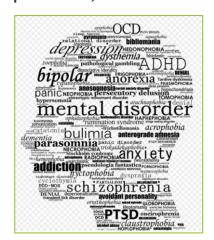
Mental Health in the COVID-19 Pandemic

M. Jordanova, MD, PhD, Space Research & Technology Institute, Bulgarian Academy of Sciences, Bulgaria, mjordan@bas.bg

T. Uzunov, MD, Asklepios Clinic for Mental Health, Clinic for Psychiatry, Psychotherapy and Psychosomatics, Academic Teaching Hospital of the Goethe University Frankfurt am Main, Langen, Germany, to.uzunov@asklepios.com

What is Mental Health?

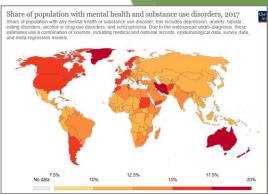
- A state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community.
- The positive dimension of mental health is stressed in WHO's definition of health: "Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity."
- Mental (health) disorders include common conditions such as depression and anxiety, those due to abuse of alcohol and other substances, and also severe and disabling disorders such as schizophrenia, dementia and bipolar disorder.

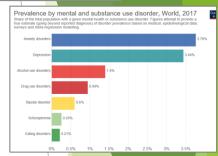


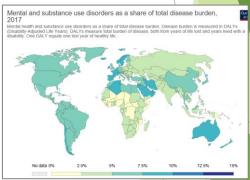


Facts

- ▶ 1-in-7 people (15%) have one or more mental or substance use disorders
- Mental and substance use disorders account for ~5% of global disease burden in 2017, but this reaches up to 10% in several countries
- ~1 in 5 children and adolescents have a mental disorder. Mental health problems in children and adolescents are of concern because of their high prevalence and the accompanying disabilities
- About half of the mental disorders begging before the age of 14
- Depression is one of the leading cause of disability, affecting >264 million people. The global economy loses ~ 1 trillion US\$ per year in productivity due to depression and anxiety
- Suicide is an extreme but not uncommon outcome for people with untreated mental disorders. 800 000 die due to suicide every year (approximately 1 person every 40 sec)
- People with severe mental disorders die 10 to 20 years earlier that the general population
- Financing: <2% of the global median of the health budget
- ► Human resources: 9 mental health workers per 100 000. Rates vary from 2 per 100 000 population in low income countries to >70 per 100 000 population in high income countries



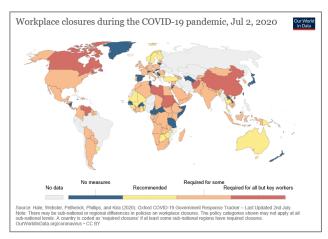




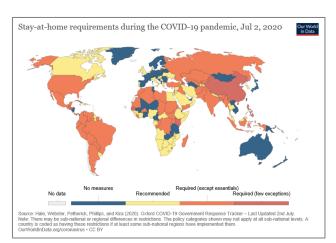
(2019, https://www.who.int/ment; Ritchie H.; Roser M. 2018, Mental Health, Published online at OurWorldInData.org, https://www.who.int/mentatt/en/) ; WHO

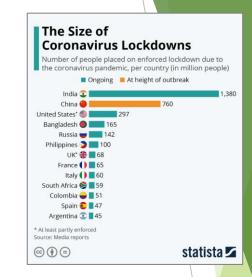
COVID-19 Pandemic

- As per 2 July 2020 globally 10 514 028 confirmed cases of COVID-19, including 512 311 deaths (https://covid19.who.int/)
- New rules worldwide social distance and isolation, working from home, temporary unemployment, schools closed, lack of physical contact with other family members, friends and colleagues ...
- The above is combined with an uncertainty of when and how to control the disease, the seriousness of the risk, increasing fear about once personal health and of the health of his/her beloved, loss of community and religious contacts, panic of job loss and financial difficulties, social and media influences ...

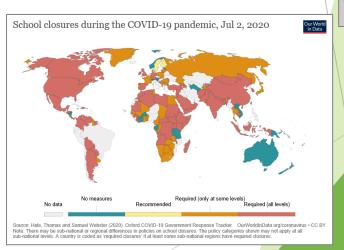


https://ourworldindata.org/policy-responses-covid





(1.4 billion) live in countries with a full or partial lockdown due to COVID-19. UNICEE



