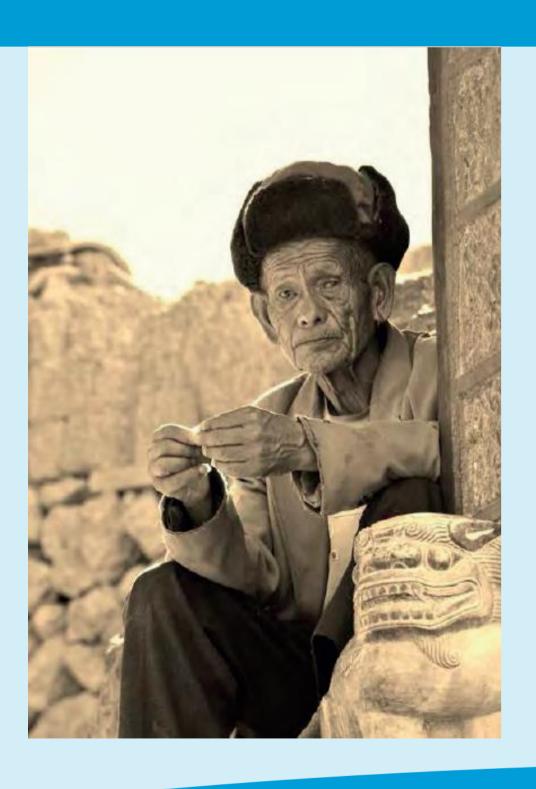
# Mental health and psychosocial aspects of the COVID-19 pandemic





#### Stress is common



## Psychosocial stressors and COVID-19

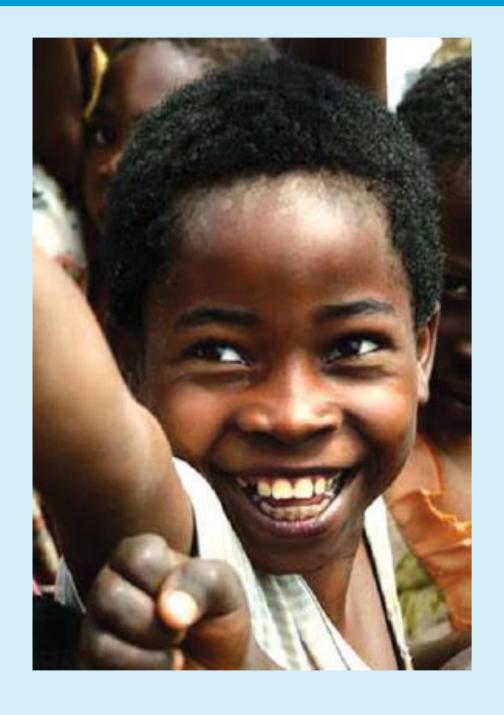
It is common and normal for individuals to feel stressed and worried in response to any disease outbreak.

Specific stressors particular to the COVID-19 pandemic are:

- Rumours and misinformation (social media)
- Closure of schools and children's activity spaces
- Travel restrictions
- Possibility of or actual physical isolation and quarantine
- Deterioration of trust in government agencies and social networks
- Avoidance of health facilities
- Risk of relapse in pre-existing health conditions (including mental health)
- Common symptoms of other health problems can lead to fear of infection.



#### Be kind to all people affected



# Social stigma

Discrimination towards persons who have been infected and their family members

Social stigma towards those treating and caring for patients

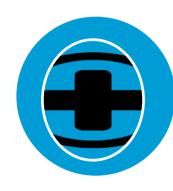
Social stigma towards specific ethnic groups, population groups or nationalities



#### Preparedness will improve and accelerate the response

#### **Overarching principles**

MHPSS should be considered a cross-cutting issue amongst all sectors and emergency pillars involved in the response



Addressing MHPSS considerations will be key to stopping transmission and preventing the risk of long-term repercussions on the population's well-being.



Hope, safety, empathy, social connectedness and self- and community efficacy should be embedded across every intervention.



Clear coordination mechanisms and integration of MHPSS technical expertise are critical.



Local actors need to be supported with both accurate knowledge and facts about COVID-19 as well as MHPSS skills.



