

IIMHL & IIDL Leadership Briefing XXXI

National Perspectives from the UK, Canada and the US: Policy imperatives for mental health

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Introduction

The following three documents are examples of what the medium to longer term effects of COVID-19 might be and how nations might ameliorate them.

We hope IIMHL and IIDL leaders will find these reports helpful.

UK

The Lancet: Mental health before and during the COVID-19 pandemic: a longitudinal probability sample survey of the UK population 21st July 2020

The potential impact of the COVID-19 pandemic on population mental health is of increasing global concern. We examine changes in adult mental health in the UK population before and during the lockdown.

This study identifies groups in the population that had a high prevalence of psychological distress before the pandemic. As the economic consequences of lockdown develop, when furloughs turn to redundancies, mortgage holidays expire, and recession takes effect, we believe it is reasonable to expect not only sustained distress and clinically significant deterioration in mental health for some people, but emergence of well described long-term effects of economic recession on mental health including increasing suicide rates and hospital admissions for mental illness.

Women, young people, and those with preschool aged children are experiencing the greatest increase in mental distress. This supports results of previous reports of high prevalence of common mental disorder and self-harm in girls and women aged 16–24 years; while Marmot made a pressing case for tackling health inequalities for women in poverty. The COVID-19 pandemic has produced many new challenges for health research, policy, and service provision.

The problems for mental health from COVID-19 and governmental responses to the pandemic are not necessarily new; instead, pre-existing mental health inequalities could become more entrenched and tackling them might be even more challenging. The pandemic has brought people's differing life circumstances into stark contrast: access to outside and inside space, household crowding, lack of school provision and childcare, food insecurity, domestic violence, addiction, access to internet and

maintenance of social connectivity, as well as economic reserves are all relevant to mental health.

An appropriate, proportionate response to mitigate and manage additional needs requires more high-quality information to be included in public health messaging about mental health during the pandemic, alongside adequately resourced services.

[https://www.thelancet.com/journals/lanpsy/article/PIIS2215-0366\(20\)30308-4/fulltext?dgcid=raven_jbs_etoc_email](https://www.thelancet.com/journals/lanpsy/article/PIIS2215-0366(20)30308-4/fulltext?dgcid=raven_jbs_etoc_email)

Canada

Mental Health Commission of Canada: COVID-19 and mental health: Policy responses and emerging issues

2020

The lessons learned to date from COVID-19, and from earlier disasters and epidemics, suggest that planning and reforms are needed to stay ahead of mental health impacts that will be long term, complex, and may take time to fully emerge.

This preliminary scan offers an overview of developing issues for policy makers and the mental health sector to consider. Over the coming months, the Mental Health Commission of Canada (MHCC) will work with its key partners to provide additional policy advice in response to COVID-19, in keeping with its mission to support the mental health of people in Canada.

Conducted between March 28 and April 14, 2020, this scan set out to identify policy considerations and emerging issues amid the first wave of COVID-19, with a focus on the unmet and anticipated needs of vulnerable populations, health-care providers, and the mental health system. The scan concentrated on the impacts we might expect to see on population mental health over the medium term as well as on existing pressure points in the mental health system.

Key messages

The incredible response is leaving some people behind.

A tremendously rapid and innovative response has been mounted to meet the needs of the general population by disseminating wellness information and quickly pivoting to virtual services and supports. But these offerings are not meeting the needs of some key vulnerable populations.

An opportunity exists to prepare and transform the system.

The most significant impacts on mental health, substance use, and service systems are likely to be felt in the aftermath of the pandemic. Planning should begin now, including meaningful engagement with service users, so that the postpandemic system incorporates innovations (e.g., in the area of virtual service provision) while not abandoning the transformations underway before COVID-19.

Focusing on health and mental health care providers is key.

Supporting and building on the mental health supports offered to front-line health-care providers and identifying the mental health requirements of mental health professionals are key to meeting their needs during and after the crisis. Focused attention on workforce planning for the post-pandemic period is also necessary to better align workforce capacity (public and private sector) with the mental health needs of the population. Synthesis reports for each component of the scan are available on request.

The mental health impacts are delayed, complex, and long term.

The lessons learned internationally from COVID-19, and from earlier disasters and epidemics, suggest that planning and reforms are important for staying ahead of mental health impacts that will be long term, complex, and may take time to fully emerge.

Fostering resiliency is important.

Anticipating the increased prevalence of mental health problems and illnesses due to COVID-19 must be balanced against the risk of pathologizing normal emotional responses to an unprecedented and highly stressful situation. Mental health services and interventions that support meaning-making and post-traumatic growth and resilience will need to be available early on to buffer and protect the psychological health of people in Canada.

https://www.mentalhealthcommission.ca/sites/default/files/2020-06/COVID_19_policy_responses_emerging_issues_eng.pdf

US

Psychiatry Online: The Behavioral Health System and Its Response to COVID-19: A Snapshot Perspective

12th August 2020

The global experience of the COVID-19 pandemic is unprecedented. The magnitude, pace, and uncertainty of the pandemic have taxed systems and catalyzed innovation in many fields, including behavioral health.

Behavioral health leaders have absorbed changing information about regulations and laws, proper use of personal protective equipment, isolation and quarantine, telepsychiatry practices (broadly defined here as the use of virtual and telephonic means to provide behavioral health care), and financial opportunities and challenges while attending to the mental health needs of local populations.

This Open Forum reviews many of the adaptations of the behavioral health system in response to COVID-19 on the basis of a point-in-time snapshot and describes needed multidimensional policy and practice considerations for the future.

The article is a snapshot of :

- changes in state hospital operations

- the impact of the surge in the need for medical beds on psychiatric hospital beds
- the impact on crisis services, residential treatment services, and community treatment
- the interface with the criminal justice system
- the financial viability of community providers
- the administration of medications and medication-assisted treatment
- changes to communication and coordination
- the expansion of telehealth, telemedicine, and tele-psychiatry
- special populations
- the impact on health care workers, first responders, racial- ethnic minority populations, and those who have experienced losses of family or supports due to the pandemic and measures implemented to address the pandemic.
- experiences in the field and potential policy direction.

As the situation continues to unfold, additional solutions will be needed in the realm of policy, technical, and financial relief for populations of all types and at all ages, regardless of race or ethnicity. Such solutions will also need to be developed for individuals with behavioral health needs who also disproportionately face unique challenges related to issues such as child welfare, forensic or justice involvement, and homelessness.

Disaster preparedness for behavioral health has evolved to entail structure and planning, but the COVID-19 pandemic has exceeded the capacity of many behavioral health and other systems. The pandemic has created an expanded imperative to be nimble and responsive to growing demands, increasing stress, and rising numbers of deaths and individuals with illness.

Given the growing recognition of the emotional sequelae of disasters, especially after 9/11, behavioral health has had a considerable role in addressing unique aspects of disaster response.

<https://ps.psychiatryonline.org/doi/pdf/10.1176/appi.ps.202000264>