COVID-19: impact on mental health

 21st May 2021

**Title:** Samaritans to extend help for frontline health and care workers

The Guardian | 16th May 2021

The Samaritans is extending its help for frontline health and care workers in England amid rising demand for long-term support for stress and anxiety.

More than 20,000 health and care workers have contacted the charity’s helplines since Covid started spreading last spring, and the Department of Health and Social Care has agreed to extend funding for a dedicated line until at least September.

The Samaritans, which aims to help anyone who is struggling to cope and reduce rates of suicide, said many callers were describing feelings of guilt about not living up to “superhero” expectations. Others were reporting physical and emotional exhaustion 15 months since the pandemic set in.

Full article: [Samaritans to extend help for frontline health and care workers](https://www.theguardian.com/world/2021/may/16/samaritans-extend-helpline-frontline-health-care-worker-england-wales-covid-related-stress)

**Title:** Wellbeing across the four UK countries during the pandemic

Nuffield Trust | 20th May 2021

The last year has had an unprecedented impact on every aspect of our society, from health care and education to work and travel. Despite restrictions easing, the ramifications of Covid-19 on people’s lives and livelihoods are extensive. This article and accompanying charts explores just how the pandemic has affected wellbeing across the UK.

The charts show how levels of anxiety, happiness and feelings of worthwhileness and life satisfaction compared across the four countries of the UK between April 2019 and March 2020, and April to September 2020.

From last April, feelings of worthwhileness, life satisfaction and happiness fell across the whole of the UK. There was also a marked increase in anxiety (albeit only marginally in Northern Ireland). Increased anxiety was particularly seen in areas that had on average poorer health status, and among people who considered their own health to be ‘bad’ or ‘very bad'.

Full detail: [Wellbeing across the four UK countries during the pandemic](https://www.nuffieldtrust.org.uk/resource/chart-of-the-week-wellbeing-across-the-four-uk-countries-during-the-pandemic)

**Title:** Senior hospital doctors have been left with moral injury, BMA warns

BMJ | 2021; 373: n1298 | 20th May 2021

The covid-19 pandemic has left some hospital consultants suffering from moral injuries after they were forced to act against their moral compass, the chair of the BMA’s Consultants Committee has warned.

Speaking at the BMA’s annual consultants conference held online on 19 May, Rob Harwood said that consultants had faced the pandemic head on, working long hours, sometimes without correct or adequate personal protective equipment, and had seen their patients and colleagues die in unprecedented numbers. He said that the psychological impact of being unable to do what they believed was right had been too much for some doctors, who had been left with moral injury as a result.

Further detail: [Senior hospital doctors have been left with moral injury, BMA warns](https://www.bmj.com/content/373/bmj.n1298)

**Title:** Critical care work during COVID-19: a qualitative study of staff experiences in the UK

BMJ Open | 18th May 2021

The objective of this study was to understand NHS staff experiences of working in critical care during the first wave of the COVID-19 pandemic in the UK.

Forty NHS staff working in critical care, including 21 nurses, 10 doctors and advanced critical care practitioners, 4 allied health professionals, 3 operating department practitioners and 2 ward clerks participated in this qualitative study. The authors purposefully sought the experiences of trained and experienced critical care staff and those who were redeployed.

COVID-19 presented staff with a situation of extreme stress, duress and social emergency, leading to a shared set of experiences which we have characterised as a community of fate. This involved not only fear and dread of working in critical care, but also a collective sense of duty and vocation. Caring for patients and families involved changes to usual ways of working, revolving around: reorganisation of space and personnel, personal protective equipment, lack of evidence for treating COVID-19, inability for families to be physically present, and the trauma of witnessing extreme patient acuity and death on a large scale. The stress and isolation of working in critical care during COVID-19 was mitigated by strong teamwork, camaraderie, pride and fulfilment.

COVID-19 has changed working practices in critical care and profoundly affected staff physically, mentally and emotionally. Attention needs to be paid to the social and organisational conditions in which individuals work, addressing both practical resourcing and the interpersonal dynamics of critical care provision.

Full article: [Critical care work during COVID-19: a qualitative study of staff experiences in the UK](https://bmjopen.bmj.com/content/bmjopen/11/5/e048124.full.pdf)

**Title:** COVID-19: mental health and wellbeing surveillance report

Public Health England | updated 19th May 2021

This report is about population mental health and wellbeing in England during the COVID-19 pandemic. It includes up-to-date information to inform policy, planning and commissioning in health and social care. It is designed to assist stakeholders at national and local level, in both government and non-government sectors.

The report is regularly updated with the most recent information available.

Full detail: [COVID-19: mental health and wellbeing surveillance report](https://www.gov.uk/government/publications/covid-19-mental-health-and-wellbeing-surveillance-report)

**Title:** Offer staff military-style mental health support, say healthcare leaders

BMJ | 2021; 373: n1292 | 20th May 2021

The government should take inspiration from the mental health services offered to veterans when designing services for NHS staff who have worked during the pandemic, leading healthcare organisations have urged.

The call from 13 organisations, including the BMA and several royal colleges, follows research conducted by Neil Greenberg, professor of defence mental health, and colleagues, which showed that NHS staff working in critical care during the pandemic reported more than twice the rate of probable post-traumatic stress disorder (PTSD) than the rate found in military veterans who had recently experienced combat.

