# **UC SANTA BARBARA**





# COVID-19 Impacts Findings

Below is a summary of the COVID-19 findings from the Listening Tour. Similar to the 2019 Listening Tour findings, themes have been grouped by:

- 1. Structural factors contributing to needs
- 2. Obstacles while seeking care
- 3. Challenges while providing care
- 4. Opportunities to address needs

This report addresses the key findings within the Listening Tour interviews and focus groups on the topic area of current COVID-19 impacts. This reflects current needs and opportunities resulting from the COVID-19 pandemic and does not reflect historical impacts, although it is notable that many of these needs and opportunities have persisted throughout the pandemic.

The 2022 Community Health Needs Assessment (CHNA) included a Listening Tour with community members and leaders, including public health officials, health providers, nonprofit workers, Cottage Health employees and government leaders. Focus groups and interviews were conducted from July through September 2022 on the topic of COVID-19 pandemic impacts.

Access to services and resources were the top themes when examining structural factors. For obstacles while seeking care, mental health needs were the most prevalent theme, and for obstacles providing care, cost of living was the top. Lastly, recommendations for improvements around COVID-19 implications focus on increasing education.

### **Structural Factors: Access to Services and Resources**

The **struggle to find services and health care providers** was especially limited during the COVID-19 pandemic. Access to care continues to be limited, and this lack of access to care is affecting people's current health status. Particularly, there were difficulties accessing medical and dental appointments.

"What we've been seeing both amongst staff and among our clients is difficult... difficulty in being able to access health care. Just simply making an appointment for a physical for instance, is difficult as it was before the pandemic, and now it seems that physicians have less availability. And so just simply making an appointment, you know, for a simple health care checkup, welfare checkup takes months. And, and I think that's a growing problem that we've seen before the pandemic, but it's gotten worse since the pandemic." (COVID-19: Leaders Countywide)

"It's difficult to get good medical attention because they're so backstaffed...It's kind of hard not to be able to navigate it.... so like my teeth per se. I've got one thing pulled. I had missed one appointment, but they were so far out now. All of my top teeth are... now gotta come out. I mean, because the backup, you know, I had an extraction. And this was a month ago, I called for an extraction. I said I was in pain. They told me till the end of October...But the medical attention and how it's backing up, and the need for more medical facilities that are accessible for triage is like pretty backed up normal stuff like our teeth, cleaning, checkups, stuff like that. If it was so far back, that you might get a test right now and not get...help or four months down the line. But because of me not getting my shoulder fixed, you know, I mean for four months now my back's hurting from compensating for my shoulder. So I think the hardest thing during Corona is the battle with health care." (COVID-19: Homelessness/Lived Experience Group South County)

"And we're still everything is still kind of catching up. Right? The appointments that we had to have, we're still waiting for them. Sometimes they get canceled. So we're still dealing with all of that." (COVID-19: Cottage Health: Nutrition and Environmental Services)

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Another disparity seen is that accessing providers, resources and various services is even more limited for those without the ability to pay for medical fees and expenses.

"I think after also trying many times, most people that are reasonable have probably stopped trying to get into whatever doctor they've been trying to see. I mean, people are only human, and I'm not going to spend three hours on the phone trying to hunt down, you know, whatever specialists to take care of my chronic medical condition that's ironically predisposing me for the pandemic itself. So I think when you have all the money in the world, you have more resources. And that's another disparity we pointed out to where if you don't have resources, and you're just a person that might not have all the money in the world, then you don't necessarily know who to call either sometimes. So it's multifocal, probably where I don't know who to call right away in this smaller town. There's only so many doctors, but we don't have as many doctors as even Ventura and the Thousand Oaks area. They have a lot more options down there." (COVID-19: Cottage Health: Nutrition and Environmental Services)

"Not having the opportunity to pay for your appointment, your next appointment for your therapy...it's like it gets you angry at the fact that you don't have enough to pay for the next session or the medical coverage that you have covered for six months and not for the rest of your life that you'll be needing for mental health." (Youth Behavioral Health: MICOP)

# **Obstacles While Seeking Care: Mental Health**

The increase in mental health needs and the lack of availability of mental health providers emerged as the top theme in trying to understand the barriers people face around accessing care during the COVID-19 pandemic.

"Mental health, definitely, is an issue that's been very prevalent prior to the pandemic and just magnified given the pandemic and housing, another issue, and our healthcare system." (COVID-19: Service Providers South County)

"I think one answer is that a lot of people don't deal with [mental health needs]. And I say that really broadly, I think, thinking about all the behavioral health needs across the community, not only the clients that we support, folks with severe and persistent, maybe undiagnosed, untreated mental illness that weren't getting access to services. But even so, one of my daughters needed to see a therapist during the pandemic, and of the ones that we call, they were so stressed out, not taking new clients." (COVID-19: South County Service Providers)

"And in the nonprofit sector, it's complicated too. We're all stretched. And I'm not sure how individuals are receiving that mental health care that they need for themselves and doing this work." (COVID-19: Service Providers South County)

Within mental health, participants described an increase in more serious mental health illnesses during the pandemic.

