

QUESTIONS AND ANSWERS ON COVID-19 & MENTAL HEALTH AND SUBSTANCE ABUSE (For Health Care Workers)

Questions	Answers
<p>What is the link between mental health and COVID-19?</p>	<p>The WHO note “Mental Health and COVID-19” includes details on the link between COVID-19 and mental health.</p> <ul style="list-style-type: none"> • Mental health conditions can result from the extended periods of lockdown, fear about contracting COVID-19, worry about losing a job, or not making a living. For those who survive severe COVID-19 disease, they may have anxiety and depression. For the friends and relatives of those who die, they may go through grieving and some of them progress to depression. There have been increased incidences of intimate partner violence, which can result in mental health conditions as well. • Health care workers are also at increased risk of mental disorders, due to the high-risk environments they work in, sometimes without adequate protection and sometimes working for long hours, which can lead to burnout. Some have fallen sick and some have died. Some of the responders, such as the burial/cremation workers, have taken to abuse of alcohol and other substances, as a way of coping. • There is misinformation about consumption of alcohol and tobacco being protective, leading abuse of alcohol and initiation or increased cigarette consumption. People with pre-existing mental health conditions are also at risk as the increased stress or the inability to get to the health unit to get a refill could trigger a relapse. • Below are two links to valuable information: https://www.who.int/publications-detail/WHO-2019-nCoV-MentalHealth-2020. https://interagencystandingcommittee.org/iasc-reference-group-mental-health-and-psychosocial-support-emergency-settings/briefing-note-about
<p>How can mental health be promoted?</p>	<p>Mental health promotion would have to target the various populations.</p> <ul style="list-style-type: none"> • The general public should limit the amount of time on social media following COVID-19 stories. They can also avoid stories that are distressing. Some time should be taken for exercise and for connecting with the family by phone or through virtual meetings. Other activities that people could engage in include meditation, reading, listening to music, doing yoga and so on. They can also watch movies or play board games. • Health Care Workers and responders, should work shorter hours in the ICU and high-risk areas. Exercise, as well as yoga and meditation will promote mental well being. It is also recommended that all HCWs get an orientation in Psychological First Aid and/or other psychological interventions. • A resource for children that has been translated into a number of languages and that can be further translated is the book “My Hero is you” https://interagencystandingcommittee.org/iasc-reference-group-mental-health-and-psychosocial-support-emergency-settings/my-hero-you

<p>How can mental disorders and substance abuse be prevented during the COVID-19 Pandemic?</p>	<ul style="list-style-type: none"> • Messages can be developed to be sent out by SMS, or broadcast on televisions and radios, advising the general population on how to prevent mental disorders. • People are advised to limit time spent on social media, and avoid listening or reading conspiracy theories where there is no evidence. Worry is prevented when the population has access to accurate information, including the number of people infected, those who recover and those who are quarantined. • , Every effort should be made to ensure people with pre-existing mental health conditions have access to their regular medications. • The following WHO Stress Management Guide “Doing what matters in Times of Stress” is available for wide dissemination. https://www.who.int/publications-detail/9789240003927
<p>What mental health and substance use disorder interventions can be provided in relation to the COVID-19?</p>	<p>The Clinical Guidelines for the Management of COVID-19 include mental health and psychosocial support. Interventions that can be included in the response plan are:</p> <ul style="list-style-type: none"> • Creation of the MHPSS Technical Working Group that would guide and coordinate all these activities based on the local context. • Ensure that all health care workers have had the orientation in Psychological First Aid in relation to COVID. Materials are available here https://reliefweb.int/report/world/remote-psychological-first-aid-during-covid-19-outbreak-interim-guidance-march-2020 • Each treatment centre for COVID-19 should have at least one Clinical Psychologist or a Counsellor to provide support to each of the admitted patients, the family and health care workers. • Each treatment a centre should have access to at least one health care worker per shift, who is able to manage acute anxiety and moderate to severe depression as well as delirium in patients admitted to the centre. The normal medications included in the Essential Drug List for treatment of anxiety and depression should be used. The guidelines are in Mental Health Gap Action Programme (MHGAP) Treatment Guide. • There should be a Mental Health and Psychosocial Support (MHPSS) Helpline with qualified call centre attendants (Mental Health Nurses, Counsellors, Mental Health Clinicians, Psychiatric Clinical officers), who can provide listening and helping to those who call in with severe anxiety and/or depression, panic attacks, severe grief reaction. There should be health units available where those without COVID-19 can be referred when further examination and treatment is required.