Full detail: [Offer staff military-style mental health support, say healthcare leaders](https://www.bmj.com/content/373/bmj.n1292)

**Title:** COVID-19 mental health impact and responses in low-income and middle-income countries: reimagining global mental health

The Lancet Psychiatry | June 2021

This Review examines the mental health implications of the COVID-19 pandemic in low-income and middle-income countries (LMICs) in four parts:

1. A review of the emerging literature on the impact of the pandemic on mental health, which shows high rates of psychological distress and early warning signs of an increase in mental health disorders.
2. An assessment of the responses in different countries, noting the swift and diverse responses to address mental health in some countries, particularly through the development of national COVID-19 response plans for mental health services, implementation of WHO guidance, and deployment of digital platforms.
3. Consideration of the opportunity that the pandemic presents to reimagine global mental health.
4. A vision is presented for the concept of building back better the mental health systems in LMICs.

Recommendations of the review are relevant for the mental health of populations and functioning of health systems in not only LMICs but also high-income countries impacted by the COVID-19 pandemic, with wide disparities in quality of and access to mental health care.

Full article: [COVID-19 mental health impact and responses in low-income and middle-income countries: reimagining global mental health](https://www.sciencedirect.com/science/article/pii/S2215036621000250)

**Title:** Suicide prevention and COVID-19: the role of primary care during the pandemic and beyond

British Journal of General Practice | May 2021

The COVID-19 pandemic has brought with it multiple threats to mental wellbeing — the possibility or reality of serious physical illness; complex COVID-related bereavement; lockdowns that cause isolation and inhibit social contact, or that can increase exposure to abuse in the family; caring for children unable to go to school; and precarious employment and redundancy, failing businesses, and financial insecurity.

The pandemic has exacerbated the longstanding pressure on resources and underinvestment in both statutory mental health and wider community services. Against this background, this editorial outlines the current evidence for impact of COVID-19 on self-harm and suicide rates, and considers how primary care can contribute to suicide prevention during COVID-19 and after the acute crisis has passed.

Full detail: [Suicide prevention and COVID-19: the role of primary care during the pandemic and beyond](https://bjgp.org/content/bjgp/71/706/200.full.pdf)

**Title:** The importance of addressing loneliness: lessons from a pandemic

British Journal of General Practice | May 2021

Pandemics such as the COVID-19 outbreak exemplify the importance of combatting isolation; with social restrictions having been in place since March 2020, loneliness is a growing problem in the UK.

This article recommends that in response to increasing experiences of loneliness during pandemics, all healthcare professionals must have a greater awareness that people may not have adequate support systems, and should routinely ask about family and friends when taking a detailed history.

Full editorial: [The importance of addressing loneliness: lessons from a pandemic](https://bjgp.org/content/bjgp/71/706/218.full.pdf)

**Title:** Bereavement care during and after the COVID-19 pandemic

British Journal of General Practice | May 2021

The scale of the impact Covid -19 has had on bereavement is now emerging: for every Covid-19 death it is estimated that up to nine people are affected by bereavement, and those bereaved are likely to display higher levels of prolonged grief symptoms.

For all people bereaved during this period, whether from Covid-19, other conditions, or deaths prior to the pandemic, there are multiple risk factors for complex grieving: an increase in sudden and unexpected deaths; restrictions on visiting family members at the end of life; disruption to mourning practices and funerals; and reduced access to social support networks.

Healthcare professionals, including GPs and other primary care practitioners, have also faced multiple challenges during this period in supporting bereaved people; adapting to remote technology, managing the increased complexities of bereaved relatives’ grief, and dealing with their own professional and personal experiences of bereavement.

This editorial believes it is timely to address the role of primary care in bereavement care, and to ask how general practice can better support bereaved people, and how practitioners can themselves be better supported in caring for bereaved people during and after the pandemic.

Full editorial: [Bereavement care during and after the COVID-19 pandemic](https://bjgp.org/content/bjgp/71/706/198.full.pdf)

**Title:** COVID exacerbates healthcare inequalities for autistic people

BMJ Open | 17th May 2021

According to a new study published in BMJ OPEN, the COVID-19 pandemic has further exacerbated existing healthcare inequalities for autistic people and has likely contributed to disproportionate increases in morbidity and mortality, mental health/ behavioural difficulties and reduced quality of life.

Researchers, clinicians and the autism community are calling for urgent updates to policies and guidelines regarding the accessibility of COVID-19 (and broader healthcare) services to prevent the widespread exclusion of autistic people, which represents a violation of international human rights law.

Further detail: [COVID exacerbates healthcare inequalities for autistic people](https://www.kcl.ac.uk/news/covid-exacerbates-healthcare-inequalities-for-autistic-people) | Kings College London

Full research: [COVID-19 health and social care access for autistic people: European policy review](https://bmjopen.bmj.com/content/bmjopen/11/6/e045341.full.pdf)

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[TRFT Library & Knowledge Service](https://www.trftlibraryknowledge.com/) aim to bring together the latest guidelines, research and news on Covid-19 through our [Covid-19 portal](https://www.trftlibraryknowledge.com/coronavirus.html). For daily updates on Covid-19 visit our '[Latest Health](https://trfthealthweeklydigest.wordpress.com/)' newsfeed, or use the hashtag [#covid19rftlks](https://twitter.com/hashtag/covid19rftlks?src=hashtag_click) to see our latest tweets on Covid-19 research, guidelines and news.

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