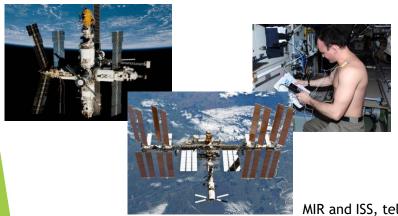
COVID-19 Impact on Mental Health

- Mental health problems are observed all over the world, including anxiety, panic buying and paranoia about attending community events, changes in the sleep or eating patterns; difficulty in concentration; worsening of chronic health problems, including mental health conditions; increased use of alcohol, tobacco, drugs, pandemic-related suicides, etc.
- General population
 - Cross-sectional, self-report surveys from January April 2020 clinically significant psychiatric symptoms 36% of adults, India reports 20% increase of mental illnesses (http://www.rfi.fr/en/international/20200514-mental-illness-suicides-on-the-rise-in-india-during-covid-19-lockdown)
 - ▶ Psychological distress (e.g., depression, hopelessness, and nervousness) in 12 to 36% of adults;
 - Children China, students 2-6 grades, quarantined at home for an average of 34 days cross-sectional, online, self-report survey in February and March 2020. Anxiety and depressive symptoms 20%
- Patients with pre-existing mental health problems
 - ► China, n>1400 deterioration related to the pandemic 21%; + anxiety, depression, and insomnia ...
- Patients with COVID-19
 - ▶ 60 studies, N >2500 cases insomnia 42%; impaired attention or concentration 38%; anxiety 36%; memory impairment 34%; depressed mood 33%
- Health care workers
 - Self-report, front-line (China & Italy, N=2500) anxiety 12 to 20%; depression 15 to 25%; insomnia 8%; traumatic distress 35 to 49%;

(Stein M. Coronavirus disease 2019 (COVID-19): Psychiatric illness, https://www.uptodate.com/contents/coronavirus-disease-2019-covid-19-psychiatric-illness)

ICT for Mental Health

- The utilization of information and communication technologies (ICT) for remote mental health support is inevitable part of eHealth
- ► Tele-mental health counselling and therapy offer help to those who need it, no matter where they are and at what time of the day or night this happens
- It has proven its potential supporting participants of Arctic expeditions and space missions both at the Mir space station and in the International Space Station (ISS) as well as during ground-based psychosocial isolation experiments as MARS-500 and Moon experiments



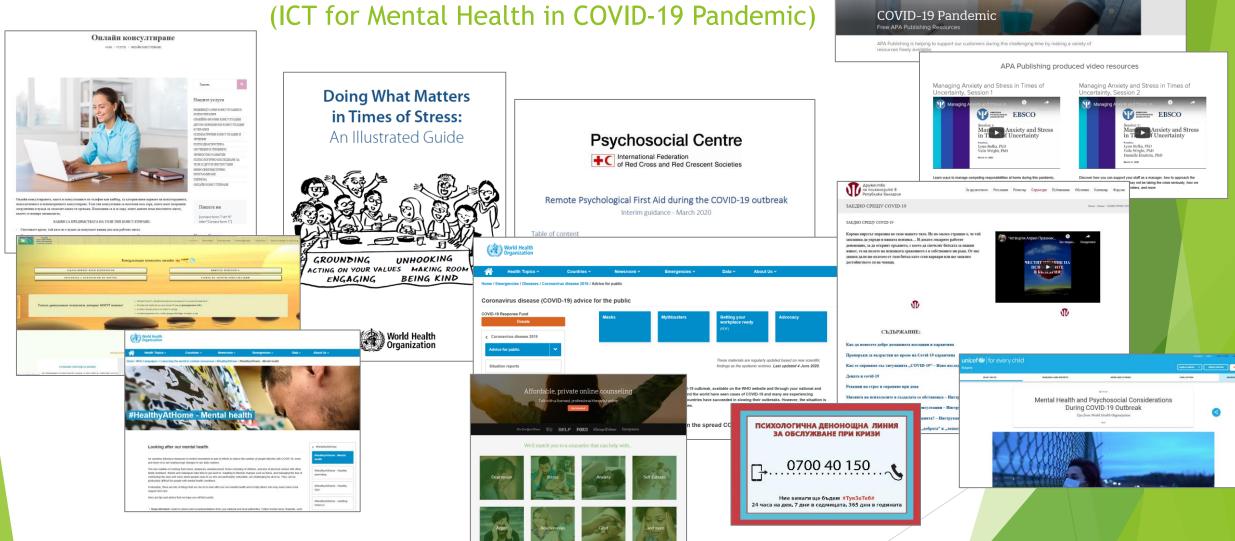






MIR and ISS, telemedicine monitoring within frameworks of the Mars-500 and Moon-2015 projects and telemedicine consultations of expeditions Antarctic - Sankt Petersburg, Russia

Mental Health Support

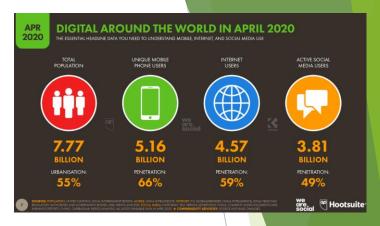


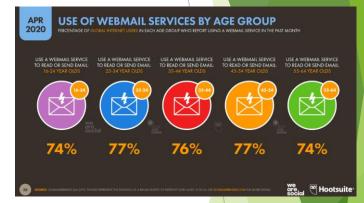


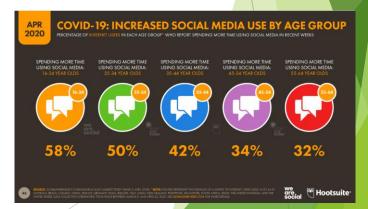
Lessons Learned

- The technology is available and working!
- Mental health workers proved their readiness to react and support the community during the pandemic:
 - ▶ Clinics
 - Psychiatry clinics adapt to the new reality and followed their chronic patients from a distance, adjusting the medications and offering consultations patients and families, if and when needed, yet
 - ► Hospital staff is not able to offer help to all chronic patients, family members, new cases ...
 - ▶ The focus still remains on patients, not on prevention
 - Online support offered
 - Educational materials were distributed
 - ...

