back is that the providers were not always comfortable with delivering care in this manner. But the pandemic has really encouraged expansion of services, and therapists really expanded their comfort zone with using teleservices. And so if you live in a remote part of the state, you can access behavioral health just like you were in a more populated area of the state.

Dr. Terry Lee:

So as Blake and Paul have said, you can access this by contacting mental health plan, or you can call the Warm Line at <https://www.crisisconnections.org/wa-warm-line/>. You can contact your primary care provider, and they should all be able to connect you with a clinician who's providing services via telephone, or telelink, or Internet.

Terri Johnson:

Great. Thank you.

Terri Johnson:

This next question, I think will be a good one for you, Blake, they wanted to know what signs should they look for in their child to be aware of their emotional wellbeing this year and any year.

Blake Edwards:

Yeah, Terri. So I'd say that parents, grandparents, caregivers know their unique children and can simply be aware of signs that the child is experiencing fear or stress, or displaying concerning changes in their behavior.

Blake Edwards:

But also interestingly, research links emotional wellbeing very closely to children being able to communicate and interact with others in a positive way. But children's feelings are often inaccessible at a verbal level. And developmentally, many children lack the cognitive verbal facility to express what they feel and emotionally to focus on the intensity of what they feel and express that verbally.

Blake Edwards:

For example, it's thought that most children aren't developmentally able to engage in abstract reasoning or thinking until around age 11, fully. And children struggling emotionally may show signs of a short attention span, or behaviors such as just being irritable, or withdrawn, or very upset. They may find it difficult to express how they feel. They may struggle to know how to communicate better than displaying anger or frustration.

Blake Edwards:

I want to add, play is a very important way that children communicate, and it's an important way that parents can help their child process what they're going through emotionally. You can use role-play with stuffed animals or toy figures to get a temperature check with your preschool or elementary-aged children to find out how they're feeling about all the things going on. And they may not tell you outright, but they may be able to engage in that sort of a play and give you a pretty good sense of actually what they are experiencing.

Terri Johnson:

That's great. I got another question here. How do I manage symptoms of seasonal affective disorder on top of COVID-related anxiety? Terry, would you be able to talk about that?

Dr. Terry Lee:

Yes. So seasonal affective disorder is a special depression. It happens, as you were describing Terri, in the Northwest when the days get shorter, the sun is lower in the sky, and there's just not as much light.

Dr. Terry Lee:

So things that you can do include like getting outside every day for 30 to 60 minutes a day, even on cloudy days. And then the usual things for self-care, like keeping a schedule, getting good sleep and good appetite, making sure that you're rested, those things can all help.

Dr. Terry Lee:

And then there are more specific treatments. So for seasonal affective disorder, there's a treatment called a light box. So this is a medical device. It's something that you should work on obtaining with your doctor once you decided together that you have seasonal affective disorder.

Dr. Terry Lee:

And this is a bright light. It's not like a tanning booth. It's actually a special light that you keep and turn on in the morning for about 30 to 60 minutes a day. And so you get a burst of bright light early in the morning, or sometime during the morning to help with your seasonal affective disorder.

Dr. Terry Lee:

Then there's something called a dawn simulator. So this isn't a medical device, this is something you can get on your own. So this is like an alarm clock with light. So about an hour or two before you're supposed to wake up, a light starts in your room, and then it gets brighter and brighter over the next hour or two. And then by the time you wake up, it's at full light. And so it's just like a sunrise, and this has been shown to help seasonal affective disorder as well.

Dr. Terry Lee:

And because this is a special type of depression, the usual treatments for depression help as well. So psychotherapy and antidepressant medication.

Dr. Terry Lee:

So if you have concerns or you don't seem to be functioning as well, you should go see like your primary care provider or perhaps a mental health provider, just to talk and get an assessment. It doesn't necessarily mean that you're suffering from a disorder, but it's nice to be evaluated by clinician, and you can decide together on next steps and whether you want more formal services for mental health concerns.

Terri Johnson:

Thank you.

Terri Johnson:

Now, what if I'm looking for different ways that I can support a loved one who is experiencing depression during the holidays? What advice would you give them on, Terry?

Dr. Terry Lee:

Well, the holidays are supposed to be a happy time, but they can be a very stressful time. And then if there's someone you're worried about, if you have a loved one you're concerned about, I would suggest that you reach out and connect with them and talk to them about how they're doing. And if there are concerns, I would give them a chance to talk, and just listen to them, listen actively and just acknowledge how they're feeling there. There's no need to undo or try to fix their depression right there. Just give them a chance to talk, and that by itself can be helpful.

