

Mental health and psychosocial support during the COVID-19 Pandemic

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74th World Health Assembly Decision on Mental Health as integral component of Public Health Emergencies

Response and Preparedness

Mental Health Action Plan 2013-~~2020~~ 2030

Appendix I and II

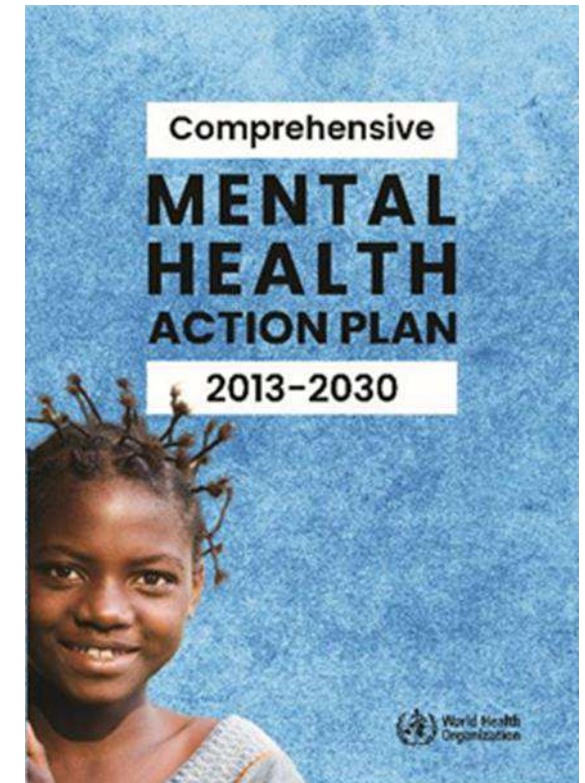
Appendix I - Indicators for measuring progress towards defined targets of the comprehensive mental health action plan

Appendix II - Options for the implementation of the comprehensive mental health action plan

The target rate of suicide reduction has been increased from by 10% by 2020 to by one third by 2030.

A new target (Target 3.3): “50% of countries will have a system in place for mental health and psychosocial preparedness for emergencies/disasters by 2030.”

A new target (Target 4.2) that commits to a doubling of the output of global research on mental health, measured by the number of published articles, and verified by centrally conducted literature searches, stratified by country of origin every two years.