https://wearesocial.com/blog/2020/04/digital-around-the-world-in-april-2020

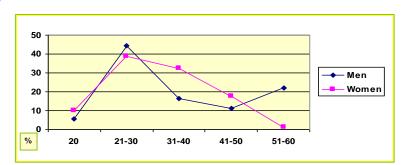


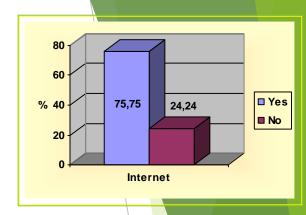


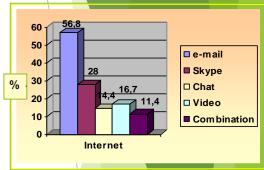


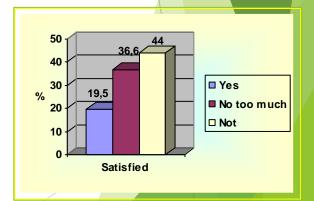
Challenges

- ► The need for mental health care will increase & number mental health workers will not be sufficient
- Develop and promote virtual mental health support widely
- Virtual psychology and psychiatric counselling usually are not covered by insurance policies
- Solve problems with:
 - ▶ Regulations local and cross-boarder
 - Ethics (who has the right to offer virtual mental health support)
 - Standardization and quality of care
 - Limitations of virtual care not a substitute of f2f contact; written spoken language; transfer of expectations & false perceptions ...
 - ► The boundary between charity and business
 - Social stigma
 - Cultural differences
 - ..



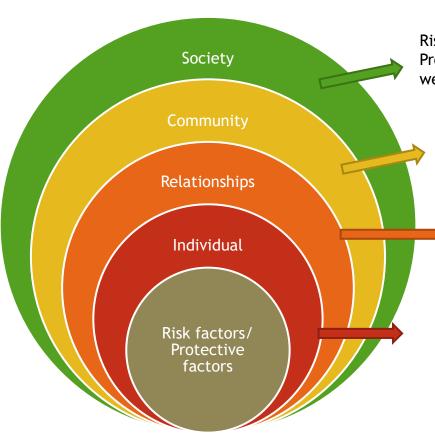






What Next? Suicide Prevention (During and After the COVID-19 Pandemic)





Risk: Barriers to accessing healthcare; access to suicidal means, stigma - help seeking Protect: Effective mental health care; legislations concerning economy, social inequalities; welfare measures, healthcare accessibility

Risk: Stress, discrimination, isolation

Protect: Social integration, prevention, and recreational programs

Risk: Loneliness, loss, relationship conflict, trauma, abuse

Protect: Strong personal relationships

Risk: Mental disorders, use of alcohol, drugs, financial & job loss, chronic diseases Protect: Life skills and practice (problem solving, positive coping, ability to adapt); religion or spiritual belief, food and diet, physical activity

Annual global age-standardized suicide rate - 10.5 per 100 000.

The major differences between high-income countries and low- and middle-income countries (LMICs) are that young adults and elderly women in LMICs have much higher suicide rates than their counterparts in high-income countries, while middle-aged men in high-income countries have much higher suicide rates than middle-aged men in LMICs

https://3ba346de-fde6-473f-b1da-536498661f9c.filesusr.com/ugd/e172f3_75d7208c34a84dfc8da1a7cf125fb81b.pdf

Next?



- Raising the awareness of healthcare professionals, decision-makers, donors, providing references to good practice models, treatment protocols etc.
- Distributing information (what, where, how), recommendations and urging ITU members to mobilize all resources, to add tele-mental health and extend the application of ICT for tele-mental health support of:
 - Patients, diagnosed with mental health disorders as well as their family members. Focusing on prophylaxis and prevention;
 - Healthy citizens and health service providers;
 - Vulnerable groups of the society teenagers; citizens living alone, elderly, etc.;
 - Application of ICT in mental health area as an educational tool, increasing the qualification of the staff and educating citizens.
- ► Trough its members ITU and Q2/2 may demonstrate that cultural diversity must be taken into consideration when mental health support is considered
- Last but not least based on experience from previous Study Periods, Q2/2 may explain the necessity of a balance between charity & business in the application of tele-mental health services.

Thank you!