COVID-19 Challenges over Mental Health Public Policy

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Abstract: *The research shapes sharp issues as to changes in healthcare system of preserving mental health of people in the context of the COVID-19 Pandemic and the quarantine period. The article analyzes the reasons that determined the world community to study actively psychological, mental and psychological-social consequences as to the impact of the COVID-19 pandemic on a person and society in general. Special attention in the article is payed to the peculiarities of maintaining and saving psychological health of public healthcare workers in conditions of chronic fatigue, overwork and situations of ongoing stress. Based on the existing strategies` analysis and through the prism of the COVID-19 determinants, the main directions of changes in the public healthcare system as to preserving mental health of people in the context of the COVID-19 pandemic and during the period of quarantine are proposed.*

Keywords: *Mental Health; public health policy; Healthcare workers; mental health factors; society; COVID-19.*

Introduction

The ongoing COVID-19 pandemic that still lasts raised up new challenges for society in general and for the health system in particular, as well as strenthened barriers to the well-being of the population. During its existence, mankind has repeatedly faced several large outbreaks of various infectious diseases, and the number of people dying from these diseases was equal to the number of lives lost in wars (Thoughts on healthcare management in an epidemic). Over the backdrop of the growing economic crisis and the many uncertainties associated with the pandemic, the mental health crisis intensifies significantly. This crisis to one degree or another applies to all countries without exception, and especially countries with low economic development.

Reforming of their local health systems is a necessary reality for all countries today. Maintaining mental health of population is seen nowadays as a complete part of the healthcare structure at any state. Healthcare system's structural parts` goal and aim of work as to mental health is traditionally determined as the following: comprehensive and balanced analysis of the entire population and individual groups` existing needs; ensuring social integration of risk groups and people with mental problems; achievement of positive results of the various mental health services ` activities intended over the entire population, as well as over certain high-risk groups and people with mental problems.

The relevance of the study is based on the statement that mental health is one of the most important components of human, social and economic capital of each state and therefore mental health should be considered as an integral and necessary component of the country's social policy in other areas (human rights development and protection, social security, education, ensuring employment, public safety, etc.). The article analyzes modern mental health protection systems` problems that arose or aggravated because of the COVID-19 pandemic, as well as outlines possible directions for improving and reforming these systems.

Scientific research analysis in the field of counteracting the COVID-19 pandemic shows the rapid dynamics of research since the beginning of 2020. Several main directions of research in the field of reforming health care systems can be identified: health system management (Renda & Castro, 2020), pandemic control measures (Ferretti et al., 2020), work of medical personnel during COVID-19, etc. Mental health in the context of COVID-19 as the research subject is only gaining activity. As to protecting mental

health of the population in the era of COVID-19, scientists and practitioners have so far focused on the challenges that COVID-19 has created for public mental healthcare systems (Campion et al., 2020), psychological influence of quarantine over people and how to reduce it and level up (Brooks et al., 2020), resocialization of people after quarantine isolation and self-isolation (Ding & Kalashnyk, 2020), negative effects of COVID-19 on mental health of different groups of people (Izaguirre-Torres & Siche, 2020), psycho-social effects of COVID-19 (Dubey et al., 2020), psychological impact of COVID-19 on healthcare system workers (Tan et al., 2020) etc. The article presented focuses its attantion upon possible strategies for reforming health systems in the field of preserving the mental health of the population. The main sources of information used for the research are: accessible scientific developments, morbidity statistics on COVID-19 in the world and some countries in particular, official statements made by heads of state, top-level officials of international organizations.

The methodology for studying the problems of changes in the healthcare system in the field of preserving mental health of population in the context of the COVID-19 pandemic and the quarantine withdrawal period was identified as follows: methods of theoretical analysis (studying the content of psychological health and decision theory under conditions of unpredictable results), analogies (based on the patterns of human development, population groups and society), studying regulatory acts of international organizations from open official sources of information (we will rely on official data from government bodies and international organizations), analysis of statistics, situational modeling (to predict changes).

