

ASPR TRACIE Technical Assistance Request

Request Receipt Date (by ASPR TRACIE): 24 June 2020

Response Date: 26 June 2020

Type of TA Request: Complex

Request:

The requestor asked for resources regarding staffing shortages, unemployment numbers, suicide attempts, behavioral healthcare shortages, and any economic impacts related to recent disasters.

Response:

The ASPR TRACIE Team reviewed our existing resources, namely the following:

- [Training and Workforce Development Topic Collection](#). In particular the [Willingness to Work and other Workforce Considerations](#) section, which provides information related to the staffing shortage portion of this request.
- [Recovery Planning Topic Collection](#). In particular, the [Must Reads](#), [Event-Specific Lessons Learned](#) and [Plans, Tools, and Templates](#) sections.
- [COVID-19 Behavioral Health Resource Collection](#). In particular, the [Compilation Sites and Documents](#) section.
- [COVID-19 Healthcare Delivery Impacts quick sheet](#) and accompanying [tip sheet](#).

We also conducted a search online for additional materials and reached out to our Subject Matter Expert (SME) cadre members to gather feedback or related materials. Those resources are provided in this document. Resources marked with an asterisk (*) appear in more than one category.

Please refer to the Centers for Disease Control and Prevention's (CDC) [Coronavirus Disease 2019 webpage](#) for the most up-to-date clinical guidance on COVID-19 outbreak management. Visit the [ASPR TRACIE COVID-19 page](#) for additional healthcare planning resources.

I. SME Comments

Please note: These are direct quotes or paraphrased comments from emails and other correspondence provided by ASPR TRACIE SME Cadre members in response to this specific request. They do not necessarily express the views of ASPR or ASPR TRACIE.

- We would encourage the requestor to be on the lookout for a report from The National Council for Behavioral Health, who surveyed members (in early April) about their

expected financial viability. (Contact ASPR TRACIE for file that details results of that survey.)

- Early results indicate that 62% of providers thought their practices could only survive ≤ 3 months under the current conditions. The National Council is fielding a follow-up version of the survey, so hopefully they will release new numbers soon.
- Although the National Council for Behavioral Health information is helpful, the survey is not nationally representative, so we have been exploring other ways to assess how many behavioral health practices are closing.
- Ideally, we would use SAMHSA's provider directory as a sampling frame and call/conduct an online search for practices to see how many have closed, but that would be very time intensive. However, Yelp has been monitoring the number of businesses (in different sectors) that have been closing as a way of assessing the impact of COVID-19 on the economy, and they have geographic data.
- Behavioral health providers are listed on Yelp, so our organization reached out to Yelp in the hopes that we can use their data to track how many (and where) behavioral health practices are closing. This would not be a perfect dataset, but it would complement the National Council data. Here is the latest quarterly report (released 6/25/2020) from Yelp, for context: <https://www.yelpeconomicaverage.com/yelp-coronavirus-economic-impact-report>.

II. Resources on the Economic Impact of Disasters

Abramson, D., Van Alst, D., Merdjanoff, A., et al. (2015). [The Hurricane Sandy Person Report: Disaster Exposure, Health Impacts, Economic Burden, and Social Well-Being](#). Academia.

The authors examine the impact of Hurricane Sandy ("the dose") on the health and well-being of New Jersey residents ("the response") exposed to the storm. Primary findings include: the negative effect housing damage had on residents' health is similar to the effect of poverty; some toxins (e.g., mold) had a double negative effect (e.g., clinically-diagnosed asthma and mental health distress); and children living in homes that experienced minor physical damage were more likely to be sad or depressed or having sleeping problems.

Abramson, D., Stehling-Ariza, T., Park, Y., et al. (2010). [Measuring Individual Disaster Recovery: A Socioecological Framework](#). National Center for Disaster Preparedness, Columbia University.

The authors developed a framework for measuring disaster recovery based on five measures: housing stability, economic stability, physical health, mental health, and social role adaptation.

Amadeo, K. (2019). [Natural Disasters' Economic Impact](#). The Balance.

The author examined the economic impact of disasters over recent years and lists the 20 most destructive national disasters to occur worldwide.

American Hospital Association. (2020). [Hospitals and Health Systems Face Unprecedented Financial Pressures Due to Covid-19](#).

This report assesses the financial impact of COVID-19 on hospitals and health systems. The results from this report estimate hospitals and healthcare systems could lose a total of \$202.6 billion over four months. The estimation does not include costs associated with drug shortages, increases in wages and labor, non-PPE medical supplies and equipment, and costs associated with COVID-19 response.

Centre for Research on the Epidemiology of Disasters, a World Health Organization (WHO) Collaborating Centre (CRED). (2017). [Annual Disaster Statistical Review 2016: The Numbers and Trends](#).

This report examines the human and economic impacts of natural disasters experienced worldwide in 2016 and provides regional analysis. It describes the Emergency Event Database (EM-DAT), which uses a global approach to compile disaster data.

Centre for Research on the Epidemiology of Disasters, a WHO Collaborating Centre (CRED). (2018). [Cred Crunch 50: Natural Disasters in 2017: Lower Mortality, Higher Cost](#).

This fact sheet provides statistics about disasters in 2017, including the number of disasters, fatalities, people affected, and economic damages.

Internal Displacement Monitoring Centre (IDMC). (2019). [Points of No Return: Estimating Governments' Fiscal Resilience to Internal Displacement](#).

This document is part of the series "The Ripple Effect: Economic Impacts of Internal Displacement," and estimates the fiscal gap that governments of countries affected by internal displacement may face because of future displacement crises. This research highlights how, even when the needs of the people affected by these crises are met and responses planned efficiently, internal displacement damages social networks, mental and physical health, productivity, well-being, and welfare.