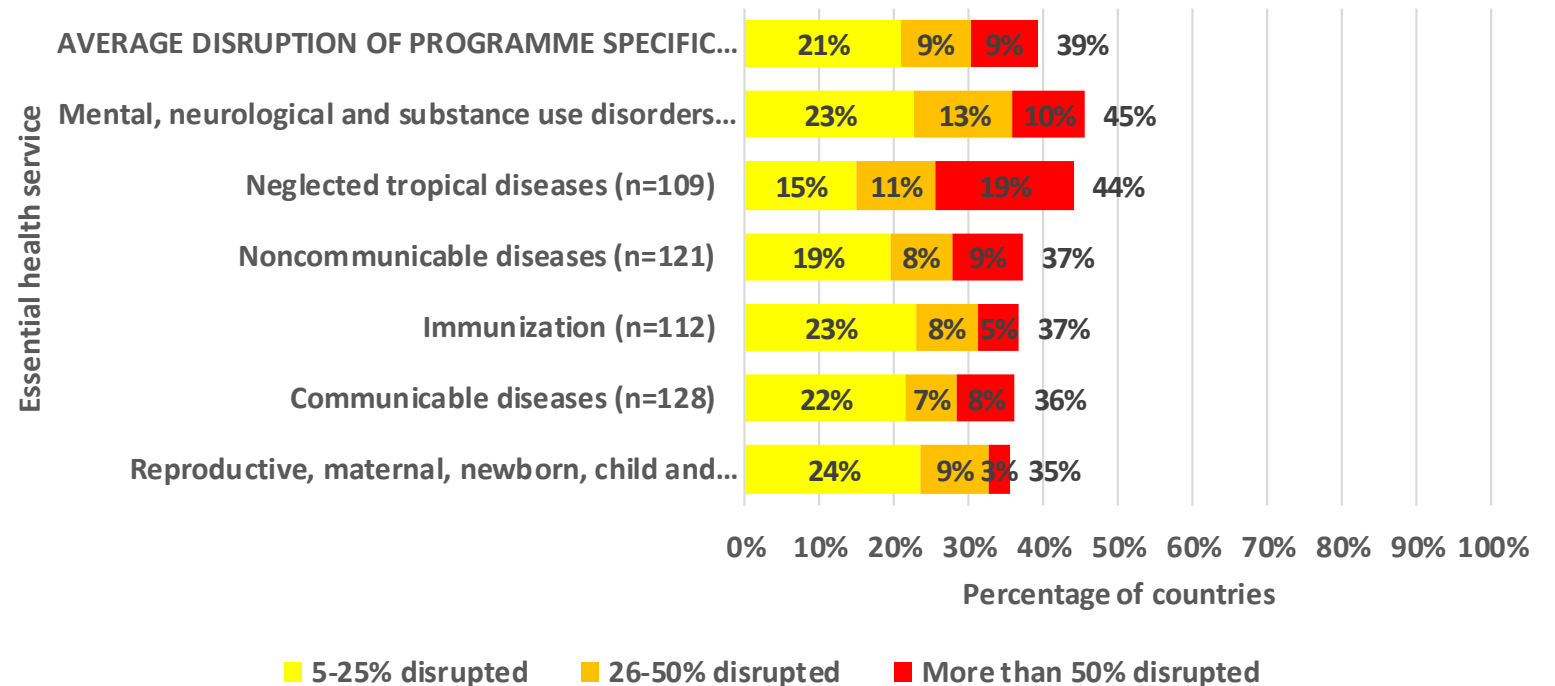
Substantial disruptions span across all major health areas

Mental, neurological and substance use is the most common service to be reported as disrupted

>40% Most frequently disrupted services are for mental, neurological, and substance use disorders and neglected tropical diseases

>1/3 Services across other health areas are also disrupted in more than 1/3 of countries

Percentage of countries reporting disruptions across tracer service areas



Disruptions to mental, neurological and substance use disorders (MNS) span the full continuum of care

School mental health programmes (66%) and psychotherapy, counselling and psychosocial intervention (54%) are among the most predominantly disrupted services across all service areas



From prevention and promotion: school mental health programmes and suicide prevention programmes



To diagnostics and treatments: neuroimaging and neurophysiology, psychotherapy, counselling and psychosocial interventions, and prescriptions