Mental Health: a Person and Society

As a research problematic, the need for changes in the healthcare system in the field of preserving mental health of population in the context of the COVID-19 pandemic and the quarantine period, based on analysis of open sources, was selected for the study for several reasons:
• the COVID-19 pandemic determined fundamentally new conditions for states`, communities` and each person`s functioning ;
• disease prevalence (for 12.06.2020, the total number of cases in the world is 7 410 510, deaths rate - 418 294) (WHO, 2020, June 12);
• the pandemic demonstrated problems in health systems and epidemiological safety, and proved the need for reforms in this area;
• after the first wave of problems associated with the emergency care provision, anti-epidemiological control and diagnosis, the problems of life in

new conditions are becoming increasingly relevant. These conditions include: self-restraint, changes in habits, prolonged stress, insecurity (physical, economic, social), fear, etc. All these negative affects mental health of a person and the population of all states.;

• information hysteria as to particular issues related to COVID-19, stigma, ambiguity of public opinion;

• the need to quick changes in life vectors due to influence factors that change rapidly.

All these factors mentioned affect negatively public mental health as well as individual mental one. In reforming health systems, these areas of change as to preserving mental health of population are to be taken into account.

According to WHO statistics, before the COVID-19 pandemic, mental, neurological and narcological disorders accounted for 10% of the total burden of disease and 30% of the burden of life-threatening diseases. The damage to the global economy caused by a decline in labor productivity due to depression and anxiety disorders is about $ 1 trillion per year (WHO, 2019). It is predicted that this amount will increase due to the social situation, which is provoked by the COVID-19 pandemic.

As early as March 2020, WHO focused on the need to maintain mental health and psychosocial state of people during the COVID-19 pandemic. The WHO Department of Mental Health has developed a document in the form of information messages to support the mental well-being of various groups of population during the pandemic. These groups include: the civil population in general, healthcare system workers, administration of healthcare institutions and facilities, those who take care for and look after children or the elderly, who are in isolation (WHO, 2020, March 18). With the beginning of the weakening of quarantine measures in different countries and regions, the situation is gradually changing. Awareness of the danger of the disease fades into the background compared to economic and social threats. Many people are "tired" of the danger and are not aware of its real threat.

The aim of our study is to attract greater attention of decision-makers and society to the importance of mental health analysis and highlight these issues as part of public health policy in the process of adapting to new conditions of existence during and after the quarantine period. This will contribute to improving the effectiveness of managerial decision-making in the process of maintaining both physical and mental health, reducing the incidence of the population in general, and will also make social and security policies more effective.

The current fight against COVID-19 is a unique situation: our generation has not experienced anything like it. This is a test not only for economies of the countries or for the healthcare systems, but also a serious challenge for everyone. It shows and demonstrates itself in the intensification of the existing mental health crisis. In general, the load on the psyche arises immediately through three factors: local shock (at the level of problems of a particular person - loss of work, uncertainty of the future, severity of quarantine experience); massive shock (it's difficult for everyone, it is impossible to find a support outside); invisibility and non-specificity of danger. These factors should be taken into account when formulating possible directions for reforming the global health system and local ones as to preserving mental health of population.

Mental Health of Healthcare System's Workers: a Personal Problem or a Public Policy?

The psychological tension in society also changes the behavior of those who provide medical and social services. Health workers themselves are not immune from psychological consequences through COVID-19. The most affected by the psychological impact are those who are directly involved in the taking care of processes as to patients with COVID-19. The reasons for such unfavorable psychological results can be explained by excessive physical exertion, changes in working habits and schedules, inadequate provision of personal protective equipment, a feeling of inadequate support, etc. One more important reason for this psychological impact is the level of infection among medical and healthcare personnel. According to the Public Health Center of Ukraine, on June 4, in Ukraine there have been confirmed 25,411 COVID-19 cases. In total 4,888 cases among healthcare workers were recorded. Це наближається до 20 % (19,2). Out of Spain's 40,000 confirmed coronavirus cases, 5,400 — nearly 14 percent — are medical professionals (Heneghan, Oke, & Jefferson, 2020). In China, more than 3,300 healthcare workers were infected (4% of the 81,285 reported infections). On average, 6% of all confirmed cases of COVID-19 are among healthcare workers, with a range from 0% to 18% (SAME).

