# COVID-19 AND MENTAL HEALTH FOR ALL
A Framework for Moving Forward

The COVID-19 pandemic has highlighted many mental health challenges related to factors such as changes to health care access, social isolation, and unexpected unemployment *(COVID-19 Threats)*. As highlighted in **A Framework of Mental Health Promotion Interventions**, to foster mental health for all – now and for future - different actions in different contexts can be undertaken *(Positive Interventions)*.

A FRAMEWORK OF MENTAL HEALTH PROMOTION INTERVENTIONS [1-7]
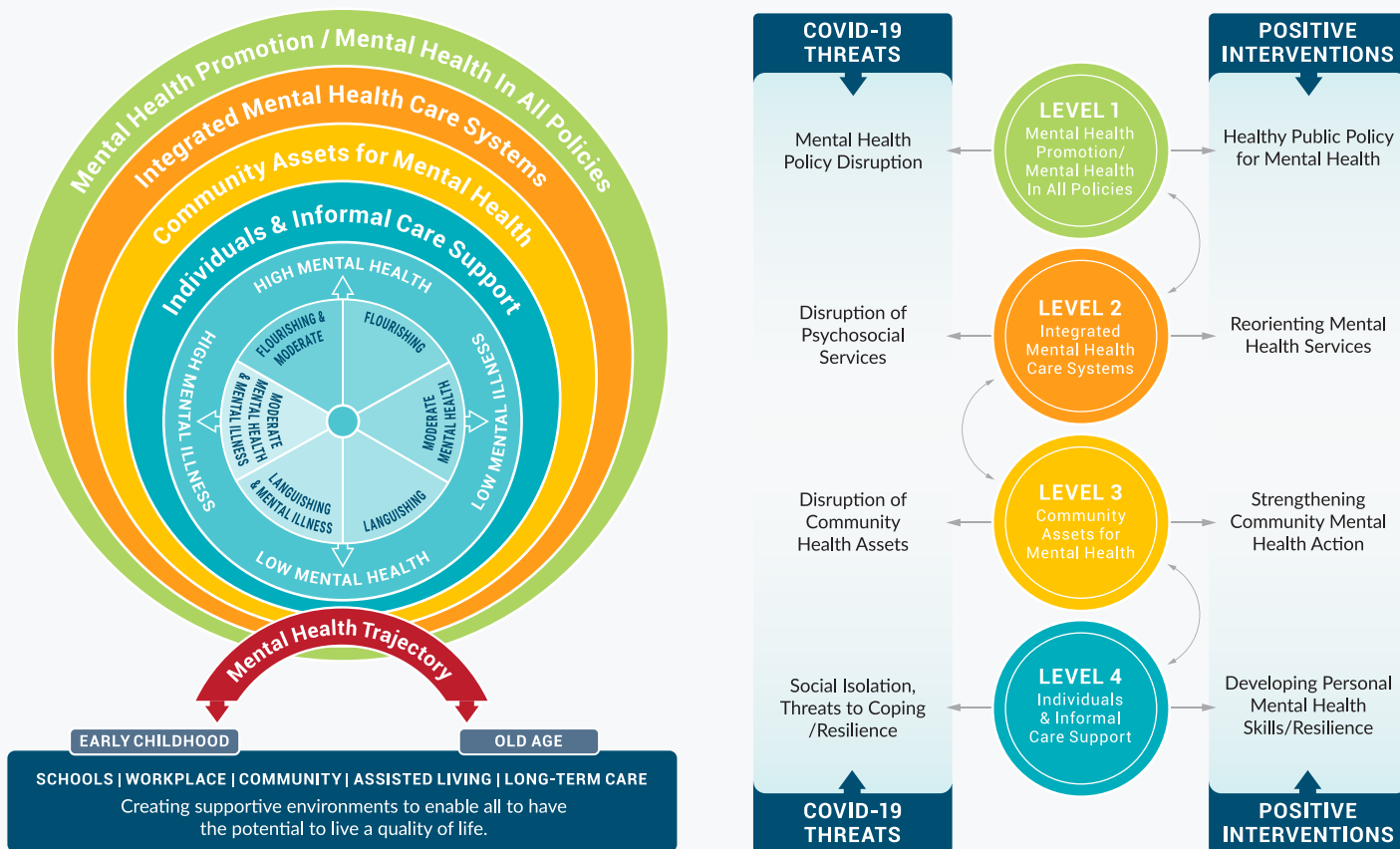
Everyone - whether diagnosed with a mental health condition or not - has the potential to live a flourishing, joyful life.[6] Different policies, programs, and efforts can be instituted to strengthen mental health assets. Mental health promotion focuses on Level 1 to Level 4 activities, that can help people build capacity to enjoy life, achieve goals, contribute to community, deal with life's inevitable challenges, and form and sustain relationships with others. Although interventions tailored to respond specifically to COVID-19 and its threat to mental health are needed, we should not lose sight of the fact that the underlying foundations of the effective implementation of these interventions, especially for those who are relatively vulnerable to higher risks to their mental health, are built upon the fundamental, multi-level societal and institutional capacities for mental health flourishing identified in the framework.

