

COVID-19 and Mental Health

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Introduction

The impact of the COVID-19 pandemic on mental health has been profound. According to the World Health Organisation (WHO) interest in mental health is at its highest ever level because of COVID-19 (1) and it has affected the mental health of people all over the world, including here in the Caribbean. It is estimated that about 1 billion people suffer with some form of mental health problem at any given time and the cost of these problems to the world's economy is expected to reach 6 trillion US dollars annually by 2030. The WHO report suggests that the pandemic has led to an increase in the prevalence of conditions such as anxiety and depressive disorders to the magnitude of at least twenty-five percent. The intersection of mental health and the effects of the COVID-19 pandemic also highlighted the degree to which mental and physical health are intimately intertwined and in turn impact significantly on public health. The mental health vulnerabilities arising out of the pandemic were due to its direct health impact and also as a result of the measures introduced to contain its spread.

COVID-19 and the brain

Direct and indirect effects on mental health were predicted in the early phase of the pandemic especially as it was noted that the COVID-19 virus itself could affect the brain and nervous system directly and was likely to have neuropsychiatric effects in the short and long term (2). The effects of the covid virus on the brain and the body of those who contracted the virus – brain fog, intense fatigue, insomnia and long covid, stigma and interruptions to life activities have been a primary concern particularly for those who suffered more severe symptoms. Health services may need to brace for increased uptake on services particularly as there appears to be a strong overlap between the long-term effects of the virus and non-communicable chronic diseases, making the management of the latter more challenging. The presence of medical co-morbidities, particularly non-communicable chronic diseases became recognized as the greatest risk for increased morbidity and mortality during the pandemic.

COVID-19 Stressors

In addition, some of the identified mental health stressors associated with the pandemic include the stress associated with 1. the fear of infection and the fear of death for oneself

and for one's family and friends; 2. the public health and social distancing measures implemented for the pandemic; 3. loss of income, unemployment, and financial insecurity and 4. uncertainty and misinformation regarding every aspect of the pandemic (1). There was also the evident mental health impact on health care workers and other frontline workers who were having to confront unprecedented levels of mortality and extended working hours alongside the use of physically restrictive personal protective equipment and also to worry about fears of acquiring and transmitting the virus to their loved ones. This has led to increased levels of burnout and dissatisfaction, and exacerbated previous concerns about working conditions and mental health support (3). In the Caribbean, one study (4) reported that contact with confirmed cases of COVID-19 was a significant predictor of depressive symptoms in health care workers. More generally, all workers as part of society's grappling with the pandemic required a greater engagement with their mental well-being. Employee wellness has therefore become a priority area for employers in order to preserve morale and maintain commitment to their work.

Mental Health Services

Mental health services have had to adapt to these new demands while continuing to serve those already receiving mental health treatment who too would have been further undermined by all the factors listed above (5). Those already suffering with mental illness were identified as a particularly vulnerable group being more likely to contract the COVID-19 virus and also more likely to have a worse outcome particularly with the neuro-psychiatric manifestations of the infection (6). They were also further undermined by disruptions to the usual access to their services because of the impact of the pandemic.

Grief and Loss

COVID-19 related deaths have also been reported as eliciting more severe grief reactions from loved ones because of the inability to say goodbye appropriately and the need for altered funeral arrangements. In addition, many relatives would have themselves been quarantined when their loved ones passed away adding another layer of difficulty to the bereavement process (7).

Substance Use and Intimate Partner Violence

The effects of the mitigation and public health stay-at-home measures are also still emerging. Increases in substance use, for example more alcohol drinking at home, and in front of children, alongside drinking significant amounts of alcohol before 5pm. There was also a general increase in alcohol consumption reported during the pandemic. Higher levels of anxiety have been found to be associated with increased levels of alcohol consumption underlining the significance of mental health in the prevalence of heavy drinking during the pandemic (8). There were increased reports of domestic intimate partner violence during the pandemic with likely risk factors being increased alcohol use and economic and employment uncertainty (9). The Caribbean has had high rates of intimate partner violence before the pandemic and Jones (10) suggests that it represents a continuum beginning with child sexual abuse and socio-cultural norms that sanction violence in relationship contexts and that these were amplified by the lockdown measures during the pandemic. The inability to engage in previously relaxing stress reduction activities in social spaces as well as in sports and exercise may have also contributed to the decline in mental health and resilience and an increase in violence within the household.

Children and Adolescents

The impact on children and adolescents has also been very significant though this demographic was at lesser risk of contracting the virus and of having serious illness in response to infection. School closures, disruptions to activities and greater interaction with screens were reported to have negative mental health consequences including anxiety, depression, and post-traumatic stress responses. They were also negatively affected by parental stress. In the aftermath of these issues, developmental and behavioural problems such as school violence, school dropouts, absenteeism and increases in deviant and inappropriate behaviour are also likely to become more prevalent. Substance use and bullying especially cyber bullying are also likely to increase in prevalence. Decline in academic performance particularly for those already operating under disadvantaged circumstances can also be expected with profound implications for the perpetuation of social and health disparities and loss of developmental mobility. Self-harm and suicidal behaviour have also increased during the pandemic demanding a greater sensitivity to these issues from mental health and paediatric services (11).

