



# Public mental health during the COVID-19 pandemic: challenges and game plan

Sir,

The ongoing coronavirus disease 2019 (COVID-19) pandemic has caused an unprecedented impact on multifarious domains, including socio-political, healthcare, economic, religious, and various others. Along by, psychological issues such as acute stress, anxiety, and depression have affected the public. With the unfolding of the crisis, we would further witness a change in the way life is looked at and how technology is utilised. This has forced us to redefine priorities, so as to prepare for the current effects, and the aftermath of the crisis. Public mental health which is “the art and science of improving mental health and wellbeing and preventing mental illness through the organised efforts and informed choices of society, organisations, public and private, communities and individuals” has become the need of the hour.[1]

Facing the first major pandemic, our generation is experiencing an escalation in mental health problems with the disruption of normal aspects of life. There is not only a diffused distress that all are experiencing, but, also, there are special groups such as the frontline healthcare workers, people at quarantine/isolation, people who have tested COVID positive and those vulnerable to psychological issues who are facing unique stress at this time. People have developed high levels of fear, anxiety, and uncertainty in response to this health threat that is invisible to the naked eye. “Stigma” faced by persons suffering from mental health issues along with the “stigma” related to the pandemic has been a concern for affected individuals.[2] Change in normal routines, adopting to physical distancing, new norms of wearing a mask, practices of hand washing/sanitisation, and maintaining cough/sneeze etiquette have caused worries due to unfamiliarity to these. Adding to these, is the “infodemic” during the pandemic. People are showered with excessive information, and also, misinformation, rumours, gossips, and conspiracy theories. Attempts to fight the COVID-19 pandemic has been disrupted by such “infodemic” and a “collective perceptual bias” further leading to rise in uncertainty, fear, prejudice, disgust, and xenophobia.[3] As we prepare ourselves to face the pandemic and its aftermath, by focusing on research regarding viral transmission and interrupting it, we also need to pay attention to the public mental health dimension. The emergence of psychological issues due to the pandemic such as acute stress, anxiety, depression has brought challenge to the framing of strategies from a public health perspective.[4] Amalgamation of public health and mental health would certainly help in diversion from the harsh routes the pandemic could take. Public health authorities and mental health professionals need to work in liaison with each other to address issues, plan,

respond, and mitigate the mental health burden consequent to the pandemic and in its aftermath.[5]

## **PUBLIC MENTAL HEALTH ISSUES: PREVENTION AND MITIGATION STRATEGIES**

Adequate social support for the general population with regard to at risk populations (e.g. infected patients, quarantined individuals, medical professionals, unemployed, etc.) should be provided by offering targeted, tailored messages as per the most reliable scientific evidence. Relevantly, a variety of mental health supporting strategies are required in order to facilitate lifestyle changes and re-adaptation activities.

Public mental health interventions comprise of “mental disorder prevention” and “mental wellbeing promotion”. “Mental disorder prevention” can be at primary level (addressing risk factors, providing adequate information/risk, and crisis communication), secondary level (early/timely intervention for mental disorders), and tertiary level (interventions for those with mental disorder to prevent enduring ramifications and disability while on treatment). “Mental wellbeing promotion” involves “first increasing the value that individuals and societies give to mental health and wellbeing, and then implementing interventions to enhance mental wellbeing in different situations. Interventions to enhance mental wellbeing can occur across the life course”. It includes interventions from parental levels, childhood, pre-school and school period, during normal course of life, work till ageing.[6] To play down the feelings of fear and uncertainty, health education needs to be provided using online platforms, and the social fear related to COVID-19 needs to be adequately addressed while stigma and discrimination need to be recognised as major challenges. Hospital protocols linked to the early and effective management of health emergency need to be implemented while healthcare professionals need to be supplied with adequate protective gear. Unmet needs should be rapidly identified by medical staff who need to communicate effectively and promptly with patients to help them understand emerging psychological issues or worsening of a pre-existing psychological distress.