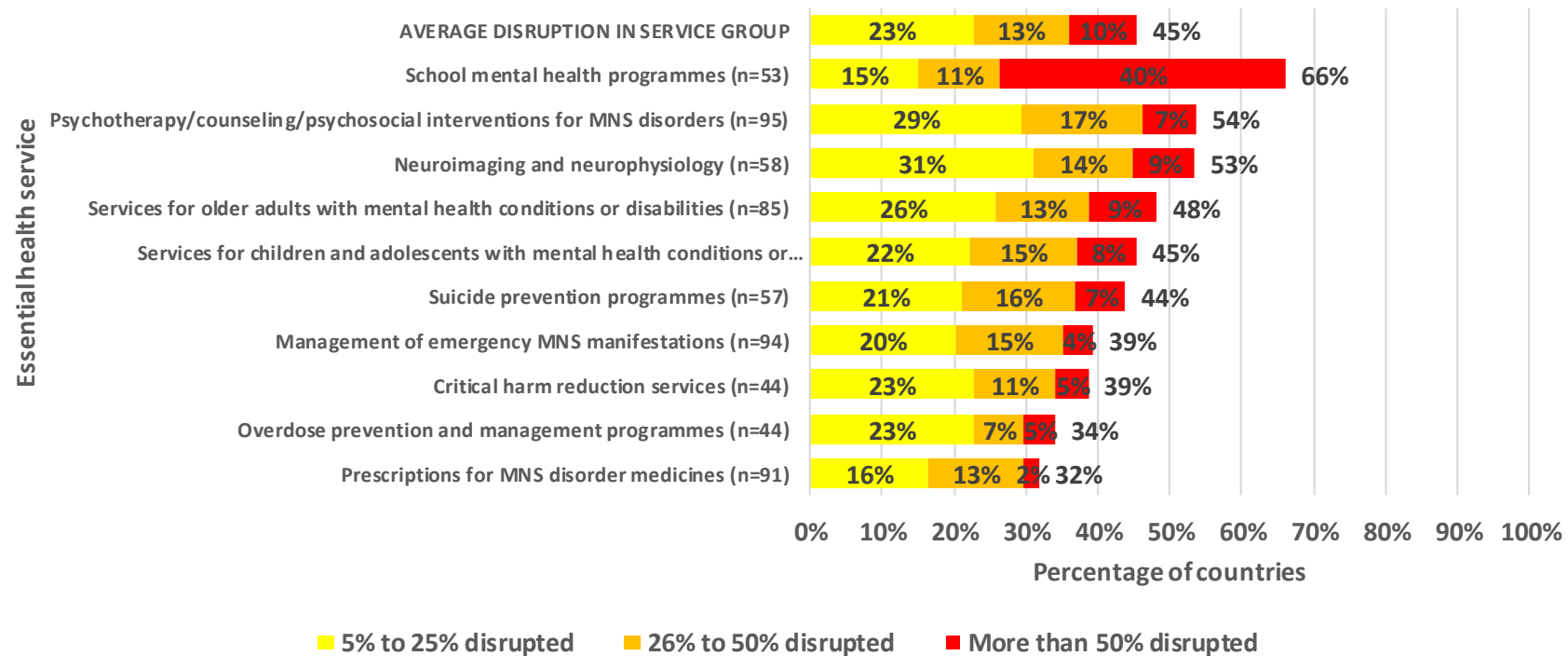


For life-saving emergency care: management of emergency MNS manifestations, critical harm reduction services, overdose prevention and management programmes



For the most vulnerable populations: older adults, children, and adolescents with mental health conditions or disabilities

Percentage of countries reporting disruptions in services for mental, neurological and substance use disorders



Mental health and psychosocial support (MHPSS) as part of national COVID-19 response plan

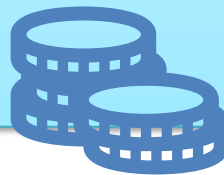
90%

of countries report that MHPSS is part of the national COVID-19 response plan (n=120)



49%

of countries report that additional funding has been allocated for MHPSS for COVID-19 response plan
(20% reporting fully funded, and 29% reporting partial funding)
(n=108)

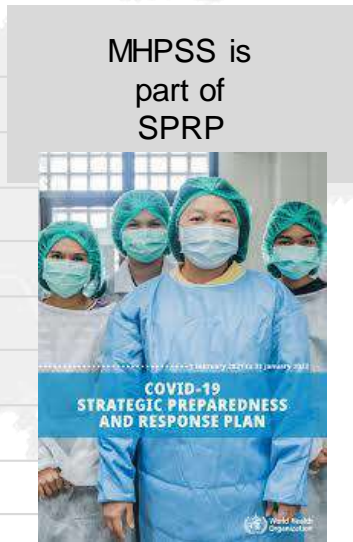


82%

of countries have implemented one or more activities as part of MHPSS COVID-19 response plan, most frequently (n=108):

- Orienting responders to MHPSS (82%)
- Providing MHPSS services to people in COVID-19 treatment centres, isolation and quarantine (79%)
- Distributing info on MHPSS services, coping strategies, and updates (78%)
- Protecting mental health and well-being of responders (73%)
- Minimizing risk of infection for people in mental hospitals (71%)
- Care for people with existing MNS conditions induced/exacerbated by COVID-19 (71%)

