Mental Health and Psychosocial Considerations During COVID-19 Outbreak

12 March 2020
In January 2020 the World Health Organization (WHO) declared the outbreak of a new coronavirus disease to be a Public Health Emergency of International Concern. WHO stated there is a high risk of the 2019 coronavirus disease (COVID-19) spreading to other countries around the world. In March 2020, WHO made the assessment that COVID-19 can be characterized as a pandemic.

WHO and public health authorities around the world are acting to contain the COVID-19 outbreak. However, this time of crisis is generating stress in the population. These mental health considerations were developed by the WHO's Department of Mental Health and Substance Use as messages targeting different groups to support for mental and psychosocial well-being during COVID-19 outbreak.

General population

1. COVID-19 has and is likely to affect people from many countries, in many geographical locations. Do not attach it to any ethnicity or nationality. Be empathetic to all those who are affected, in and from any country. People who are affected by Covid-19 have not done anything wrong, and they deserve our support, compassion and kindness.

2. Do not refer to people with the disease as “COVID-19 cases”, “victims” “COVID-19 families” or the “diseased”. They are “people who have COVID-19”, “people who are being treated for COVID-19”, “people who are recovering from COVID-19” and after recovering from COVID-19 their life will go on with their jobs, families and loved ones. It is important to separate a person from having an identity defined by COVID-19, to reduce stigma.

3. Minimize watching, reading or listening to news that causes you to feel anxious or distressed; seek information only from trusted sources and mainly to take practical steps to prepare your plans and protect yourself and loved ones. Seek information updates at specific times during the day, once or twice. The sudden and near-constant stream of news reports about an outbreak can cause anyone to feel worried. Get the facts; not the rumors and misinformation. Gather information at regular intervals, from WHO website and local health authorities platforms, in order to help you distinguish facts from rumors. Facts can help to minimize fears.

4. Protect yourself and be supportive to others. Assisting others in their time of need can benefit the person receiving support as well as the helper. For example, check-in by phone on neighbors or
people in your community who may need some extra assistance. Working together as one community can help to create solidarity in addressing Covid-19 together.

5. Find opportunities to amplify positive and hopeful stories and positive images of local people who have experienced COVID-19. For example, stories of people who have recovered or who have supported a loved one and are willing to share their experience.

6. Honor caretakers and healthcare workers supporting people affected with COVID-19 in your community. Acknowledge the role they play to save lives and keep your loved ones safe.

Healthcare workers

7. For health workers, feeling under pressure is a likely experience for you and many of your health worker colleagues. It is quite normal to be feeling this way in the current situation. Stress and the feelings associated with it are by no means a reflection that you cannot do your job or that you are weak. Managing your mental health and psychosocial wellbeing during this time is as important as managing your physical health.

8. Take care of yourself at this time. Try and use helpful coping strategies such as ensuring sufficient rest and respite during work or between shifts, eat sufficient and healthy food, engage in physical activity, and stay in contact with family and friends. Avoid using unhelpful coping strategies such as tobacco, alcohol or other drugs. In the long term, these can worsen your mental and physical wellbeing. This is a unique and unprecedented scenario for many workers, particularly if they have not been involved in similar responses. Even so, using strategies that have worked for you in the past to manage times of stress can benefit you now. You are most likely to know how to de-stress and you should not be hesitant in keeping yourself psychologically well. This is not a sprint; it’s a marathon.

9. Some healthcare workers may unfortunately experience avoidance by their family or community due to stigma or fear. This can make an already challenging situation far more difficult. If possible, staying connected with your loved ones including through digital methods is one way to maintain contact. Turn to your colleagues, your manager or other trusted persons for social support- your colleagues may be having similar experiences to you.

10. Use understandable ways to share messages with people with intellectual, cognitive and psychosocial disabilities. Forms of communication that do not rely solely on written information should be utilized if you are a team leader or manager in a health facility.

11. Know how to provide support to, for people who are affected with COVID-19 and know how to link them with available resources. This is especially important for those who require mental health and psychosocial support. The stigma associated with mental health problems may cause reluctance to seek support for both COVID-19 and mental health conditions. The mhGAP
Humanitarian Intervention Guide includes clinical guidance for addressing priority mental health conditions and is designed for use by general health workers.

Team leaders or managers in health facility

12. Keeping all staff protected from chronic stress and poor mental health during this response means that they will have a better capacity to fulfil their roles. Be sure to keep in mind that the current situation will not go away overnight and you should focus on longer term occupational capacity rather than repeated short-term crisis responses.

13. Ensure good quality communication and accurate information updates are provided to all staff. Rotate workers from higher-stress to lower-stress functions. Partner inexperienced workers with their more experienced colleagues. The buddy system helps to provide support, monitor stress and reinforce safety procedures. Ensure that outreach personnel enter the community in pairs. Initiate, encourage and monitor work breaks. Implement flexible schedules for workers who are directly impacted or have a family member impacted by a stressful event. Ensure you build in time for colleagues to provide social support to each other.