National Academies of Sciences, Engineering, and Medicine. (2019). [Setting Priorities for Health, Social and Economic Disruptions from Spills in Alaska: Learning from the Past, Preparing for the Future](#).

This 58-page report summarizes a workshop held in Anchorage, Alaska, in February 2019 to gather feedback at the local and regional level to identify opportunities for

improving preparedness for the public health, social disruption, and economic impacts of oil spills. Discussion topics included impacts to mixed subsistence economies, commercial fishing, and tourism; effective integration of human health and community well-being into local and regional response planning; and how to better prepare communities for an oil spill. The workshop was sponsored by the National Academies of Sciences, Engineering, and Medicine Gulf Research Program, and the Sea Grant Program.

RAND Corporation. (2020). [Health and Economic Impacts of Nonpharmaceutical Interventions to Address COVID-19: A Decision Support Tool for State and Local Policymakers](#).

This document describes the interdisciplinary and multisectoral approach used to develop the COVID-19 Decision Support Tool, which is designed to fill the need for a comprehensive and systematic assessment of potential public health interventions to address COVID-19 and when to relax them. **NOTE:** The economic model is described beginning on page 40.

III. Resources on the Economic Impact of COVID-19 on Behavioral Health Funding

Ingoglia, C. (2020). [Ignoring Behavioral Health Care Needs Harms Patients and Communities](#). National Council for Behavioral Health.

The author explains that little funding from the Coronavirus Aid, Relief, and Economic Security (CARES) Act has reached behavioral health providers, partly due to misunderstanding of the effect of disasters such as COVID-19 on people with mental illnesses, and the population at large.

National Council for Behavioral Health. (2020). [House Passes HEROES Act as Part of COVID-19 Response](#).

This press release highlights the Health Economic Recovery Omnibus Emergency Solutions (HEROES) Act and how it would support community behavioral health organizations. The Council emphasizes that the amount is not enough, however, to avert serious mental health crises in the wake of COVID-19.

IV. Staffing Shortages

ASPR TRACIE. (2020). [Staff Absenteeism Resources](#).

This ASPR TRACIE TA response provides resources for healthcare system emergency planners and healthcare workers to use while preparing for and responding to staff absenteeism during COVID-19. It includes previous studies and lessons learned from real

events on willingness of staff to report to work, mitigation of staff shortages, preventing absenteeism, and building a robust workforce.

Cleeland, N. (2020). [Hospitals Face Staffing Shortages, Reduced Budgets in Coronavirus Pandemic.](#)

The author notes the increase in demand for staff coupled with the economic impact of postponing elective procedures; some facilities are being conservative in their hiring to avoid additional financial duress.

Langan, J. and Krieger, M. (2019). [Staffing Needs and Associated Costs in Times of Disaster: An Integrative Review.](#)

The authors conducted a meta-analysis of articles that detailed nursing staffing and finance plans, and findings for surge events. Table 1 summarizes the 16 articles and the authors emphasize the importance of federal and state resources as force multipliers and the importance of interprofessional education to facilitate an “all hands on deck” response.

U.S. Department of Health and Human Services. (2013). [Report to Congress on the Nation’s Substance Abuse and Mental Health Workforce Issues.](#)

This report details the predicted increase in people with mental health issues and the related shortage in staff to help provide care and treatment.

V. Suicide and Disasters

Alfonso, C. (2018). [PTSD and Suicide After Natural Disasters.](#) Psychiatric Times.

The author summarizes literature on post-disaster mental health and describes the aftermath and emotional toll of Hurricane Maria in Puerto Rico.

Dutheil, F., Mondillon, L., and Navel, V. (2020). [PTSD as the Second Tsunami of the SARS-Cov-2 Pandemic.](#) Psychological Medicine.

The WHO estimates that between 30 and 50% of the population affected by a disaster also suffer from psychological distress. The authors call attention to post-traumatic stress disorder as a secondary effect of the COVID-19 pandemic (for the general population and healthcare workers and staff) and emphasize the need to plan now to address the related risk of suicide.

- * Petterson, S., Westfall, J., and Miller, B. (2020). [Projected Deaths of Despair from COVID-19](#). Well Being Trust.

This report attempts to predict what deaths of despair might be seen based on three assumptions during COVID-19: economic recovery, relationship between deaths of despair and unemployment, and geography.

- SAMHSA. (2015). [Supplemental Research Bulletin Issue 5: Traumatic Stress and Suicide After Disasters](#).

This Supplemental Research Bulletin focuses on research highlights related to traumatic stress and suicide, including suicide rates, suicidal ideation, and suicide plans and attempts, in relation to disasters.

- Tucci, V., Moukaddam, N., Meadows, J., et al. (2017). [The Forgotten Plague: Psychiatric Manifestations of Ebola, Zika, and Emerging Infectious Diseases](#). *Journal of Global Infectious Diseases*. 9(4): 151-156.

The authors discuss the negative mental health effects of infectious diseases, including suicidal ideations and completions.

VI. Unemployment and Disasters

- * Petterson, S., Westfall, J., and Miller, B. (2020). [Projected Deaths of Despair from COVID-19](#). Well Being Trust.

This report attempts to predict what deaths of despair might be seen based on three assumptions during COVID-19: economic recovery, relationship between deaths of despair and unemployment, and geography.

- RAND Corporation. (2010). [Workforce and Economic Recovery: Effects of Hurricane Katrina](#).

This research brief details the short- and longer-term influences of Hurricane Katrina on labor markets in Alabama, Florida, Louisiana, and Mississippi using data from the federal monthly Current Population Survey. The report includes graphs of predicted probability of labor force participation, employment, unemployment, and self-employment.