

Research Snapshot

COVID-19 and mental health: A review of the existing literature

What is this research about?

Adverse mental health consequences, including psychological distress and symptoms of mental illness, are commonly associated with widespread outbreaks. This review summarizes the existing academic literature examining mental health concerns related to the COVID-19 pandemic.

What did the researchers do?

A narrative review was conducted on the existing literature related to mental health and COVID-19. Using the PubMed database, 28 articles were included in this review, including four original research articles, letters to the editor, editorials and commentaries. Five themes were identified:

- mental health symptoms related to COVID-19
- mental health impact of COVID-19 on the general population
- mental health impact of COVID-19 on health care workers
- mental health risks of COVID-19 in vulnerable populations
- therapeutic interventions and strategies to deliver mental health care during the COVID-19 pandemic.

What you need to know

Preliminary evidence suggests that symptoms of anxiety, depression and self-reported stress are common reactions to the COVID-19 pandemic, and may be associated with disturbed sleep.

Populations at higher risk of adverse mental health outcomes include older adults, the homeless, migrant workers, pregnant women, individuals with existing physical or psychiatric illnesses, health care workers, Chinese students studying overseas and people with COVID-19 and their families.

Strategies for delivering mental health care during the COVID-19 pandemic include online surveys to assess the scope of mental health problems, online counselling and self-help services, and online materials for mental health education.

What did the researchers find?

Mental health symptoms related to COVID-19

Preliminary evidence suggests that symptoms of anxiety and depression and self-reported stress are common psychological reactions to the COVID-19 pandemic, and may be associated with disturbed sleep.

Mental health impact of COVID-19 on the general population

In the general population, adverse experiences include the economic impact of COVID-19 and its effects on well-being, and high levels of fear and panic behaviour, including hoarding and stockpiling of resources.

To combat these issues, the literature suggests the need for adequate training of health care personnel, using technology to deliver mental health care, improving screening for mental disorders, improving links between community and hospital services, and providing accurate information to the general public to minimize maladaptive responses regarding COVID-19. Along with adequate mental health services, the strengthening of social capital is also required.

One study listed strategies for the general public to use to minimize COVID-19–related stress:

- Assess the accuracy of information.
- Enhance social support.
- Reduce the stigma associated with COVID-19.
- Maintain normalcy while adhering to safety measures.
- Use available mental health services, particularly online services, when needed.

Mental health impact of COVID-19 on health care workers

Health care workers are at a significant risk of adverse mental health outcomes during the COVID-19 outbreak due to:

- long working hours
- risk of infection
- shortages of personal protective equipment
- loneliness
- physical fatigue

- separation from families.

Another study found that revising pandemic supports for staff based on their feedback resulted in greater satisfaction among health care workers during COVID-19.

Staff were provided with a rest area, care for basic physical needs such as food, training on the care of COVID-19 patients, information on protective measures, leisure activities and periodic visits by a counsellor to the rest area. Telephone helplines for health care workers to specifically address mental health problems were also helpful.

Mental health risks of COVID-19 in vulnerable populations

Particular populations that may be more vulnerable to the mental health impact of the COVID-19 pandemic include:

- older adults – high rates of pre-existing depressive symptoms and lack of access to mental health services
- the homeless – barriers to mental health care including fears of involuntary admission or imprisonment
- migrant workers – lack of outreach and social support
- the mentally ill – may be at higher risk of relapse or new episodes of their disorder due to the stress associated with the COVID-19 pandemic
- pregnant women – the relationship between COVID-19–related stress and anxiety and adverse maternal and neonatal outcomes
- Chinese students studying overseas – potential discrimination and stigmatization during the pandemic, leading to anxiety and stress-related disorders.

Strong collaboration among psychiatrists, mental health workers, specialists from other branches of medicine, public health specialists, local authorities, and the community is required to minimize the risks faced by vulnerable populations.

Therapeutic interventions and strategies

Some specific strategies to deliver mental health care to those affected by the COVID-19 pandemic include:

- educating the public about the common psychological effects of a pandemic
- motivating the public to adopt strategies for disease prevention and health promotion
- integrating services with available health care
- teaching problem-solving strategies to cope with the current crisis
- empowering clients with COVID-19 and their caregivers
- providing mental health care to health care workers.

Easily accessible strategies that minimize increasing COVID-19 infection risks include:

- creating teams of specialists qualified to address emotional distress
- training community health personnel in basic aspects of mental health care
- using online surveys to assess the scope of mental health problems
- developing online materials for mental health education
- providing online counselling and self-help services
- using structured letters as a form of telepsychiatry consultation (i.e., mental health professional reviews information about the patient rather than talking directly to the patient)

- developing telemedicine services (i.e., a direct link between the patient and mental health professional) for diagnostic purposes as well as counselling
- making online mental health services accessible to individuals from lower socioeconomic strata.

Limitations and next steps

It's important for healthcare providers to know that the size of the effect was small. The increase in cannabis use was associated with a small increase in the risk of screening positive for problematic drinking. In addition, the researchers cannot draw conclusions about the cause of the changes.

It's unclear whether recreational cannabis use caused the increase in alcohol use, or if it's the other way around. Also, the study was not designed to determine whether the shift from recreational to medicinal cannabis use was associated with changes in alcohol use.

The mechanisms that explain the link between cannabis use and alcohol were not directly evaluated. However, the researchers theorized the findings may be linked to where recreational and medicinal cannabis are used.

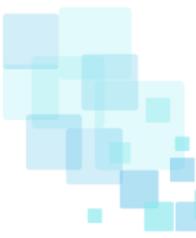
People who use cannabis recreationally may use it in similar settings with alcohol (e.g. at a party) and changes in their behaviours may affect the use of both. People who use cannabis medicinally may frequently use it to treat symptoms, which may be independent from their alcohol use. The next step will be to investigate these possible explanations.

About the researchers

Dr. Ravi Philip Rajkumar is an associate professor in the Department of Psychiatry at the Jawaharlal Institute of Postgraduate Medical Education and Research, Pondicherry, India.

Keywords

COVID-19; Coronavirus; Mental health; Anxiety; Depression; Stress; Public health



How can you use this research?

Although there is relatively little literature available, there are already valuable learnings and recommendations for mental health professionals and allied sectors. The development, implementation, evaluation and dissemination of time-limited, culturally sensitive mental health interventions are required. Researchers should focus on the impact of COVID-19 on vulnerable populations and on other countries. Evidence-based research into health anxiety and its determinants is also needed so that valid individual- and population-level strategies can be developed.

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