We emphasize the importance of maintaining and saving the mental health of healthcare workers for several reasons. First, medical workers like all other people have the right to health (including the mental one). Secondly, health workers have an additional pressure over their psychological and mental health sphere. To the three factors that influence people's psychological and mental health in the period of social stress (the

COVID-19 quarantine belongs to) that we already mentioned above, for medical and healthcare workers it also should be added the factor of professional duty and professional responsibility. Thirdly, the quality of services to the population provided by medical and healthcare workers depends directly on their quality of life (including mental health).

Conclusions

An important tool which can help to overcome crises such as the COVID-19 pandemic and achieve specific public health goals is a consciousness and planned public health policy. According to WHO, such a policy is seen as a set of decisions, plans and actions regarding the vision of the future, setting priorities, achieving consensus in the activities of various groups, setting goals and benchmarks in the short and medium terms (WHO, 2020, April 4). Modern conditions of existence encourage and force the decision-makers to observe public health policies and search for new managerial approaches in the process of their implementation. It is already becoming obvious that managing mental health issues requires a different strategy than the modern society provides now, and this process should be built upon the latest and most actual information based decisions.

Based on an analysis of the maintaining and saving mental health in society strategies that are used today possibilities, taking into account the European Declaration on Mental Health (WHO, 2005) requirements, as well as the starting points of our study, the following changes as to mental health and public health in the context of the COVID-19 pandemic and the quarantine period can be offered:

• development of information and educational policies that would aim at maintaining the mental well-being of the population in general, and also take into account the interests of certain groups, such as health workers, healthcare institutions` administration, those who take care for and look after children or elderly people who are in isolation, family members of a person sick or deceased with COVID-19, educational institutions, working collectives, representatives of public authorities and government agencies, etc.;

• public policy at different levels of state governing aimed at preventing and combating stigma and discrimination, including those affected by COVID-19;

• local and state public policies of re-socialization of people after a long self-isolation or observation to bring them back to full and adequate social life;

• studying the potential impact of all areas of social policy, migration policy, collective security policy, as well as forecasting (including psychological effects on the mental health of people) when making managerial decisions. Paying special attention to groups of people with special needs;

• providing targeted support and taking measures adapted to different stages of life of people at risk, in difficult conditions, especially in areas such as caring for children, people who need constant care, elderly people, people with COVID-19, medical social assistance;

• any strategy should necessarily provide the necessary support and protection for health workers - both participants in the fight against COVID-19 and specialists who ensure the restoration and provision of standard health services. Particular attention should be paid to social support (in financial and other forms) and the protection of mental health (for example, creating hotlines for psychological support) of health workers involved in the fight against COVID-19;

• in the context of the COVID-19 pandemic, the provision of medical services of the standard list has narrowed. It is necessary to expan the potential and capabilities of general practitioners and primary health care providers before the pre-quarantine period. To ensure effective access and the provision of medical and diagnostic assistance to people with mental health problems, this list of services should be expanded;

• the formation of a comprehensive multi-faceted approach to the development of structures and institutions of all forms of governance (state and non-state institutions) that can affect the mental health and social integration of individuals, families, groups of people and local communities;

• development of recruitment programs, their training and advanced training in order to provide services with a sufficient number of qualified personnel of various profiles, including in the field of maintaining mental health;

• continuous monitoring of mental health and the needs of the population in general, as well as target groups and risk groups in particular. Comparison of statistics at local, national and international levels;

• health systems need to be helped to overcome the stress of medical and social workers by monitoring reactions and effectiveness, changing tasks and schedules on local, regional and sase levels, and by creating mechanisms to provide psychosocial support if necessary.

• initiating research and supporting assessments and scaling ups as to the above mentioned actions.

We believe that with the participation of the whole society in shaping the response to the COVID-19 pandemic, the desired results can be achieved. And taking into account by the decision-makers's the directions as to changes in the healthcare system presented in this article over preserving the mental health of population in the context of the COVID-19 pandemic and the quarantine period, will help to avoid catastrophic consequences for the whole world.

