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Is New Orleans Having a Mental Health Breakdown?

A new medical study provides a bleak snapshot of the city and its residents

By RUSSELL MCCULLEY/NEW ORLEANS

Over the past several months, psychiatrist James Barbee has witnessed a disturbing trend among his patients in New Orleans—a noticeable slide from post-Katrina anxiety to more serious, and harder to treat, cases of major depression. At the same time, the city's system for dealing with mental health care is suffering a major breakdown of its own. "People are just wearing down," says Barbee. "There was an initial spirit about bouncing back and recovering, but it's diminished over time, as weeks have become months."

Nearly one year after Hurricane Katrina slammed into the Gulf Coast, killing more than 1,300 and displacing thousands more, frustration over the slow pace of recovery is taking a toll on the region's overall mental health. Initially, complaints reflected what some locals have dubbed "Katrina Brain": general fatigue brought on by the disruption of their lives, difficulty concentrating, mood swings, and mild depression. In most cases, it was nothing that reached critical levels. But since the first of the year, Barbee says, "there's been a steady increase in depression, specifically major depression." Worse, he adds, there's little evidence that things will get better any time soon.

Barbee, a professor at Louisiana State University Health Sciences Center and director of the Anxiety and Mood Disorders Clinic, sums up the situation with a quote he saw in a local magazine recently: "There's no 'post-' to the post-traumatic stress syndrome in this situation," he says. The stress, in other words, never goes away. "The event is still unfolding. People are losing jobs. They're moving because they're so discouraged by the situation. There's a lot of uncertainty about the future. It's not easy to live here."

Barbee is co-author of a report, published this week in the Journal of the American Medical Association, which tries to put some real numbers behind what many health care professionals have known anecdotally: that New Orleans may be in the midst of a serious breakdown, both among residents and the health care system needed to treat them. Barbee and his co-authors — psychiatrists Mark Townsend, also of LSUHSC, and Richard Weisler, of the University of North Carolina at Chapel Hill — pull together data that, collectively, provide a bleak snapshot of the city's mental health condition as it approaches the storm's one-year anniversary.

Shortly after Katrina, the report says, a Centers for Disease Control and Prevention poll determined that roughly half of respondents indicated a possible need for mental health assistance, yet fewer than 2 % were getting counselling. A February survey of people living in temporary FEMA-subsidized housing found that more than two-thirds of female caregivers reported feelings of anxiety, depression and other mental health disorders. As many as half of the children they were caring for were suffering from mental disorders of their own. A poll of police officers and firefighters, most of whom lost homes in the storm, found that roughly 20% were experiencing post-traumatic stress syndrome and that one in four emergency responders was suffering from major depression. More troubling, perhaps, is a 25% jump in the mortality rate, including a three-fold increase in the suicide rate ? a conservative estimate since many self-inflicted deaths are classified as accidental.

To make matters worse, the city is suffering from a dearth of mental health services. By most estimates, a little less than half of the city's pre-Katrina population of 450,000 has returned. But there are only a total of 20 psychiatric beds available in the few New Orleans hospitals that have reopened, compared to about 300 before the storm. By last April, the report says, only 22 of 196 psychiatrists were practicing in the city, shifting a good portion of mental health treatment to the 140 primary care physicians, out of 617, who had returned. With 96 inpatient psychiatry beds, the Medical Center of Louisiana — better known as Charity Hospital — was once the city's biggest mental health care provider. Now, it dispenses emergency care from a makeshift clinic housed in a former Lord & Taylor department store. The heavily flooded hospital may never reopen.

Townsend, head of LSUHSC's Behavioral Research Clinic, says part of the problem boils down to bricks and mortar. "We literally do not have a lot of buildings to put beds in right now," he says. Despite the physicians' best attempts to gauge the scope of the looming disaster, much is still unknown — the real suicide rate, much less how many people are even living in the city. Says Townsend, "All I know is there are a lot of people in emergency rooms all over town who aren't able to be admitted and are just kind of hanging in this limbo between being admitted and being on the street."

To rebuild the system, Townsend and others are calling for more help from the federal government, including an amendment to the 1974 Stafford Act that would provide long-term mental health assistance, rather than current rules that only allow funding for services in the immediate aftermath of a disaster. The Substance Abuse and Mental Health Services Administration provided 1,200 volunteer counsellors for the Gulf Coast until June 30, when funding for its Katrina response program ended. Local doctors would like to see that help continued as well as more help rebuilding the area's teaching hospitals and physician training programs.

If there's a hopeful note to be found in the depressing pile of statistics, it's that Katrina's aftermath should yield lessons for mental health care providers dealing with a future disaster. "People will learn from us," says Townsend. "Because a disaster like this will occur again."