



Mental health in the midst of COVID-19

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EHMA and COVID-19

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Overview

OVERVIEW



- **Mental Health Europe** - Who we are
- Impact on **mental health**
- Impact on **mental health services in Europe**
- **Specific** considerations
- Key opportunities and challenges for **mental health and services in the aftermath of COVID-19**
- **Conclusions with recommendations**

Who we are

WHO WE ARE



We are a **European non-governmental network organisation** committed to:

- the **promotion** of positive mental health,
- the **prevention** of mental distress,
- the **improvement of care**, advocacy for social inclusion and the protection of the rights of (ex)users of mental health services, persons with psychosocial disabilities, their families and carers.

« We advocate for **positive mental health and wellbeing** and for the **rights of people living with mental ill health** and we raise awareness to **end mental health stigma** ».



30

years of advocacy



73

member organisations



30

different countries



5

Strategic priorities

ADVOCACY & POLICY

- We work closely with the **European Institutions and international bodies**
- Together with our members, **we formulate recommendations for policy makers** to develop mental health friendly policies
- MHE places **users of mental services** at the centre of its work
- We are careful in preserving our **independence** from industrial interests



OUR PRIORITIES

- Promoting a **psychosocial model of mental health** as opposed to a bio-medical model
- Involving **users of mental services** in decision making processes
- Focusing on **recovery based community mental health** services

Specific focus 2020-2021:

- **Vulnerable groups** (e.g. youth, migrants)
- **Transparency**
- **Social Policy**
- **UN CRPD**
- **Good practice exchange**
- **Peer workers network**



Understanding Mental Health



Social Europe



Human Rights



Mental Health & Work



Recovery Community-based
Services



Projects & Campaigns

Impact on mental health

IMPACT ON MENTAL HEALTH 1/2



- **Every sixth adult in the EU** alone was affected by mental ill-health before the COVID-19 outbreak – that's more than 84 million people.
- The economic impact of **poor mental health cost the EU 4% of GDP** in lost productivity and social costs.

Mental health problems exist along the continuum from mild, time-limited distress to severe mental health problems (Lancet Commission on global mental health and sustainable development, 2018)

- **The COVID-19 pandemic has influenced where people are situated on that continuum.**

IMPACT ON MENTAL HEALTH 2/2

Belgium	Mental health problems sharply increased (e.g. depression) from 10% in 2018 to a current rate of 16%. Most affected – young people between 16 and 24 years old (Sciensano 2020)
UK	More than 25 million people in the UK experienced high levels of anxiety in late March when the lockdown was announced. The survey found that increased levels of anxiety mainly stemmed from concerns for personal wellbeing, job security and the impact of Covid-19 on their finances (Office of National Statistics)
France	18% of teleworkers experienced mental health problems such as severe anxiety, depression and other. It was primarily women who reported that their mental health had been impacted negatively.
Italy	Increased prevalence of anxiety, depression and insomnia. 37% of the respondents had post-traumatic stress symptoms, 17% depressive symptoms, 20% severe anxiety, 7% insomnia and 21% stress.

Impact on mental health services

IMPACT ON MENTAL HEALTH SERVICES 1/3

- **Outpatient and inpatient mental health services** have also been severely affected
- Demand for **face-to-face mental health services** has significantly **decreased**, but the needs remained
- Increased focus on **digital self-help and digital mental health services**
- **Limitations of digital solutions:** digital literacy, limited access to internet, not suited for all mental health needs.

IMPACT ON MENTAL HEALTH SERVICES 2/3

Institutions	
France	social care institutions have been locked in response to the coronavirus pandemic. A lack of supervision exposed people living there to ill-treatment (Validity NGO, 2020)
Spain	psychiatric units have locked people in their rooms depriving them of phone and internet access. Such inhumane measures put people with mental health problems at a higher risk of psychological distress and physical danger while stripping them of their rights and dignity.
Mental health services	
Spain	The city of Madrid, for example, was forced to reconvert over 60% of its mental health beds to care for people with COVID-19, reducing the number of people attending emergency mental health services by 75%.
Belgium	almost all face-to-face therapies have been cancelled due to staff shortage or for hygiene reasons

IMPACT ON MENTAL HEALTH SERVICES 3/3

Mental health services

The Netherlands

60% of mental health service users reported partial or entire suspension of their treatment
80% of the respondents couldn't access daily care.

- Mental health and psychosocial support delivered at the **community level have also been critically impacted, but appeared to be able to quickly adapt.**

Specific considerations

SPECIFIC CONSIDERATIONS

- **Staff mental health** – impact on healthcare and social workers
- People with pre-existing mental ill-health
- **Impact on people in vulnerable situations**

Key opportunities and challenges for mental health and services in the aftermath of COVID-19

KEY OPPORTUNITIES AND CHALLENGES

- Health systems alone are not enough and cannot be expected to be enough
- The impact of **socio-economic factors**
- Access to mental health support and services – **how COVID-19 can reshape our approach**

Conclusions

It is now crystal clear that mental health needs must be treated as a core element of our response to and recovery from the Covid-19 pandemic

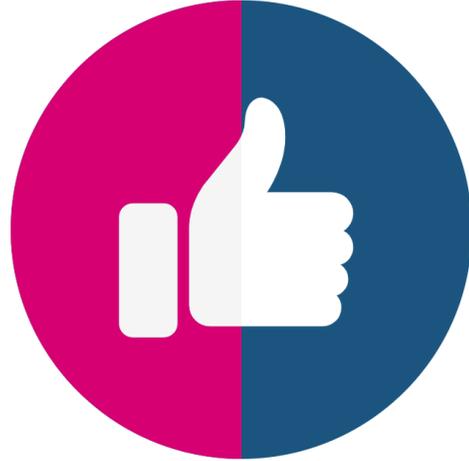
Dr Tedros Adhanom Ghebreyesus, director-general of the WHO

CONCLUSIONS

- **Cross sectoral collaboration** and investments in **social protection**
 - psychosocial model of mental health in policies and national responses to COVID-19
- Promote and support **community-based services**
 - momentum for this necessary shift
- Mental health **literacy and stigma**
 - experiencing distress is a normal reaction in these exceptional circumstances
- Explore **digital** solutions
 - mental health support that can be delivered remotely
- **Involve** people with lived experience
 - in the design, implementation and monitoring of services

QUESTIONS





Thank you for your attention!

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