To foster mental health consider prerequisites to health: peace, shelter, education, food, income, a stable eco-system, sustainable resources, social justice, and equity.

LEVEL 1

MENTAL HEALTH PROMOTION/MENTAL 'HEALTH IN ALL POLICIES' (HIAP) *Healthy Public Policy for Mental Health*

Five simple rules to initiate mental 'Health in All Policies' (HiAP) and highlight the importance of mental health promotion, health equity, and inequality include: [1,2,5]

1. Developing a shared language and fluency of 'health' to include well-being, happiness, and general welfare

2. Linking evidence for how HiAP initiatives can contribute to sustainable economies and health systems

3. Having an 'entry point' to initiate an HiAP agenda

4. Developing 'win-win' scenarios, goals and objectives across sectors

5. Building and fostering long-term collaborative partnerships and engagement with intersectoral stakeholders

These actions have the potential to improve well-being, coping, and resilience as well as reduce harms from substance misuse as well as incidence of mental illness and suicide.

LEVEL 2

INTEGRATED MENTAL HEALTH CARE SYSTEMS *Reorienting Mental Health Services*

Public policy can shape the regulatory, legislative, and financial context to transform health and social services. There is a need to develop *integrated, collaborative systems of health and social care* to address increasingly complex needs such as an ageing population and multimorbidity of chronic diseases. Comprehensive primary health care[8] is the overarching framework for efficiently, effectively, and equitably organizing health and social services to produce optimum health in populations.

LEVEL 3

COMMUNITY ASSETS FOR MENTAL HEALTH *Strengthening Community Mental Health Action*

By helping to *co-create, strengthen and sustain community mental health assets*, people can be empowered to help co-produce and shape the mental health services they receive in community through context-appropriate co-produced mental health service planning.

LEVEL 4

INDIVIDUALS, FAMILIES, AND INFORMAL SUPPORTS *Developing Personal Health Skills/Resilience*

Resources and interventions such as self-aid, mutual aid, and peer support, that can strengthen individual coping skills, resilience, and mental health and to prevent the worst impacts of mental illness.