Furthermore, helplines numbers, internet-based platforms such as social networking sites, dedicated blogs, and mental health forums should be utilised in order to reduce social isolation and loneliness, particularly for those away from their near and dear ones. Marginalised populations such as elderly individuals, children, persons facing domestic violence, and those with psychological problems should be able to actively consult with mental health professionals to

**Table 1: Public mental health strategies at various levels[6,8,9]**

Levels of public mental health intervention	Strategies
Individual level	<ul style="list-style-type: none"> <li>• Addressing and educating individuals about risk factors which may be worsened by the pandemic (financial loss, unemployment, insecurity related to essential commodities, incidences of domestic violence), worry about older family members and children, social isolation, quarantine- related issues, health-risk behaviour, stigma and discrimination, and socioeconomic disparities</li> <li>• Early intervention upon onset of mental health issues</li> <li>• To address stress and mental health issues- Educating the individual that stress is likely to occur to many during this period, teaching relaxation techniques, support through telepsychiatry services</li> <li>• To address COVID-19 stigma- Talking positively about the disease, sharing stories of people who have recovered, breaking the confusion between physical distancing and social discrimination, communication about preventive measures</li> <li>• To address stigma-related to mental health issues- Learning and sharing the right facts, learning how not to judge or label, learning that mental health problems are illnesses like other physical illness</li> <li>• To address infodemic- Encouraging use of official websites/government published data/data from genuine scientific journals, correcting misconceptions, discouraging propagation of false information/news</li> <li>• Support via telepsychiatry and digital platforms</li> </ul>
Organisational level	<ul style="list-style-type: none"> <li>• Identification and addressing work-related risk factors/organisational risk factors during the pandemic</li> <li>• Promotion of positive mental health by encouraging positive aspects of work and strengths of employees</li> <li>• Addressing individual level risk factors and mental health issues (as mentioned in “individual level”)</li> <li>• To address COVID-19 stigma- Group meetings on digital platforms by the organisation management, positive discussion about the disease, sharing stories of people who have recovered, breaking the confusion between physical distancing and social discrimination, communication about preventive measures</li> <li>• To address stigma-related to mental health issues- Learning together and sharing the right facts with colleagues and friends, learning how not to judge or label, learning that mental health problems are illnesses like other physical illness, holding online webinars with experts</li> <li>• To address infodemic- Sharing information posters/pamphlets which are genuine and recognised by government authorities, group meetings to encouraging use of official websites/government published data/data from genuine scientific journals, correcting misconceptions, discouraging propagation of false information/news</li> <li>• To address stress and mental health issues- Holding group meetings to educate all working members that stress is likely to occur to many during this period, teaching relaxation techniques, support through telepsychiatry services</li> </ul>
State and policy level	<ul style="list-style-type: none"> <li>• Widespread public awareness through radio, televisions, digital platforms, and newspapers regarding COVID-19 risk factors and psychological issues</li> <li>• Awareness focusing on the stigma related to COVID-19, stigma related to mental health issues, misconceptions and myths, and provide details on whom to contact when experiencing stress or mental health issues</li> <li>• Making strict norms on maintenance of physical distancing, wearing of facemasks, hand sanitisation, temperature screening, hospital crowd minimisation, construction of ample isolation wards</li> <li>• Framing appropriate guidelines to deal with the crisis and in post-crisis era</li> <li>• Provision of emergency crisis interventions with the support of government health authorities and other organisations</li> <li>• Incorporation of crisis intervention into the scheme of prevention and control</li> <li>• Focusing on high risk and vulnerable population</li> <li>• Special support to daily wage workers and immigrant workers</li> <li>• Establishment of more helplines and control rooms</li> <li>• Training mental health professionals to gear up for the crisis and its aftermath</li> <li>• Alcohol and substance policies- Ensure adequate substance use treatment centres, community outreach using telepsychiatry in this special scenario</li> <li>• Ensuring uninterrupted management of mental health disorders with community level care or remote care delivery (telepsychiatry services) with the support of community outreach programmes such as the District Mental Health Programme</li> <li>• Ensuring sufficient supply of medical provisions including psychotropic medications</li> </ul>

rapidly detect warning signs. Finally, telepsychiatry should be actively used, especially in areas where mental health services are poorly represented or severely impaired by the rapid spread of pandemic and lockdown restrictions. It is important that mental health professionals identify symptoms of acute psychological crisis,[4] and monitor for adverse drug reactions during management of patients using telepsychiatry. Experiences of utilisation of services of telecounselling by those in distress in the recent times show a promising role of such services now and in the future.[7] Recommendations for public mental health strategies at individual, organisational, and state/policy levels are presented in Table 1.

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