The changing landscape of global mental health: COVID-19 AND ITS IMPACT
Adversity is a risk factor for short-term and long-term mental health problems.

COVID-19 pandemic is causing widespread anxiety, panic, feeling of helplessness and uncertainty.

Pre-existing mental, neurological and substance use disorders exacerbated by covid-19

Stigma

Less access to social support systems

Difficult grieving process when losing close relative during COVID-19 pandemic

Isolation

Many countries have limited community MNS Services
MHPSS is recognized by countries as an integral component of their COVID-19 response

89% reported MHPSS as part of their national COVID-19 response plans.

2/3rd of the countries have a multisectoral MHPSS coordination platform for COVID-19 response engaging health, social, education, NGOs and other stakeholders.

Only 17% of these countries have ensured full additional funding for MHPSS covering all activities.
Situation of mental, neurological and substance use services during the COVID-19 Pandemic

- 93% of countries reported disruptions in one or more of their services for MNS disorders
- Nearly 3/4 reported at least partial disruptions to school and workplace mental health services
- 60% of all psychotherapy and counselling services were partially disrupted
- More than 50% of countries had their overdose prevention and management programmes and critical harm reduction services disrupted
Mental Health identified as a priority during COVID-19 response

“Inclusion of mental health and psychosocial support as integral and cross-cutting component in public health emergency responses.”

Mental health is a priority

Policy Brief: COVID-19 and the Need for Action on Mental Health

Global Humanitarian Response Plan COVID-19

UNECL
UNICEF
UNHCR
IOM

UNSG

Maintaining essential health services: operational guidance for the COVID-19 context

United Nations

11 June 2020
Resources for clinical providers

104 case studies received from 40 countries from all WHO regions

Stories from the field: Providing mental health and psychosocial support during the COVID-19 pandemic

MHIN and the World Health Organization Department of Mental Health and Substance Use are collaborating to highlight the incredible efforts of individuals and organisations providing mental health and psychosocial support during the COVID-19 pandemic.

The stories below share innovation and best practice through personal narratives from health care workers around the world.

Mental Health and COVID-19
Resources by Population Group
Cross-cutting Resources
Webinar Series

Staff support during COVID-19:
MHPPS initiatives from Miri General Hospital, Malaysia

Luchando contra el COVID-19:
Mental health support for migrants in Trinidad and Tobago

Technology as an ally and barrier: Supporting older adults in Ecuador and Spain during COVID-19

Dr. Raja Loke Adam, psychiatrist and MHPPS Team Leader at Miri General Hospital in Malaysia.

Dr. Margaret Naikhid-Chatterjee, Immediate Past President of the Trinidad and Tobago Association of Psychologists.

Andrea Alvarado, Clinical Psychologist from Ecuador specialising in working with the elderly.

"Stories from the field"
IASC Interim Guidance

Interim Briefing Note
ADDRESSING MENTAL HEALTH AND PSYCHOSOCIAL ASPECTS OF COVID-19 OUTBREAK
Version 1.5
February 2020
IASC Reference Group on Mental Health and Psychosocial Support in Emergency Settings

Basic Psychosocial Skills: A Guide for COVID-19 responders

Operational considerations for multisectoral mental health and psychosocial support programmes during the COVID-19 pandemic
COVID-19 and substance use and addictive behaviours

People with substance use disorders are at higher risk of acquiring COVID-19 and having worse outcomes (death, hospitalization, overdose, etc.)

Currently wide range of data from different countries on changes in levels and patterns of psychoactive substance use during COVID-19 pandemic

Preliminary data suggests increased levels of online gaming and online gambling during lockdown and confinement.

Disruption of services for people with substance use disorders and their coordination, especially long-term care, psychosocial support, recovery management

Changes and adjustments in policy responses (alcohol policies and treatment policies)

(Wang et al., 2020; Volkov, 2020; Sun et al. 2020)
Neurological conditions are the second most common comorbidities in people with COVID-19.

Dementia and other chronic neurological disorders associated with a significantly increased risk of mortality.

WHO has established the Neurology and COVID-19 Global Forum in June 2020
Recommended actions to countries
Three priority actions

1. Allocate
   - resources to implement MHPSS as an integral component of COVID-19 response and recovery plans

2. Maintain
   - essential MNS services in-line with WHO recommended adaptations for safe delivery and considerations towards the restoration of services

3. Strengthen
   - monitoring of changes in service availability, delivery and utilization at the country level