The COVID-19 pandemic has highlighted the importance that there be better 'links' across systems levels-from individuals to policy-makers. The following five mechanisms have been identified as necessary for the operation of many of the interventions that promote mental health.
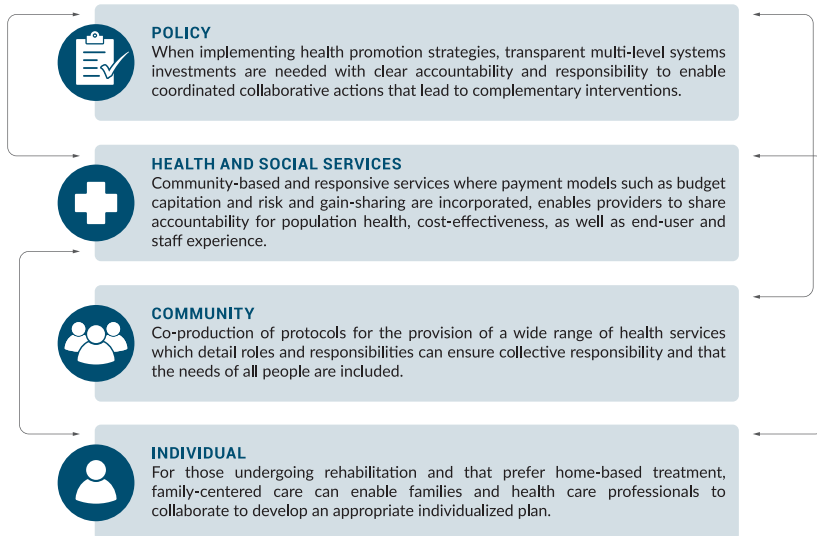
TRUST AND FEEDBACK

Trust and feedback refers to the establishment and maintenance of relationships between people and organisations that are open and honest, as well as the role of history and pre-context.[9] Trust may be a key for specialised care and active monitoring for vulnerable individuals that utilize pre-existing caring relationships. For example, older individuals with serious mental health illness, may face barriers in accessing to health care services. Social workers could draw upon the relationships they already have and their skills in care coordination, to collaborate with individuals to develop appropriate support, and also help mental health professionals to develop their skills.[10] Trust and feedback may also help to identify gaps in services or where additional intervention and support may be needed.

POLICY
To reduce public distrust of government and corporate led initiatives, multi-agency collaborations can work with communities and their primary health care services to form partnerships with respected members of the target community and identify stressors and responses.

HEALTH AND SOCIAL SERVICES
For individuals with complex health needs, co-delivery of services via Multi-Disciplinary Teams with community providers could establish trust between health care providers and vulnerable communities and provide continuity of relationships and care.

COMMUNITY
When trying to form new services, drawing on established networks to carry out co-production can harness community mistrust of efforts to coproduce services to encourage honest feedback on engagement efforts.

INDIVIDUAL
For those who are unaware of the changing COVID situation, information provided in different ways by workers who already have a relationship with the person may be more trusted and encourage them to follow appropriate guidance and access services.
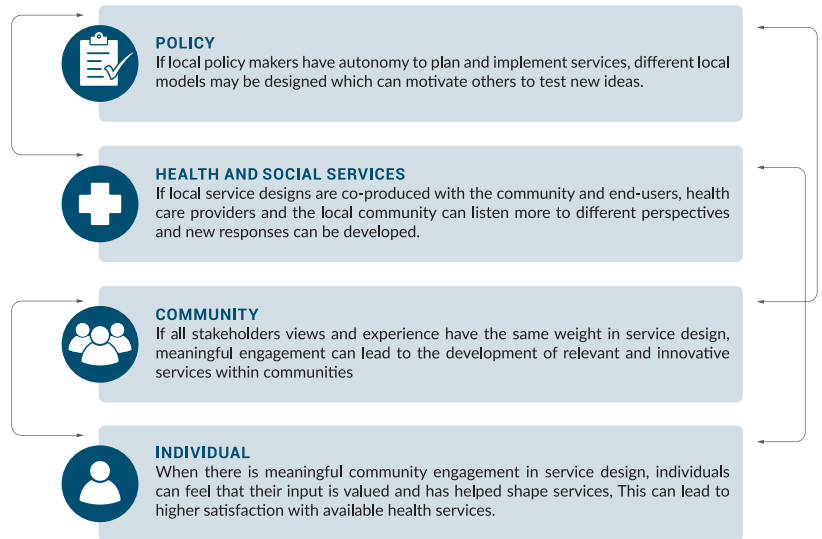
ACCOUNTABILITY AND RESPONSIBILITY