Dr. Terry Lee:

I would also suggest trying to engage the loved one that you're worried about and go out, if possible, get them out of the house, get them walking, get some exercise. If you're not able to get them out and you're not close enough and you're connecting by Internet or telephone, I would engage them around shared interests or activities, or it's the time maybe that they can learn new activities or engage in things that they haven't done before.

Dr. Terry Lee:

I would also suggest that you talk to friends and family and get them to engage the loved one that you're worried about, and really provide a much larger support network so the individual can have more interaction and more stimulation and activity.

Terri Johnson:

That way, you feel supported in helping that person. Also, it's not just a one-on-one situation. That sounds like a great idea.

Terri Johnson:

With my mom, she lives alone and is in Florida. So we actually pulled her into a Zoom call to watch The Nutcracker together, since that's been one of our usual holiday traditions. And doing it separate was a little bit different, but at the same time, it was nice to still have that shared holiday memory, even if this is, again, a very unusual and challenging year.

Terri Johnson:

One more question I've got here is from somebody who wrote in saying, "I live alone and feeling very isolated. How can I go about feeling less lonely?" Paul, did you want to take that one?

Paul Sherman:

Sure. The coronavirus pandemic and subsequent stay-at-home orders, that put a strain on all of us, regardless of where we live or who we live with, but isolated without others presents a unique set of challenges. And just hearkening back to what I said at the beginning, we really expect that 60% of residents of the state of Washington are going to have significant issues with depression, stress, or anxiety.

Paul Sherman:

And so those who live alone need to be especially deliberate in planning their days and making sure that they have a schedule and a routine and don't end up losing a whole day playing Solitaire and they're not doing other things to keep themselves healthy because our normal schedules are so often all just tossed to the wind.

Paul Sherman:

Especially for people who are isolating alone, they're frequently people who are retired or not working. And so they could go days without interacting with others. And humans are social animals. We're designed to interact with each other, and it's not healthy for us to not have that contact.

Paul Sherman:

And also, having contact with others can help you talk about your worries or your fears and keep them in perspective. When you're just in your own head, I think everyone has had this experience where your worries and fears grow out of proportion to where things actually are, and friends and family can help with that.

Paul Sherman:

So it's really important that you nurture your existing relationships. A great thing is you have more time, you are at home alone. So write letters, talk to people on the phone. But especially a good option if you have video capability is Zoom calls, like you did with your mother, Terri.

Paul Sherman:

A really good idea is to set those up on a routine basis, every week, every couple of weeks, because all of us when we get depressed or lonely, we can lack motivation and might not reach out. And so having them schedule, that you have something to look forward to and that you're going to do that, and then you are interacting. You can do it one-on-one. You can do it in small groups.

Paul Sherman:

And I know that some people with how busy other's lives are, et cetera, don't have friends or family that have that availability. So I would encourage you, if that's the case with you or even if you have some friends to talk to, to reach out if you have been involved in social groups or a church group, to reach out to them and get involved through them.

Paul Sherman:

And if you really can't think of any options to have that routine contact, then you should reach out to a therapist or to your primary care provider. Or even if you have health insurance plan, they will have some options and ideas and can give you some direction.

Paul Sherman:

In addition to making sure you have that human interaction, it's really important as Terry was talking about with seasonal affective disorder, that you take care of your body. Get exercise. It's great, both for seasonal affective disorder and for overcoming the effects of isolation, to get out even if it's cloudy, end of light, take a walk. Just keep your body moving, keep everything working well. If the weather is too bad to go out for a walk, maybe a video on TV for an exercise or aerobics class.

Paul Sherman:

You need to watch what you're eating and drinking, again as Terry said with the seasonal affective disorder. Another great thing that you can do is to pick up a new hobby or skill, whether it's crocheting, or baking, or

memorizing state capitals, just something to keep your mind sharp, that's going to help you, and keep it growing and thinking in new ways.

Paul Sherman:

And that's one of the great things about the Internet; whether it's learning how to tie a bow tie, learning how to knit, learning how to bake, you can find instructional videos for anything.

Paul Sherman:

Another great thing with those skills is that for just about anything, you can find a group of like-minded people online, whether it's scrapbooking or calligraphy, and actually have a social connection, too, while you're doing that hobby.

Paul Sherman:

It's really important that you also think about the signs so that when you may be getting into trouble and need extra help. So if you find yourself routinely eating or drinking more than you intend to, find yourself hyper anxious and worrisome, find that you're not being able to sleep, all those things should really be warning signs that you should reach out and get some help from a professional.

Terri Johnson:

That's great advice.

Terri Johnson:

Let's see. We've got about eight minutes left. I'll again call out that there is a chat function here. If anyone in attendance has a question that they'd like to type in, can do that. We have included in the chat that Washington Recovery Help Line and also the Washington Listens phone number on there. I also want to call out that we have been recording this session and we will be sharing this recording on the Community Health Plan of Washington's social channels. We're also going to work on getting a transcript of the conversation that we can also take that transcript and translate it so we can share that in a few different ways.