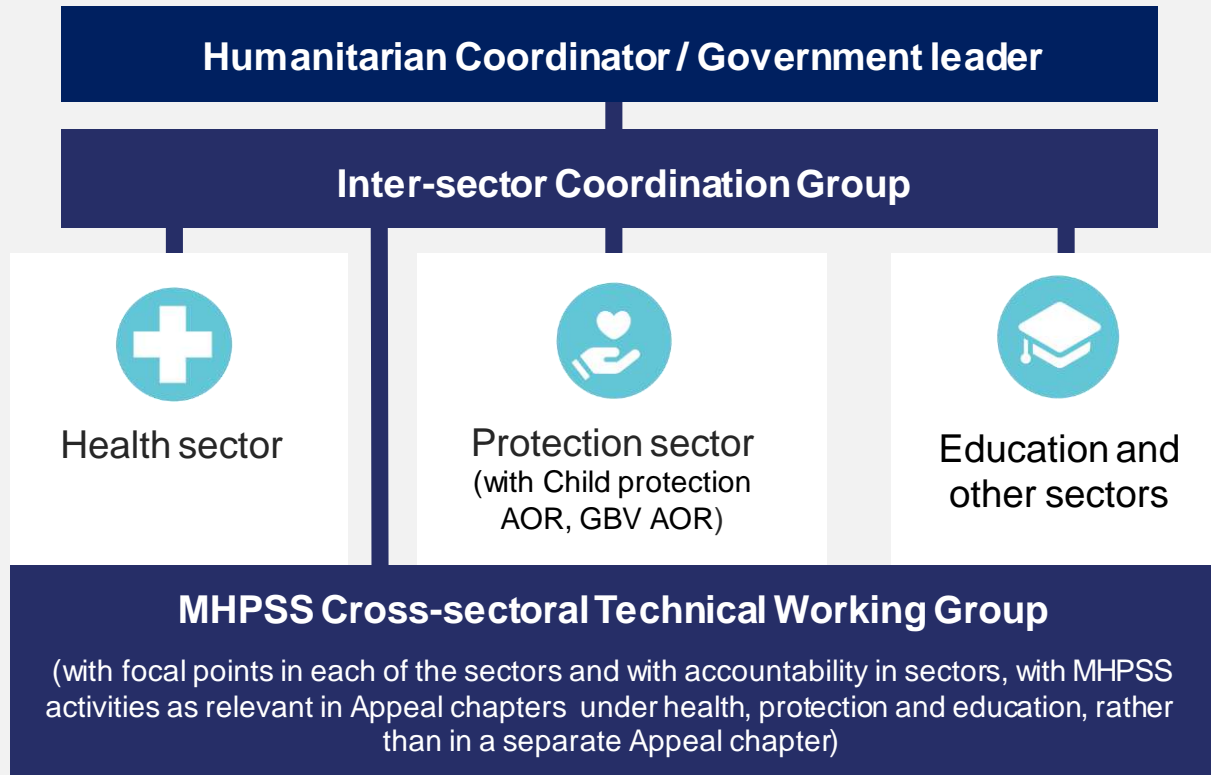
Number of countries with multisectoral MHPSS Technical Working Groups in humanitarian settings increased more than two folds last year