The Elderly

There are also specific mental health concerns for the elderly who were at increased risk for COVID-19 and negative outcomes because of the greater likelihood of them having co-morbid medical illness. The elderly would also be more affected by social isolation and were therefore at increased risk for depression, anxiety, and other mental

health problems. Infection with COVID-19 also contributes to an additional risk for dementia- which is also a burgeoning problem in the Caribbean region. Greater attention and regulation need to be placed on long term care facilities where many elderly persons reside and mental health support is a critical component of this attention (Llibre-Guerra et al, 2020). Mental health resources need to specifically address the mental health of the elderly to avoid even greater demands on health care resources.

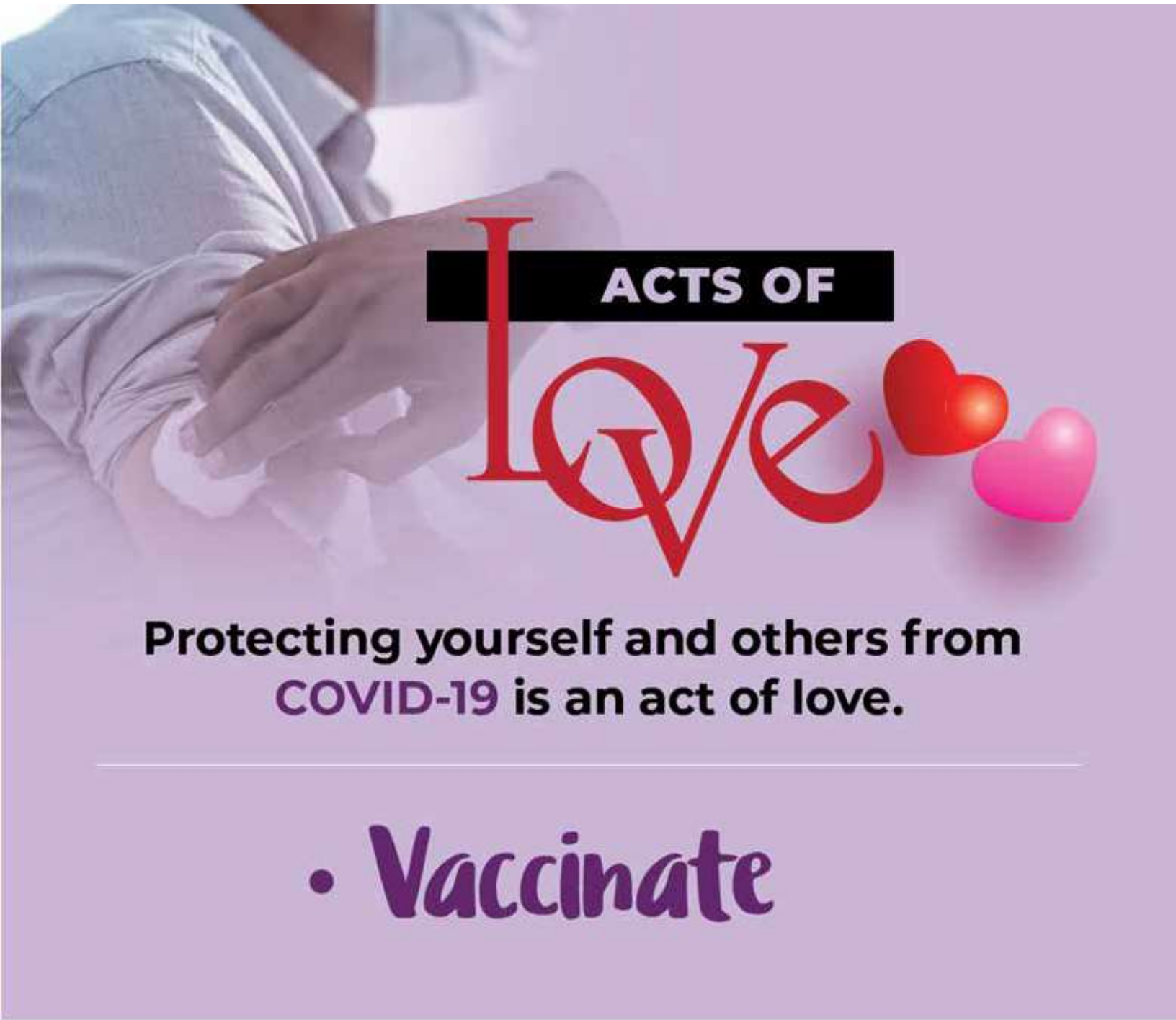
Conclusion

The onus is now on the leadership in the Caribbean to increase the value placed on mental health promotion and the prevention of mental health problems. This will involve facilitating greater mental health resources and facilitating positive interactions between health and social sectors in order to provide the best environment for positive mental health. According to the WHO (1), better mental health for all requires that mental health is valued and protected, that every individual has the opportunity to thrive and to exercise their human rights. Every individual must also be able to access the mental health care that they need whenever it may be needed.

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ACTS OF
Love



**Protecting yourself and others from
COVID-19 is an act of love.**

- **Vaccinate**