14. If you are a team leader or manager in a health facility, facilitate access to, and ensure staff are aware of where they can access mental health and psychosocial support services. Managers and team leaders are also facing similar stressors as their staff, and potentially additional pressure in the level of responsibility of their role. It is important that the above provisions and strategies are in place for both workers and managers, and that managers can be a role-model of self-care strategies to mitigate stress.

15. Orient responders, including nurses, ambulance drivers, volunteers, case identifiers, teachers and community leaders and workers in quarantine sites, on how to provide basic emotional and practical support to affected people using psychological first aid

16. Manage urgent mental health and neurological complaints (e.g. delirium, psychosis, severe anxiety or depression) within emergency or general health care facilities. Appropriate trained and qualified staff may need to be deployed to these locations when time permits, general health care staff capacity in mental health and psychosocial support should be increased (see mhGAP Humanitarian Intervention Guide)

17. Ensure availability of essential, generic psychotropic medications at all levels of health care. People living with long-term mental health conditions or epileptic seizures will need uninterrupted access to their medication, and sudden discontinuation should be avoided.

Care providers for children
18. Help children find positive ways to express feelings such as fear and sadness. Every child has their own way to express emotions. Sometimes engaging in a creative activity, such as playing, and drawing can facilitate this process. Children feel relieved if they can express and communicate their feelings in a safe and supportive environment.

19. Keep children close to their parents and family, if considered safe for the child, and avoid separating children and their caregivers as much as possible. If a child needs to be separated from their primary caregiver, ensure that appropriate alternative care is provided and that a social worker, or equivalent, will regularly follow up on the child. Further, ensure that during periods of separation, regular contact with parents and caregivers is maintained, such as twice-daily scheduled phone or video calls or other age-appropriate communication (e.g., social media depending on the age of the child).

20. Maintain familiar routines in daily life as much as possible, or create new routines, especially if children must stay at home. Provide engaging age appropriate activities for children, including activities for their learning. As much as possible, encourage children to continue to play and socialize with others, even if only within the family when advised to restrict social contact.

21. During times of stress and crisis, it is common for children to seek more attachment and be more demanding on parents. Discuss COVID-19 with your children using honest and age-appropriate way. If your children have concerns, addressing those together may ease their anxiety. Children will observe adults’ behaviors and emotions for cues on how to manage their own emotions during difficult times. Additional advice available here.

Older adults, care providers and people with underlying health conditions

22. Older adults, especially in isolation and those with cognitive decline/dementia, may become more anxious, angry, stressed, agitated, and withdrawn during the outbreak/while in quarantine. Provide practical and emotional support through informal networks (families) and health professionals.

23. Share simple facts about what is going on and give clear information about how to reduce risk of infection in words older people with/without cognitive impairment can understand. Repeat the information whenever necessary. Instructions need to be communicated in a clear, concise, respectful and patient way. It may also be helpful for information to be displayed in writing or pictures. Engage their family and other support networks in providing information and helping them practice prevention measures (e.g. handwashing etc.)

24. If you have an underlying health condition, make sure to have access to any medications that you are currently using. Activate your social contacts to provide you with assistance, if needed.
25. Be prepared and know in advance where and how to get practical help if needed, like calling a Taxi, having food delivered and requesting medical care. Make sure you have up to 2 weeks of all your regular medicines that you may require.

26. Learn simple daily physical exercises to perform at home, in quarantine or isolation to maintain mobility and reduce boredom.

27. Keep regular routines and schedules as much as possible or help create new ones in a new environment, including regular exercising, cleaning, daily chores, singing, painting or other activities. Help others, through peer support, neighbor checking, and childcare for medical personnel restricted in hospitals fighting against COVID-19 when safe to do so. in accordance with previous ones. Keep regular contact with loved ones (e.g. via phone or other accesses).

28. Prepare a personal safety pack. The pack may include a summary of basic personal information, available contacts, medical information, regular medicines for two weeks, storable preferred snacks, a bottle of water, and some personal clothes.

People in isolation

29. Stay connected and maintain your social networks. Even when isolated, try as much as possible to keep your personal daily routines or create new routines. If health authorities have recommended limiting your physical social contact to contain the outbreak, you can stay connected via e-mail, social media, video conference and telephone.

30. During times of stress, pay attention to your own needs and feelings. Engage in healthy activities that you enjoy and find relaxing. Exercise regularly, keep regular sleep routines and eat healthy food. Keep things in perspective. Public health agencies and experts in all countries are working on the outbreak to ensure the availability of the best care to those affected.

31. A near-constant stream of news reports about an outbreak can cause anyone to feel anxious or distressed. Seek information updates and practical guidance at specific times during the day from health professionals and WHO website and avoid listening to or following rumors that make you feel uncomfortable.

Stay informed

Find the latest information from WHO on where COVID-19 is spreading: https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports/

https://www.epi-win.com/

Addressing Social Stigma:


Briefing note on addressing mental Health and Psychosocial Aspects of COVID-19

https://interagencystandingcommittee.org/iasc-reference-group-mental-health-and-psychosocial-support-emergency-settings/briefing-note-about