MHPSS responses must be grounded in the context, to evolve and adapt to the needs of each population over the course of the outbreak.



People with mental health, substance abuse or psychosocial disabilities need continued/uninterrupted access to care and support during the outbreak.



# Recommended activities (a)



**Ensure inter-sectoral** referral pathways

Provide MHPSS to people in isolation and support people in quarantine



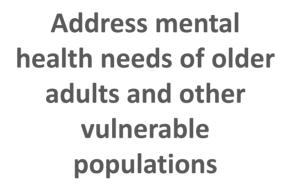
Orient responders in psychosocial aspects of COVID-19 response

Distribute timely factual information in accessible formats

Protect the mental health of all responders and ensure that they are able to access mental health and psychosocial care



# Recommended activities (b)



Establish opportunities for the bereaved to mourn



Address mental health and basic needs of people with pre-existing mental health conditions who are affected by COVID-19

Address stigma by providing positive messages

Integrate response activities into existing services







- 1. People who are affected by COVID-19 have not done anything wrong, and they deserve our support, compassion and kindness.
- 2. To reduce stigma, do not label people as COVID-19 patients, to ensure that they are not defined by COVID-19.
- 3. The sudden and near-constant stream of news reports about an outbreak can cause anyone to feel worried. Get the facts, not rumours and misinformation. Gather information at regular intervals, from the <a href="https://www.website">WHO website</a> and local health authorities' platforms, in order to help you distinguish facts from rumours. Facts can help to minimize fears.
- 4. Protect yourself and be supportive of others. Assisting others in their time of need can benefit the helper as well as the person receiving the support.
- 5. COVID-19 has affected, and is likely to affect, people from many countries and in many geographical locations. Do not attach a label of COVID-19 to any ethnicity or nationality. Be empathetic to all those who are affected, in and from any country.





- 1. Children feel relieved if they can express and communicate their feelings in a safe and supportive environment.
- 2. Keep children close to their parents and family, if it is 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.
- 3. 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.





## Messages to healthcare workers

- 1. Managing your mental health and psychosocial well-being during this time is as important as managing your physical health.
- 2. 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 well-being.
- 3. Turn to your colleagues, your manager or other trusted persons for social support your colleagues may be having similar experiences to you.
- 4. Use understandable ways to share messages with patients with intellectual, cognitive and psychosocial disabilities.





### Messages to older adults and their carers

- 1. Provide practical and emotional support through informal networks (families and peers) and health professionals.
- 2. Share simple facts about what is going on and give clear information about how to reduce the risk of infection in words that 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.
- 3. Be prepared and know in advance where and how to get practical help if needed, such as calling a taxi, having food delivered and requesting medical care.
- 4. Keep regular contact with loved ones (e.g. via phone or other means).







- 1. Keeping all staff protected from chronic stress and poor mental health during this response means that they will have better capacity to fulfil their roles.
- 2. Ensure that good-quality communication and accurate information updates are provided to all staff. Rotate workers from higher-stress to lower-stress functions. Implement flexible schedules for workers who are directly impacted or who have a family member impacted by a stressful event. Ensure that you build in time for colleagues to provide social support to each other.
- 3. Facilitate access to and ensure that staff are aware of where they can access mental health and psychosocial support services.





## Messages to people in isolation or quarantine

- 1. Try as much as possible to keep to your personal daily routines or create new ones. Engage in healthy activities that you enjoy and find relaxing. Exercise regularly, maintain regular sleep routines and eat healthy food. Keep things in perspective and use IT to connect with loved ones.
- 2. If health authorities have recommended limiting your physical contact to contain the outbreak, you can still stay socially connected via e-mail, social media, video conferencing and telephone.



#### Resources

IASC Interim
Briefing Note
on MHPSS
Aspects of
COVID-19

WHO MHPSS
Considerations
During
COVID-19

Infographics: 1, 2

Addressing
Social Stigma





#### THANK YOU

Please contact IASC MHPSS RG Co-Chairs for translations and other resources <a href="mailto:mhpss.refgroup@gmail.com">mhpss.refgroup@gmail.com</a>

