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The mental health impact of COVID-19

As we come into the later part of 2020, COVID-19 continues to take lives and threaten health, aged care, and maternity systems around the world.[1] With the focus of attention on the direct impacts of the SARS-CoV-2 virus, it is the combined weight of the real and potential impairment of the capacity and resources of, especially, health and aged care sectors, – as well as the broader economic fallouts impelled by government-imposed restrictions that is fomenting a growing crisis for the less conspicuous issue of poor mental health and wellbeing.

Mental ill health is a serious and growing issue in many countries. Prior to the pandemic, understanding of the size and severity of the burden of mental ill health on individuals, communities, and workforces was beginning to take form. Now, more than ever, we must turn our attention not away from COVID-19, but toward how the conglomerate of challenges the pandemic has emphasised can be addressed with targeted policy, practice, and research. COVID-19 is unlikely to disappear any time soon, but even more durable than the virus itself will be the ongoing impacts on, and because of, the mental health and wellbeing of those most affected by the pandemic. This means that there is also the opportunity to make meaningful and sustainable changes to the way things like mental ill health are addressed.

Our nurse, midwife, and care worker colleagues as well as those from other professions and disciplines are still striving to care for their patients, mothers, babies, and older residents and clients in some of the most demanding contexts while also trying to keep themselves and their own loved ones safe at home. In many cases, workers have not been able to go home – either by choice or necessity – due to fears that they may infect vulnerable family members. Some nurses caring for people with COVID-19 have faced stigma, abuse, and aggression from anxious and frightened members of the public – even their own families – likely fanned by the media's sensationalist and morbid coverage of cases where workers at the frontlines have been exposed to infection, sometimes due to inadequate organisational policies and practices, and lack of access to sufficient personal protective equipment (PPE) and resources.[2] Emerging reports tell us of the serious emotional and psychological impact that working in health, maternity, and aged care is having on our workforces.[2] Not only is going to work dangerous and terrifying, but for those who are removed from the workforce due to potential exposure or infection, insecure work and lack of organisational and government support means that

not going to work might be just as stressful due to a reduced income and low future job prospects. Indeed, in some places almost entire workforces have been sent home to self-isolate due to possible exposure. Many workers may also leave their jobs permanently due to stress and burnout caused or augmented by COVID-19 – which would be disastrous especially in contexts with already insufficient nursing workforces such as aged care. It is clear that the emotional and psychological burdens of working during the COVID-19 pandemic are incredibly taxing on our health, maternity, and aged care systems and workforces and that there is a current and ongoing need for effective mental health supports and services to ensure the safety, wellbeing, and sustainability of these essential groups.[3,4]

For staff working in mental health and dementia care fields, COVID-19 has brought with it new and challenging issues. A recent World Health Organization survey has highlighted that treatment for mental health disorders has been disrupted in 61 percent of 105 countries.[1]

Working safely and appropriately with patients with dementia and serious mental health presentations such as schizophrenia while wearing PPE such as a mask or face covering can be extremely challenging as it can cause great distress and fear.[5] Further, for people experiencing chronic, persistent, and severe mental ill health physical and social distancing measures, disinfection and decontamination practices, and engaging in safe interventions in response to violent and aggressive behaviours are all complicated.[6] Severe mental ill health and dementia and the need to adequately care for those who experience them have typically been pushed to the side of policy agendas for many years, and the damage the pandemic could do in this sector has likely not been well quantified or prepared for. People with severe or ongoing mental ill health and dementia are often some of the most vulnerable members of society, come from marginalised groups, and are disproportionately impacted by additional and associated challenges in terms of physical health, housing, social inclusion, and employment.[7] People with dementia and those who experienced pre-existing mental ill health and those that work closely with them are clearly a special needs group that requires considerable attention during and following the pandemic to ensure that the gaps between their health and wellbeing status and outcomes and the broader community do not widen further.[8,9]

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Beyond the health, aged care, and maternity workforce itself and those with pre-existing dementia or mental ill health, the wider community is also facing an almost unprecedented trial in terms of maintaining mental health and wellbeing.[10] While many parts of Australia and the world have moved well along with the relaxation of the government restrictions put in place in an effort to reduce community transmission and the burden on already stretched health systems, some localities such as Victoria Australia remain under heavy lockdown with strict laws governing leaving the house, socialising with people from other households, and what businesses can be open. When these restrictions drag from weeks to months, many people even those who would have felt mentally and emotionally resilient at the outset can begin to struggle with isolation and disconnection from both family and friends as well as their communities.[11] While some people have been able to transition relatively easily to working from home, many others have simply lost their jobs completely and face the stress of potentially not having one to return to. The stress and damage COVID-19 has done include skyrocketing depression and anxiety,[12] domestic violence,[13] substance use,[14] and suicide.[15] There will be a need for drastic and sustained action to ensure that the mental health impact on the community is addressed now and in the future. This is going to take actions not only within health and aged care but across government portfolios from housing, employment, social services, industry, and the environment – because let us not forget about the mental health impact of climate change and the environmental disasters that it has led to most recently. Indeed, it could be argued that COVID-19 mental health and emotional difficulties are happening within the context of continuing climate change and environmental disasters resulting in cumulative negative impacts. In this way, COVID-19 is taxing peoples' resilience and coping within a pre-existing context of cascading disasters and is becoming a tipping point that manifests in mental ill health.

This year, 2020, has brought with it many unprecedented tests and sadly claimed many lives. Many sectors and communities have been stretched to their limits responding to a virus without a cure. Some have been led by governments that provide little in the way of useful leadership or sometimes even factual information or accountability, and many face significant collective and personal challenges on top of already less than adequate access to equitable care and support. Mental health is and will be a pressing issue for a vast number of people across many segments of society and addressing it will take action and cooperation across many contexts and between diverse groups. Now more than ever we need to work collaboratively to help one another – especially our most vulnerable community members who often lack the voice, resources, and platforms to help themselves.

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