References

Brooks, S. K., Webster, R. K., Smith, L. E., Woodland, L., Wessely, S., Greenberg, N., & Rubin, G. J. (2020). The psychological impact of quarantine and how to reduce it: rapid review of the evidence. *The Lancet,* 395(10227), 912-920. https://doi.org/10.1016/S0140-6736(20)30460-8

Campion, J., Javed, A., Sartorius, N., & Marmot, M. (2020, June 9). Addressing the public mental health challenge of COVID-19. *The Lancet.* https://www.thelancet.com/journals/lanpsy/article/PIIS2215-0366(20)30240-6/fulltext

Ding, S., & Kalashnyk, L. (2020). Resocial- ization and Readaptation as a Social Need of Post- Corona Period. *Postmodern Openings, 11*(1Supl2),12-19. https://doi.org/10.18662/po/11.1sup2/135

Dubey, S., Biswas, P., Ghosh, R., Chatterjee, S., Dubey, M. J., Chatterjee, S., Lahiri, D., & Lavie, C. J. (2020). Psychosocial impact of COVID-19. *Diabetes & metabolic syndrome, 14*(5), 779–788. https://doi.org/10.1016/j.dsx.2020.05.035

Ferretti, L., Wymant, C., Kendall, M., Zhao, L., Nurtay, A., Abeler-Dörner, L., Parker, M., Bonsall, D., & Fraser, C. (2020). Quantifying SARS-CoV-2 transmission suggests epidemic control with digital contact tracing. *Science* , Article eabb6936. https://doi.org/10.1126/science.abb6936

Heneghan, C., Oke, J., & Jefferson, T. (2020). COVID-19 How many Healthcare workers are infected? *CEBM. The Centre for Evidence-Based Medicine develops, promotes and disseminates better evidence for healthcare.* https://www.cebm.net/covid-19/covid-19-how-many-healthcare-workers-are-infected/

Izaguirre-Torres, D., & Siche, R. (2020). Covid-19 disease will cause a global catastrophe in terms of mental health: A hypothesis. *Medical Hypotheses,* 143, 109846. https://doi.org/10.1016/j.mehy.2020.109846

Renda, A., & Castro, R. J. (2020, April 9). Towards stronger EU governance of health threats after the COVID-19 pandemic. *European Journal of Risk Regulation* . https://www.cambridge.org/core/services/aop-cambridge-

core/content/view/FFA7DDF7964F94FF3BDCCF5E9D7271A1/S18672
99X20000343a.pdf/towards_stronger_eu_governan

Tan, B., Chew, N., Lee, G., Jing, M., Goh, Y., Yeo, L., Zhang, K., Chin, H-K., Ahmad, A., Khan, F., Shanmugam, G., Chan, B., Sunny, S., Chandra, B., Ong, J., Paliwal, P., Wong, L.,Sagayanathan, R., Chen, J., & Sharma, V. (2020). Psychological Impact of the COVID-19 Pandemic on Health Care Workers in Singapore. *Annals of internal medicine.* https://doi.org/10.7326/M20-1083

Thoughts on healthcare management in an epidemic. (n.d.). *Deioitte.com.* https://www2.deloitte.com/cn/en/pages/risk/articles/thoughts-on-construction-of-large-health-management-system-under-2019-ncov.html

World Health Organization (WHO), (2005, January 12-15). Mental Health Declaration for Europe Facing the Challenges, Building Solutions. In *WHO European Ministerial Conference on Mental Health Facing the Challenges, Building Solutions*, Helsinki, Finland, 12–15 January 2005. https://www.euro.who.int/__data/assets/pdf_file/0008/88595/E85445.pdf?ua=1

World Health Organization (WHO), (2019, October 2). Mental health. *World Health Organization.* https://www.who.int/news-room/facts-in-pictures/detail/mental-health

World Health Organization (WHO), (2020, April 4). Health policy. *World Health Organization.*https://www.who.int/topics/health_policy/en/#:~:text=An%20explicit%20health%20policy%20can,builds%20consensus%20and%20informs%20people

World Health Organization (WHO), (2020, June 12). Coronavirus disease 2019 (COVID-19) Situation Report – 144/ the 12-th June 2020 situation report, which is published daily by the World Health Organization. *World Health Organization.* https://www.who.int/docs/default-source/coronaviruse/situation-reports/20200612-covid-19-sitrep-144.pdf?sfvrsn=66ff9f4f_2

World Health Organization (WHO), (2020, March 18). Mental health and psychosocial considerations during the COVID-19. Interim guidance. *World Health Organization.* https://www.who.int/publications/i/item/WHO-2019-nCoV-MentalHealth-2020.1

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