Multi-level health care provision which enable people and organisations to take responsibility for services and actions on a local level in conjunction with shared accountability and oversight across levels,[11] may be particularly important for interventions that involve services delivery at different levels and locations, such as rehabilitation planning and care from hospital to home care.[12] This may foster family-centered care, where health care team members and the family can share decision making and planning to provide appropriate care for an individual.[13] It is important that there are clear roles and responsibilities to encourage the diffusion of responsibility and encourage 'buy in' of stakeholders, but with oversight to avoid dilution of accountability.

POLICY
When implementing health promotion strategies, transparent multi-level systems investments are needed with clear accountability and responsibility to enable coordinated collaborative actions that lead to complementary interventions.

HEALTH AND SOCIAL SERVICES
Community-based and responsive services where payment models such as budget capitation and risk and gain-sharing are incorporated, enables providers to share accountability for population health, cost-effectiveness, as well as end-user and staff experience.

COMMUNITY
Co-production of protocols for the provision of a wide range of health services which detail roles and responsibilities can ensure collective responsibility and that the needs of all people are included.

INDIVIDUAL
For those undergoing rehabilitation and that prefer home-based treatment, family-centered care can enable families and health care professionals to collaborate to develop an appropriate individualized plan.
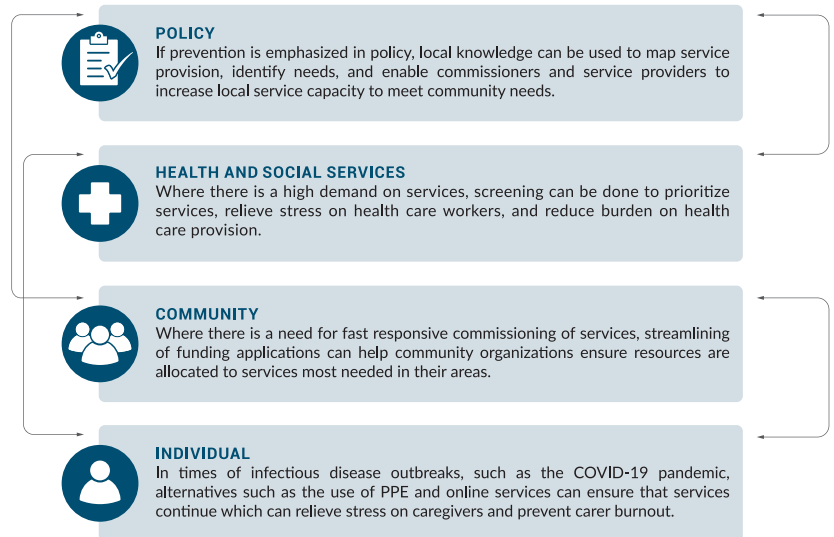
POWER

Those who are enabled to make decisions around commissioning and designing services have decision making power.[14] For meaningful community engagement and decision-making, this power needs to be equally distributed between partners on different levels. Co-production and design are an effective way of adapting services to meet the needs of specific populations and contexts[15] such as the adaption of telehealth services to meet the needs of people with assisted living needs.

POLICY
If local policy makers have autonomy to plan and implement services, different local models may be designed which can motivate others to test new ideas.

HEALTH AND SOCIAL SERVICES
If local service designs are co-produced with the community and end-users, health care providers and the local community can listen more to different perspectives and new responses can be developed.

