Can the Adult Needs and Strengths Assessment Evaluate the Impact of the COVID-19 Pandemic on Assertive Community Treatment Patients?

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Introduction

- The Adult Needs and Strengths Assessment (ANSA) evaluates patients’ needs and strengths, guides treatment, and helps monitor outcomes in adults with mental illness.\(^1\)
- ANSA form linked in QR code.
- ANSA is used in the Assertive Community Treatment (ACT) program and reassessed every 6-12 months.
- The COVID-19 pandemic has disproportionately impacted individuals with severe mental illness (SMI).\(^4\)
- Health professionals need to be aware of the pandemic’s impact on mental health to effectively address the needs of vulnerable populations.\(^3\)

Purpose

To analyze ANSA scores between the pre- and during the COVID-19 pandemic across four domains: functioning, strengths, behavioral and emotional needs, and risk behaviors.

Methods

- ANSA scores reviewed from 47 ACT patients (age 25-63 years) enrolled in a single-center program from 2018 to 2022.
- Based on WHO’s official declaration of a pandemic time as March 11, 2020 we chose pre-pandemic (January 1\(^{st}\), 2018 to March 10\(^{th}\), 2020) and pandemic (March 11\(^{st}\), 2020 to January 17\(^{th}\), 2022) time durations for our study.\(^3\)
- Independent t-tests analyzed scores in 4 domains: functioning, strengths, behavioral/emotional needs, and risk behaviors.
- Cultural factors and Caregiver resources and needs domains were excluded from analysis.

Results

- Figure 1. Comparison of functioning domain scores (total out of 48) from pre- vs. during pandemic era.
- Figure 2. Comparison of strengths domain scores (total out of 39) from pre- vs. during pandemic era.
- Figure 3. Comparison of risk behaviors domain scores (total out of 24) from pre- vs. during pandemic era.

\(\textbf{❖ Statistically significant decrease in scores (p < 0.05)}\)

\(\textbf{❖ Improvement in life functioning with less need for intervention.}\)

\(\textbf{❖ Statistically significant increase in scores (p < 0.05)}\)

\(\textbf{❖ Decrease in strengths with increased need for intervention.}\)

\(\textbf{❖ Statistically significant increase in scores (p < 0.05)}\)

\(\textbf{❖ Increase in risky behaviors with increased need for intervention.}\)

Discussion

- COVID-19 crisis has worsened pre-existing psychiatric conditions with some studies demonstrating patients with SMI have lower levels of awareness of the pandemic with subsequently less anxiety around contracting the virus.\(^4\)
- Lower socioeconomic status and lower level of educational achievement may have also contributed to incomplete understanding of the pandemic, and thus less impact on life functioning (Figure 1).\(^4\)
- Telemedicine has improved functioning and quality of life and may have improved access to care, particularly in patients with transportation barriers.\(^5\)
- Social distancing/stay-at-home orders led to decreased public crowding and increased personal space, which may have allowed individuals with SMI to feel more comfortable performing daily tasks in public settings (crowding and limited personal space were previously barriers to functioning.)
- Decreased awareness and understanding may explain increase in risky behaviors during pandemic (Figure 3).
- Decrease in strengths may be explained by negative impact of social distancing and closure of public places on social and interpersonal connections and decreased employment and volunteering experiences (Figure 2).
- No statistically significant difference was found in the behavioral/emotional needs domain.

Conclusions

- COVID-19 pandemic increased life functioning, decreased strengths, and increased risky behaviors.
- Further studies are needed to understand impact of pandemic on mental health and identify areas in need of improvement.

Future Aims

- Investigate impact of COVID-19 pandemic on domain subcategories and different demographics (i.e. age, gender, race/ethnicity, socioeconomic status).
- Identify how the ANSA can be used to assess impact of other global crises on ACT patients.

References