

COVID-19 and Mental Health: Perspectives of Nursing and Healthcare Researchers

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Introduction

A novel coronavirus (2019-nCoV) that was identified as originating from Wuhan, Hubei Province, spread widely and rapidly in China and several other countries, causing an outbreak that was later called COVID-19. The World Health Organization (WHO n.d.) declared COVID-19 a public health emergency of international concern on 30 January 2020 and characterised the outbreak as a pandemic on 11 March 2020 because it was affecting every continent on the planet. The COVID-19 pandemic caused unprecedented devastation worldwide with its epicentre in 2020 and 2021. Globally, as of 21 February 2023, there have been 757,264,511 confirmed cases of COVID-19, including 6,850,594 deaths, reported to WHO (WHO 2023). The global COVID-19 pandemic has generated major mental and psychological health problems worldwide. Individual and government responses to this major public health emergency have affected the lives of hundreds of millions of people and changed people's ways of socialising, working, studying and living. Mental health problems such as anxiety, sleep disorders, depression, frustration, and stress-related disorders may be caused by worry about becoming infected, increasing work pressure, lifestyle changes and worsening living conditions (Zhang et al. 2020).

The COVID-19 pandemic caused public panic and mental health stress. The increasing number of patients and suspected cases, and the increasing number of outbreak-affected countries, have elicited public worry about becoming infected. The unpredictable future of this pandemic was exacerbated by myths and misinformation, often driven by erroneous news reports and the public's misunderstanding of health messages, thus causing worry in the population. While trying to contain the outbreak, governments introduced quarantines, forced wearing of masks in public places, and travel bans and restrictions to travellers during important holiday seasons, which generated public anxiety (Bao et al. 2020). The nurses and public health workers who were caring for

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individuals who were either severely ill or experiencing bereavement were themselves scared and exposed to trauma. Healthcare workers were also at risk of getting infected, and they carried a large burden in the clinical treatment and public prevention efforts in hospitals and community settings. The challenges and stress they experienced could have triggered common mental disorders, including anxiety and depressive disorders, and posttraumatic stress disorder (Shultz, Baingana, and Neria 2015). According to a scientific brief released by the WHO (2022), the global prevalence of anxiety and depression increased by a massive 25% in the first year of the COVID-19 pandemic.

The Link between COVID-19 and Mental Health

Multiple Stress Factors

One major explanation for the increase in anxiety and depression is the unprecedented stress caused by the social isolation resulting from the pandemic. Linked to this were constraints on people's ability to work, seek support from loved ones and engage in their communities. Loneliness, fear of infection, suffering, fear of death for oneself and for loved ones, grief after bereavement and financial worries have also all been cited as stressors leading to anxiety and depression. Among health workers, exhaustion has been a major trigger for suicidal thinking (WHO 2022).

Young People and Women Worst Hit

The scientific brief released by WHO (2022), which is informed by a comprehensive review of existing evidence about the impact of COVID-19 on mental health and mental health services and includes estimates from the latest Global Burden of Disease study, shows that the pandemic has affected the mental health of young people and that they are disproportionately at risk of suicidal and self-harming behaviours. It also indicates that women have been more severely impacted than men and that people with pre-existing physical health conditions, such as asthma, cancer and heart disease, were more likely to develop symptoms of mental disorders (WHO 2022).

Gaps in Care

The increase in the prevalence of mental health problems coincided with severe disruptions to mental health services, leaving huge gaps in care for those who need it most. For much of the pandemic, services for mental, neurological and substance use conditions were the most disrupted among all essential health services reported by WHO member states. Many countries also reported major disruptions in life-saving services for mental health, including for suicide prevention (WHO 2022).

Interventions to Reduce the Impact of COVID-19 on Mental Health

Mental Health and Psychosocial Support

Concerns about potential increases in mental health conditions had already prompted 90% of countries surveyed to include mental health and psychosocial support in their

COVID-19 response plans, but major gaps and concerns remain. By the end of 2021, the situation had somewhat improved, but at present in 2023, too many people remain unable to get the care and support they need for both pre-existing and newly developed mental health conditions (WHO 2022).

Online Support

Unable to access face-to-face care, many people have sought support online, signalling an urgent need to make reliable and effective digital tools available and easily accessible. However, developing and deploying digital interventions remains a major challenge in resource-limited countries and settings (WHO 2022).

Step up Investment

There is a chronic global shortage of mental health resources that continues today. The most recent *Mental Health Atlas 2020* (WHO 2021a) showed that in 2020, governments worldwide spent on average just over 2% of their health budgets on mental health, and many low-income countries reported having fewer than one mental health worker per 100,000 people (WHO 2022).

Dévora Kestel, Director of the Department of Mental Health and Substance Use at WHO, sums up the situation: “While the pandemic has generated interest in and concern for mental health, it has also revealed historical under-investment in mental health services. Countries must act urgently to ensure that mental health support is available to all” (WHO 2022).

Step up Mental Health Services and Support

The publication of 15 papers on COVID-19 and mental health in this Special Edition, and other publications elsewhere on this topic, is a wake-up call to all countries to step up mental health services and support. The commitment to mental health needs to be accompanied by a global escalation in investment.

Comprehensive Mental Health Action Plan

In order to empower communities and reduce the impact of COVID-19 on mental health, the World Health Assembly, consisting of ministers of health of 194 member states, adopted the WHO’s *Comprehensive Mental Health Action Plan 2013–2020* (WHO 2021b) in May 2013. The four major objectives of the action plan are the provision of more effective leadership and governance for mental health; the provision of comprehensive, integrated mental health and social care services in community-based settings; the implementation of strategies for promotion and prevention; and strengthened information systems, evidence and research (WHO 2023).

Concluding Remarks

The theme for this special issue of 2022 is the Covid-19 pandemic and mental health. A total of 15 peer-reviewed articles based on innovative original research are featured in this issue. Articles published in this issue are from authors located in nine countries that include South Africa, Indonesia, Nigeria, Eswatini, China, India, Iran, United Arab Emirates and the Philippines. This diversity is important as the scope of *AJNM* should include authors and study settings that represent the African continent but that also have a global impact/representation. In addition to original articles, a commentary that describes the impact of COVID-19 on nursing and midwifery practices in South Africa is featured. We would like to congratulate all authors who contributed to this special issue.

It is important to highlight that each article provides evidence-based ideas for clinical decision-making in nursing and midwifery practices, with a view to promote the quality of life of patients, their families and respective communities.

We do hope you will enjoy reading this series of articles and that they will stimulate new ideas for improvement in nursing and midwifery practice.

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