"And so, it just felt like we're seeing a lot more serious mental illness within our shelter as well, and not just in Santa Barbara. I mean, I think we're seeing it like across the state... And so we're having conversations about having to reimagine traditional service delivery models that we have and looking at them differently, to make sure that we're actually meeting the needs and not operating as a band-aid." (COVID-19: Service Providers South County)

# **Obstacles While Providing Care: Recruiting and Retaining Providers**

Challenges with recruiting and retaining service providers due to the high cost of living in Santa Barbara County was identified as an obstacle to providing care and services. The high cost of living, coupled with an increase in staff resignations and burnout, has led to staffing vacancies and difficulties in hiring new providers.

"Particularly now that there's kind of a shift in things with services. I would just echo that the retention of staff and people in the community, I think, not just our agency, but other agencies, is a challenge going forward because I think the pandemic... I think this is something-I don't want to use the new normal - but this is kind of what we're dealing with on a daily basis here with our population and probably many other populations also." (COVID-19: Service Providers Countywide)

Given that the surrounding areas, like Ventura, are somewhat more affordable than Santa Barbara, **many service providers have sought housing in other areas.** 

"Santa Barbara is a great community to work in and to live in. But it is very challenging, even for folks who have regular 8 to 5 jobs. You know...housing is difficult. I know that there are agencies in town that are trying to hire people. And this is a huge barrier because they can't live in Santa Barbara. I know people who are living in Ventura, or people who are living outside of the area." (COVID-19: Service Providers Countywide)

Particularly of importance when working at a community health center is living in the area to best understand the needs of the community being served.

"Secondly, we don't have enough providers. And that problem is exacerbated in a community health center. And thirdly, I think where they live plays a role." (COVID-19: Leader Countywide Interview)

In addition to high costs of living, an **increase in resignations and workplace burnout** are contributing to the difficulty with recruitment and retention of providers.

"Professional upheaval that people have experienced in their professional lives and the ways that it has impacted staffing shortages. There are great resignations, burnout and career transitions. All causing workforce staffing crises like never seen before." (COVID-19: Leader Interview South County)

Lastly, it was voiced that the **burnout was disproportionately affecting female physicians** in part due the increase demand in home and work balance, including increases in childcare demands and responsibilities.

"We're also seeing a lot of physician burnout. Disproportionately female colleagues are burning out. The aggregate effect of the strain on work and relationships has yielded bad effects on doctors who have decided they don't want to be physicians anymore. (COVID-19: Leader Interview South County)

### **Recommendations for Improvements to Address COVID-19 Impacts**

It was mentioned that at the beginning of the pandemic, there was an increase in communication to the public about available services and resources. Many service providers mentioned the communication and connections they were able to have with each other during the early phases of the pandemic. There is a strong desire to **maintain and strengthen these relationships to better serve clients and educate** each other.

"I think at the beginning of the pandemic, there were all sorts of weekly phone calls and things focused on safety, and how to connect our clients to resources quickly, especially in, you know, first testing, and then vaccinations, and whatnot. And now, just being able to stay connected to the health care providers, including the behavioral health providers, who continue to be understaffed, just making it easier. Having those services be as direct as possible, as immediate and as accessible as possible. Because folks that are already at such a disadvantage, and so disenfranchised, and sort of underresourced aren't going to be able to go to great lengths to access those services. So making them as readily available as possible, continuing to educate ourselves, educate each other as things develop, because they sort of change and develop very quickly. Which I do feel was the case, at the beginning and throughout the majority of the pandemic, but I think just continuing that: continuing to make sure we're really on top of everything that's available. And then just continuing to address all those social determinants of health, all the things that contribute to folks being at risk." (COVID-19: Service Providers South County)

There was a desire for **bidirectional communication between service providers and clients** to ensure that services provided are meeting clients' needs. Specific mention was made of outreaching to the undocumented population to ensure that information on benefits and resources are available and accessible, especially given limited availability of services for this population.

"You know, for-profits and restaurants have Yelp, where they get direct feedback from their consumers on how to be better and how to improve. I think sometimes as social service agencies, we're not looking at how we can always improve. And it's not always our fault, right, because we're sometimes at the mercy of our funders. And so we're kind of spinning our wheels, trying to figure out how to adapt to the needs of our consumers and folks that we're seeing come through our doors."

(COVID-19: Service Providers South County)

"The undocumented population, as well as a lot of low income population, I think, don't understand what benefits are available to them, or what services are available to them. And they don't know if they qualify for them or what hoops that need to be jumped through to access those services. I would love something that is easily accessible and that people can know. Yeah, if their documentation status affects the health service that they receive or is insurance necessary to receive some of the health benefits, and things like that. I think that those kinds of questions come up a lot. And I think that a lot of people are already put out thinking that it just doesn't apply to them, or they can't access those services. So I don't know what that would look like—more PSAs or something that helps the community understand what is available to them." (COVID-19: Service Providers South County)