

1 [Supporting National Mental Health Awareness Month During COVID-19]

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3 **Resolution supporting National Mental Health Awareness Month and efforts of mental**
4 **health service providers to implement low-barrier, quality services in order to**
5 **overcome the negative impacts of COVID-19 to a person’s mental health and wellness**
6 **during the global pandemic.**

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8 WHEREAS, On February 25, 2020, Mayor London Breed proclaimed a state of
9 emergency (the “Public Health Emergency”) in response to the spread of the novel
10 coronavirus COVID-19; on March 3, 2020, the Board of Supervisors concurred in the
11 February 25, 2020, Proclamation and in the actions taken by the Mayor to meet the Public
12 Health Emergency; and

13 WHEREAS, To mitigate the spread of COVID-19, on March 16, 2020, the Local Health
14 Officer issued Health Order No. C19-07 directing San Franciscans to “shelter in place,” or stay
15 at home, except as necessary to take care of essential needs; and

16 WHEREAS, The COVID-19 pandemic and orders to “shelter in place” have caused
17 both a psychological and economic depression that has negatively affected the mental health
18 and stability of many people especially those already suffering from mental illness and
19 substance use disorders; and

20 WHEREAS, The month of May has been designated as National Mental Health Month
21 to fight stigma, provide support, educate the public and advocate for policies that support
22 people with mental illness and their families; and

23 WHEREAS, Prior to the COVID-19 pandemic, nearly one in five of U.S. adults (47
24 million) reported having a mental illness in the past year; and

1 WHEREAS, Over 11 million had a serious mental illness, which frequently results in
2 functional impairment and limits life activities; and

3 WHEREAS, In 2017-2018, nearly 17 million adults and an additional 3 million
4 adolescents had a major depressive episode in the past year; and

5 WHEREAS, In 2018, nearly a third (32.5%) of adults reported feeling worried, nervous,
6 or anxious on a daily, weekly, or monthly basis; and

7 WHEREAS, A broad body of research links social isolation and loneliness to poor
8 mental health; and recent data shows that significantly higher shares of people who were
9 sheltering in place (47%) reported negative mental health effects resulting from worry or
10 stress related to coronavirus than among those not sheltering in place (37%); and

11 WHEREAS, Negative mental health effects due to social isolation may be particularly
12 pronounced among older adults and households with adolescents, as these groups are
13 already at risk for depression or suicidal ideation; and

14 WHEREAS, Existing mental illness among adolescents may be exacerbated by the
15 pandemic, and with school closures, they will not have the same access to key mental health
16 services; and

17 WHEREAS, With long-term closures of childcare centers and schools, many parents
18 are experiencing ongoing disruption to their daily routines; and

19 WHEREAS, Findings from an April 2020 Kaiser Family Foundation Tracking Poll show
20 that among parents with children under the age of 18, nearly three out of five (57%) women
21 say that worry or stress related to the coronavirus has negatively impacted their mental
22 health, up from 36% of women in the same tracking poll conducted two weeks prior; and

23 WHEREAS, The same poll also finds that women with children under the age of 18 are
24 more likely to report negative impacts to their mental health than their male counterparts (57%
25 vs 32%, respectively); and

1 WHEREAS, Research shows that job loss is associated with increased depression,
2 anxiety, distress, and low self-esteem and may lead to higher rates of substance use disorder
3 and suicide; and

4 WHEREAS, To address the growing mental health concerns during COVID-19 the
5 Mental Health Association of San Francisco (MHASF) has expanded their Peer Run Warm
6 Line (“Warm Line”) to anyone in California needing 24/7 mental health support; and

7 WHEREAS, The Warm Line is a highly accessible, low-threshold mental health
8 resource that people can use to seek support before they've reached the crisis point, in the
9 hope that support now will prevent a crisis later; and

10 WHEREAS, Prior to the Shelter in Place directives, The Warm Line averaged 3,100
11 calls and chat sessions per month with trained peers with specialized training in supporting
12 mental health challenges; and

13 WHEREAS, The Warm Line has seen an increase of 53% in call volume, now
14 averaging 5,800 calls and chat sessions per month between March 2020 and April 2020; and

15 WHEREAS, 19% of San Francisco calls and chats were COVID-19 related in March
16 2020, which increased to 38% in April; and

17 WHEREAS, 37% of all California calls and chat were COVID-19 related in March 2020,
18 39% in April 2020; 84% of calls and chat session chat are from individuals that have used the
19 service before; and

20 WHEREAS, Post COVID-19 MHASF has not only continued but expanded its 1:1 Peer
21 Coaching/Support and Group Support services through virtual support group platforms like
22 Adults on the Autism Spectrum, Managing Anxiety, People of Color, Community Building
23 Coffee Talk with MHASF, and Collecting Behaviors/Hoarding Disorder; and

24 WHEREAS, The National Alliance on Mental Illness, San Francisco (NAMI SF) has
25 also increased their support groups to four times a week, to meet the heightened demands

1 post COVID-19, through online support groups and psychoeducation classes for families and
2 individuals living with a mental health condition; and

3 WHEREAS, NAMI SF continues to raise awareness in the community by offering
4 mental health education and stigma reduction programs online for high school students,
5 businesses, and community groups; and

6 WHEREAS, Recent polling data shows that more than half of the people who lost
7 income or employment reported negative mental health impacts from worry or stress over
8 coronavirus; and lower income people report higher rates of major negative mental health
9 impacts compared to higher income people; and

10 WHEREAS, Many hospitals across the country are overwhelmed with the growing
11 number of patients presenting with symptoms of COVID-19; and

12 WHEREAS, Research indicates that burnout in hospitals is particularly high for young
13 registered nurses and nurses in hospitals with lower nurse-to-patient densities; physicians are
14 also prone to experiencing burnout and can consequently suffer from mental health issues,
15 including depression and substance use; the risk of suicide is also high among physicians;
16 now, therefore, be it

17 RESOLVED, That the San Francisco Board of Supervisors, the Department of Public
18 Health, and Office of the Mayor reaffirm their commitment in achieving the true goals of
19 mental health parity by: 1) increasing awareness and understanding of mental health issues;
20 2) providing resources for San Franciscans to utilize in protecting their mental health; 3)
21 emphasizing the need for appropriate, immediate, high quality, and accessible services for all
22 people with mental health conditions; and 4) ensure that services and treatment respect the
23 constitutional rights of individuals; and, be it

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1 FURTHER RESOLVED, That the San Francisco Board of Supervisors, the Department
2 of Public Health, and Office of the Mayor support and prioritize continued diagnostic testing for
3 mental health and precision mental health treatments; and, be it

4 FURTHER RESOLVED, The San Francisco Board of Supervisors, the Department of
5 Public Health, and Office of the Mayor to support accessible low barrier treatment options
6 such as widespread mental health screening, telehealth options for all, and increased access
7 to inpatient mental health services.

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