

COVID-19 RESTRICTIONS AND MENTAL HEALTH POLICY BRIEF



Professor Jane Fisher AO, Director Global and Women's Health, School of Public Health and Preventive Medicine, Monash University jane.fisher@monash.edu

Australia has rarely experienced a national emergency on the scale of COVID-19. National population data on the effects on mental health of COVID-19 and its associated restrictions are essential to inform social and economic recovery.

WHAT WE DID

During April and May 2020, when the first lockdown measures were implemented, a nationwide survey of the mental health of nearly 14,000 Australians was undertaken by the School of Public Health and Preventive Medicine, Monash University.

WHAT WE FOUND

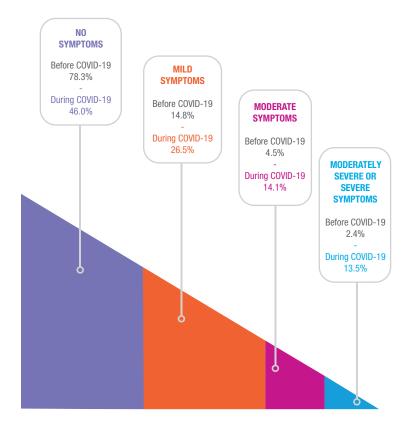
Public health measures to limit the spread of COVID-19 have had significant consequences for the mental health of Australians. The severity is influenced by individual, social and economic circumstances.

In the early stages of the COVID-19 restrictions:

- more than one in four people reported clinically significant depression and anxiety symptoms, a prevalence that is two to three times higher than normally observed in the community.
- one in four people had mild to moderate symptoms that impair functioning and quality of life.
- people experiencing the worst symptoms were more likely to have lost their jobs, live alone or in poorly resourced areas, care for dependent family members, or be among marginalised minorities, women, or young.

THE WAY FORWARD

A public health approach has been essential to containing the spread of COVID-19. A public mental health approach is needed for full social and economic recovery. These findings can be used to inform a national strategy that includes universal mental health promotion, a stepped care model of clinical mental health services, plus population-based psychological and social interventions.



Spectrum of mental health problems in Australia

POLICY OPTIONS

A public mental health approach is needed to assist recovery.

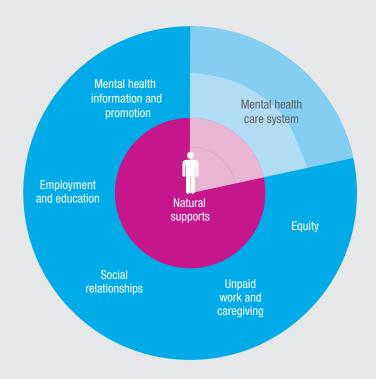
A multicomponent strategy should be developed that includes, universal health education, low and high intensity services, and will require contributions from the whole of government, civil society, and industry.

Fisher J, Tran T, Hammarberg K, Sastry J, Nguyen H Rowe H, Popplestone S, Stocker R, Stubber C Kirkman M (2020). Mental Health of people in Australia in the first month of COVID-19 restrictions: a national survey. Medical Journal of Australia http://dx.doi.org/10.5694/mja2.50831

COVID-19 disruptions and public mental health policy responses

A multi-sectoral public mental health policy response is needed to help the population recover and resume socially and economically productive lives.

Increased resourcing of the mental health system is only part of a comprehensive policy response. Many actions for a mental health recovery plan lie outside the health sector.



MENTAL HEALTH INFORMATION AND PROMOTION

Adverse consequences of diminished wellbeing included that one in five people were drinking more alcohol than they used to, and more than half were bothered by poor appetite or overeating.

Create psychologically informed, culturally diverse and multilingual public mental health campaigns conveying encouraging and non-judgemental messages for selfmanagement.

EMPLOYMENT AND EDUCATION

One in 10 people lost a job or opportunity to study during restrictions and one in 12 was unemployed before restrictions and could not find a job.

Train and support

- employment assistance personnel to recognise and respond empathically to applicants' mental health needs.
- employers to assist employees to make the transition from working from home back to the workplace.

SOCIAL RELATIONSHIPS

Social isolation has diminished wellbeing.

Establish or enhance social connection and cohesion by initiating flexible urban design and supporting inclusive community infrastructure such as community centres and neighbourhood houses.

UNPAID WORK AND CAREGIVING

The increased burden of home-schooling and other caregiving responsibilities has been carried by women, and more women than men have lost jobs.

Recognise and restore opportunities for women's workforce participation and progression.

EQUITY

Problems are more common in poorly resourced areas and government benefits are the main source of income for one in eight people.

All policies and initiatives should be scrutinised through an equity lens to mitigate unintended adverse consequences for socio-economic, gender, ethnicity, and age equity.

ALL POLICIES

- Relevant communities need to be consulted in the design, implementation, and evaluation of recovery policies.
- Subject all policies to a 'mental health impact audit' before implementation.
- Future pandemic preparedness plans should include mental health interventions that are based on rigorous evaluation of COVID-19 pandemic mental health recovery policies.