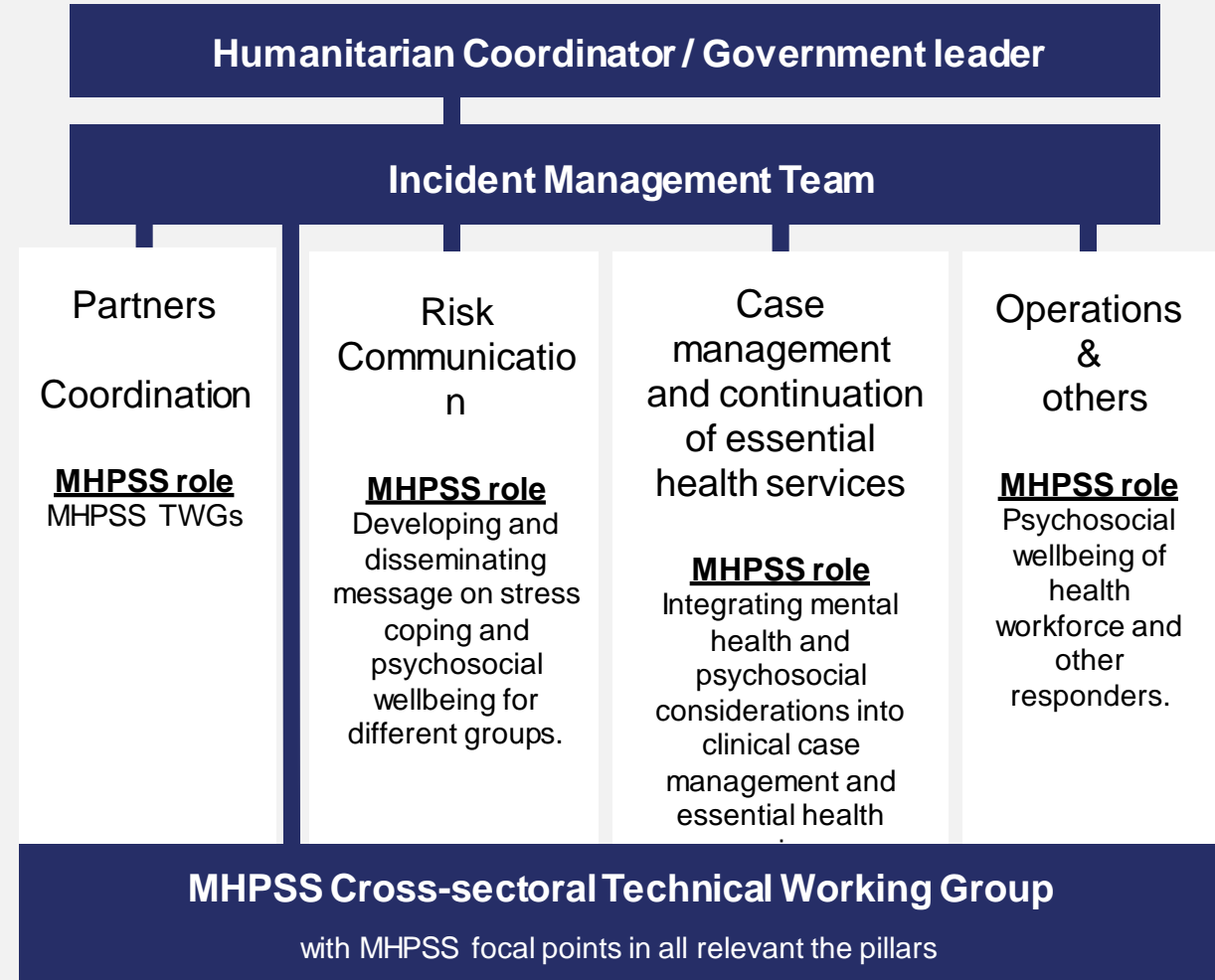
MHPSS as crosscutting issue in humanitarian emergencies and in Public Health Emergencies



Agreed Coordination Model for MHPSS in Humanitarian Crises



Coordination Model for MHPSS in WHO Public Health Emergencies



Explanation of MHPSS coordination in humanitarian crises

- Field has a history of separate coordination groups (eg separate mental health group under health cluster and psychosocial group under child protection)
- The shown organogram is the one that has emerged over time as the one that works best.