COMMUNITY
If all stakeholders views and experience have the same weight in service design, meaningful engagement can lead to the development of relevant and innovative services within communities

INDIVIDUAL
When there is meaningful community engagement in service design, individuals can feel that their input is valued and has helped shape services, This can lead to higher satisfaction with available health services.
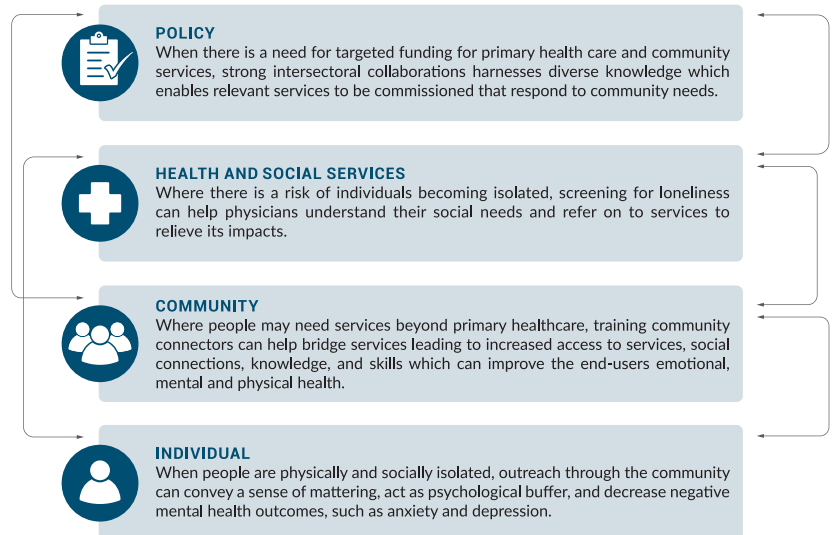
RESILIENCE

Resilience, which is the ability to respond effectively to challenges,[16] is necessary across all system levels. Public health challenges, such as the COVID-19 pandemic, may require specific resilience building programmes, particularly for those identified as potentially being vulnerable to loneliness.[17] For example, telehealth services provided to individuals when in-person services cannot operate may help to provide social support to isolated individuals,[18] and potentially help those with substance use issues to limit intake.[1]

POLICY
If prevention is emphasized in policy, local knowledge can be used to map service provision, identify needs, and enable commissioners and service providers to increase local service capacity to meet community needs.

HEALTH AND SOCIAL SERVICES
Where there is a high demand on services, screening can be done to prioritize services, relieve stress on health care workers, and reduce burden on health care provision.

COMMUNITY
Where there is a need for fast responsive commissioning of services, streamlining of funding applications can help community organizations ensure resources are allocated to services most needed in their areas.

INDIVIDUAL
In times of infectious disease outbreaks, such as the COVID-19 pandemic, alternatives such as the use of PPE and online services can ensure that services continue which can relieve stress on caregivers and prevent carer burnout.

SOCIAL CONNECTEDNESS

Social connectedness, which refers to the links between people across all socio-ecological levels, may be particularly important for older adults.[20] It may be enabled through individuals and communities taking part in co-production activities and may increase community and individual resilience. Social prescribing, a way of linking people who access primary care to supports within the community to help improve their overall health and wellbeing,[21] may foster social connectedness. Social prescribing relies on connections between primary health care and the community[22] and responsive funding from a policy level. Social connectedness may be developed through a better understanding of which services are needed within communities as well as collaborative partnerships among those involved in the delivery health care and those who access health care services.

POLICY
When there is a need for targeted funding for primary health care and community services, strong intersectoral collaborations harnesses diverse knowledge which enables relevant services to be commissioned that respond to community needs.

HEALTH AND SOCIAL SERVICES
Where there is a risk of individuals becoming isolated, screening for loneliness can help physicians understand their social needs and refer on to services to relieve its impacts.

COMMUNITY
Where people may need services beyond primary healthcare, training community connectors can help bridge services leading to increased access to services, social connections, knowledge, and skills which can improve the end-users emotional, mental and physical health.

INDIVIDUAL
When people are physically and socially isolated, outreach through the community can convey a sense of mattering, act as psychological buffer, and decrease negative mental health outcomes, such as anxiety and depression.

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