Terri Johnson:

Before we close out, though, I also want to just go back to each of our panelists. In Washington, we had one of the first cases of COVID-19 in the country. So this has been a long nine, 10, 11 months. What have each of you been doing to help with your mental health this year, or what one advice would you most want people to take away today?

Terri Johnson:

Blake, why don't we start with you?

Blake Edwards:

Okay. Let's see. I might have to give a few as I think this out. So the first thing I'd say is, and these are certainly things that I'm trying to do is, one would be when we think of all that's going on in the world, offering generous assumptions, assume others are doing the best they can.

Blake Edwards:

These are stressful times, and different people have different reactions, different ways of dealing with things and giving that grace. Secondly, take time to laugh. Whether that means FaceTiming or Zooming with friends

or family, maybe friends you haven't seen and spoken to in a while, or watching a comedy is important and fun. And third, I'd say talk to someone. It's so easy to become isolated during this pandemic, and it's always easier to become isolated during the winter.

Blake Edwards:

The last thing is gratitude; trying to end each day with gratitude. I remember reading once that research shows that writing one thing down each day before you go to bed that you're grateful for can lead to increased positive emotions the next day. And so I think there's something to learn from that.

Terri Johnson:

That's a great idea. I like that. Terry, how about you?

Dr. Terry Lee:

Well, I think we've discussed a lot of good strategies and a lot of good self-care techniques. Certainly, keeping a schedule. I like to wake up every day and get some exercise in the morning. I like to get some blood pumping, get some oxygen flowing to my brain, think about what's going to happen for the day and just have time to plan things out. So I just think that's always a good start.

Dr. Terry Lee:

We've also been talking about managing holiday stress. It can be stressful any year, but I think especially under COVID it can be especially hard. So I think it's a good idea to set realistic expectations for yourself and what to expect. I think you should be clear with yourself that it will be different this year, and you should be clear with your family as well.

Dr. Terry Lee:

I think it's important to plan things. So the children especially will know what's going to happen next. I think it's helpful for everyone to know what's going to happen. That said, there's still room for surprises.

Dr. Terry Lee:

I think we should also consider what's meaningful about the holidays, what's the most important thing. If possible, try to continue traditional family and cultural celebrations, but it's okay to say, "Well, we can't do it this year." It's also a good year to develop new traditions.

Terri Johnson:

Good call. How about you, Paul? Do you want to close us out here?

Paul Sherman:

Yeah. I just wanted to emphasize, as someone who myself has been dealing with social isolation, my son went off to college, and it's me alone with my geriatric dog who sleeps 20 hours a day. And I am working, but after being on team meetings eight hours a day on the computer for quite a while, I thought the last thing I wanted to do was get on a Zoom call and have friends nudge me. And it made such a difference because the quality of interaction when you're on teams call doing work, it's not the human interaction I crave.

Paul Sherman:

And you also have to think that not only are you reluctant, but other people that you know may be reluctant, may be struggling and you don't even know. I have a good friend who I called several times early in the

pandemic and thought like, "Well, if he wants to talk, he'll call me back." And months went by. And it was just last night, I'm like, "I really need to check in on him."

Paul Sherman:

I found out his relationship had ended in the meantime, and he was home alone and struggling and didn't have the motivation to reach out. But we had a great conversation and he wants to get together on a socially distanced way. We have to realize that as much as we may be missing this connection, we should reach out to our networks because there are people out there that are going to be struggling as well.

Terri Johnson:

Thank you for that. For everyone out there listening, I hope this conversation has some good tips for you, maybe provided some good ideas, and I hope that you continue the conversation with the people in your life. And if you are struggling in any way, or looking for a little extra assistance, or support or advice, reach out to the phone numbers that we called out at the end of the broadcast.

Terri Johnson:

You can also go to our website, chpw.org, and you'll find a behavioral health center that we've got set up there that is free and open to anyone, and we'll walk you through some tips and steps and also provide some resources.

Terri Johnson:

Again, we'll be sharing this conversation in full, and we hope that this is just the start of a conversation as we all start moving into winter and looking ahead to 2021.

Terri Johnson:

So thank you very much for joining us today. Thank you to like Blake, Terry, and Paul for leading the conversation today. And I hope you all have a good evening and take care of yourself. Wear a mask.

Resources:

Washington Recovery Help Line 1-866-789-1511

Washington Listens 1-833-681-0211

WA Warm Line 1-877-500-9276

Consejo Counseling and Referral Service (206) 461-4880

Asian Counseling and Referral Service (206) 695-7600

Seattle Counseling Service (206) 323-1768

