

## IIMHL & IIDL Leadership Briefing LIV

### COVID-19 and Mental Health and Wellbeing: National Plans for Action

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#### Introduction

Information from three countries about their plans for mental health and wellbeing is outlined below: The Ministry of Health in Aotearoa/New Zealand has updated its former Mental Wellbeing Plan to incorporate COVID-19 factors; The Scottish Government has made mental health and wellbeing a priority in the pandemic; and, the Netherlands has published research looking at the effects of the pandemic and ways that this country can be better prepared for the future.

#### Aotearoa/New Zealand

##### Ministry of Health: Kia Kaha, Kia Māia, Kia Ora Aotearoa: COVID-19 Psychosocial and Mental Wellbeing Plan December 2020

The mental wellbeing framework has a vision of: Pae ora (healthy futures): An equitable and thriving Aotearoa in which mental wellbeing is promoted and protected.

Pae ora is a holistic concept that includes the following interconnected elements:

- Mauri ora – healthy individuals: taha tinana (physical health), taha wairua (spiritual wellbeing) and taha hinengaro (mental wellbeing) are important interconnected elements of mauri ora. Protecting our mental wellbeing is essential for all of us, as is equitable access to effective mental wellbeing support when needed.
- Whānau ora – healthy families: whānau are integral to our wellbeing. We all need to belong, to share, to feel cared for, and to have close relationships. This can apply beyond blood-ties, for instance in rainbow communities, where whānau may be interpreted more widely than people with genealogical links.
- Wai ora – healthy environments: the communities and wider environments in which we live, learn, work and play need to be safe and support mental wellbeing. All people should be able to easily and equitably access social supports, including education, housing and income support.

This vision and its connected elements are consistent with Whakamaua: Māori Health Action Plan 2020–2025, which outlines an approach to achieving pae ora.

The path to ensuring wellbeing for Māori provides a platform for all people in Aotearoa New Zealand to live with good health and wellbeing. To realise the vision, the 12 to 18 month goal is ensuring people are able to build and sustain mental wellbeing so that they can adapt and thrive during the response to, and recovery from COVID-19.

**The infographic from this framework (on page 7) is available as Appendix 1.**

<https://www.health.govt.nz/system/files/documents/publications/kia-kaha-kia-maia-kia-ora-aotearoa-covid-19-psychosocial-mental-wellbeing-plan-21dec2020-v2.pdf>

## Scotland

**Scottish Government: Coronavirus (COVID-19): mental health - transition and recovery plan**  
2020

This plan outlines the Scottish Government's response to the mental health impacts of Covid-19. It addresses the challenges that the pandemic has had, and will continue to have, on the population's mental health.

As we learn to live with the pandemic, they have committed to continue to support good mental health and wellbeing, to help people manage their own mental health, and to build their emotional resilience. They want to ensure that people get the right support, at the right time, and in the right setting – this includes when mental illness does occur. They stress that they will support mental health recovery in a way that is personal to each individual's journey, and which focuses on their rights.

The plan restates the need to create and protect an environment which promotes the right to good mental health, and we will embed human rights, equality, dignity, and the voice of lived experience at the heart of our approach.

<https://www.gov.scot/publications/mental-health-scotlands-transition-recovery/>

## The Netherlands

**National Institute for Health and Environment: Ministry of Health Welfare and Sport - Mental Health: The Public Health Foresight Study**  
January 2021

The Public Health Foresight Study shows the effects of the corona crisis have a greater impact on vulnerable groups in society, such as lower-educated adults, young people, the elderly and people with underlying health problems. This not only concerns the direct, immediate consequences but also the indirect, future consequences.

The direct consequences of the coronavirus are huge, in the Netherlands and elsewhere. Mortality from COVID-19 will probably be in the top three causes of death

in 2020. The burden of disease is five times higher than with normal seasonal flu. Without the coronavirus measures that were implemented, the burden of disease from COVID-19 would have been even higher. It should be noted that the second wave of COVID-19 has not been incorporated into these figures yet. The indirect effects of COVID-19 are also significant: access to regular health care has (temporarily) been limited, lifestyles have changed, and social life has been impoverished as a result of coronavirus measures.

### **Better prepared for the future**

The results of this foresight study paint a picture of a society that has been hit hard at all levels by the coronavirus pandemic. Being better prepared for the future calls for:

- Greater commitment to integrated prevention.
- Consideration of chronic illnesses as well as infectious diseases.
- More insight into mental health.
- More intensive cross-domain cooperation

<https://www.rivm.nl/en/news/covid-19-consequences-impact-vulnerable-groups-more-in-long-term>

An infographic from Center for Global Health Inequalities Research (CHAIN) at the Norwegian University for Science and Technology (NTNU) shows emerging evidence suggests that COVID-19 is experienced unequally, with higher rates of infection and mortality among the most disadvantaged communities: it is not a socially neutral disease:

[https://eurohealthnet.eu/sites/eurohealthnet.eu/files/CHAIN\\_infographic%20\\_covid19\\_and\\_inequalities\\_final.pdf](https://eurohealthnet.eu/sites/eurohealthnet.eu/files/CHAIN_infographic%20_covid19_and_inequalities_final.pdf)