Highlights of Inter-Agency Mental health and psychosocial support during COVID-19 Pandemic



28 TC calls for global MHPSS focal points from Member Agencies

11 TC calls for Chairs of Country- Level MHPSS Technical Working Groups.



MHPSS in Global Humanitarian Overview

For the first time, an overview of global MHPSS needs was included in the Global Humanitarian Overview. (December 2019)



MHPSS as cross-cutting issue (IASC)

The Principals of IASC, formally recognized MHPSS as a cross-cutting issue that has relevance within health, protection, nutrition, education and Camp Management and Coordination sectors/clusters, in all emergencies (5 December 2019) and in Joint Interagency Call for Action



MHPSS in High-level meetings and the

Dedicated sessions on MHPSS in Global Refugee Forum (December 2019), Humanitarian Networks and Partnerships Week (February 2020), ECOSOC Humanitarian Affairs Segment (June 2020), UN General Assembly (September 2020).



Rapid deployment mechanism for MHPSS coordination

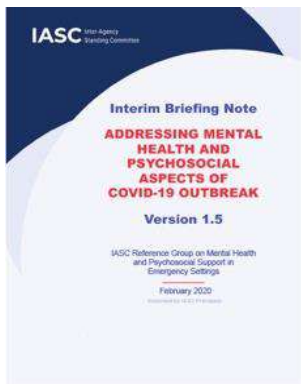
Inter-agency rapid deployment mechanism for MHPSS coordination (Dutch Surge Support MHPSS funded by the Government of the Netherlands) started. Throughout 2020, IOM, UNHCR, UNICEF and WHO hosted deployed in 15 countries.

Highlights of Inter-Agency Mental health and psychosocial support during COVID-19 Pandemic

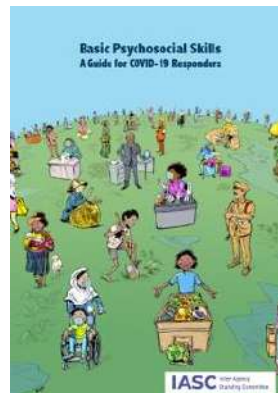
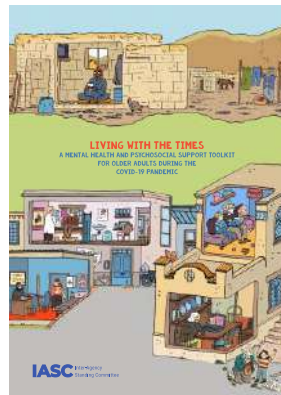


MHPSS Practical Tools

Dozens of humanitarian agencies united in the IASC MHPSS Reference Group, developed practical tools to assist the integration of MHPSS in the response to the COVID-19 pandemic.



In 23 languages



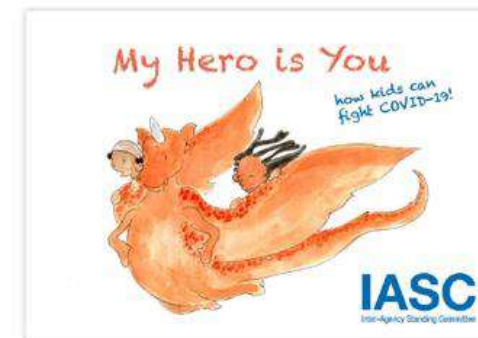
In 34 languages



In 8 languages



In 10 languages



In 143 languages

Highlights of Inter-Agency Mental health and psychosocial support during COVID-19 Pandemic



MHPSS in GHRP for COVID-19

The Global Humanitarian Response Plan for COVID-19 (May 2020) included MHPSS as a cross-cutting issue linked with activities to be implemented by UNHCR, UNICEF, UNFPA, IOM, UNRWA and WHO.



MHPSS monitoring indicators

MHPSS monitoring indicators included for the first time in humanitarian multilateral response plans. The COVID-19 Strategic Preparedness and Response Plan, Global Humanitarian Response Plan for COVID-19 and the UN Framework for the Immediate Socio-economic Support to COVID-19, all have MHPSS indicators.



UN Policy Brief – COVID-19/ Mental Health

The UNSG, issued a UN Policy Brief on COVID-19 and the need for Action on Mental Health in which he urges Member States, UN Agencies and NGOs to integrate MHPSS within the COVID-19 response and to ensure availability of emergency mental health and psychosocial support.



WHO Executive Board Decision on MH in Public Health Emergencies 2021



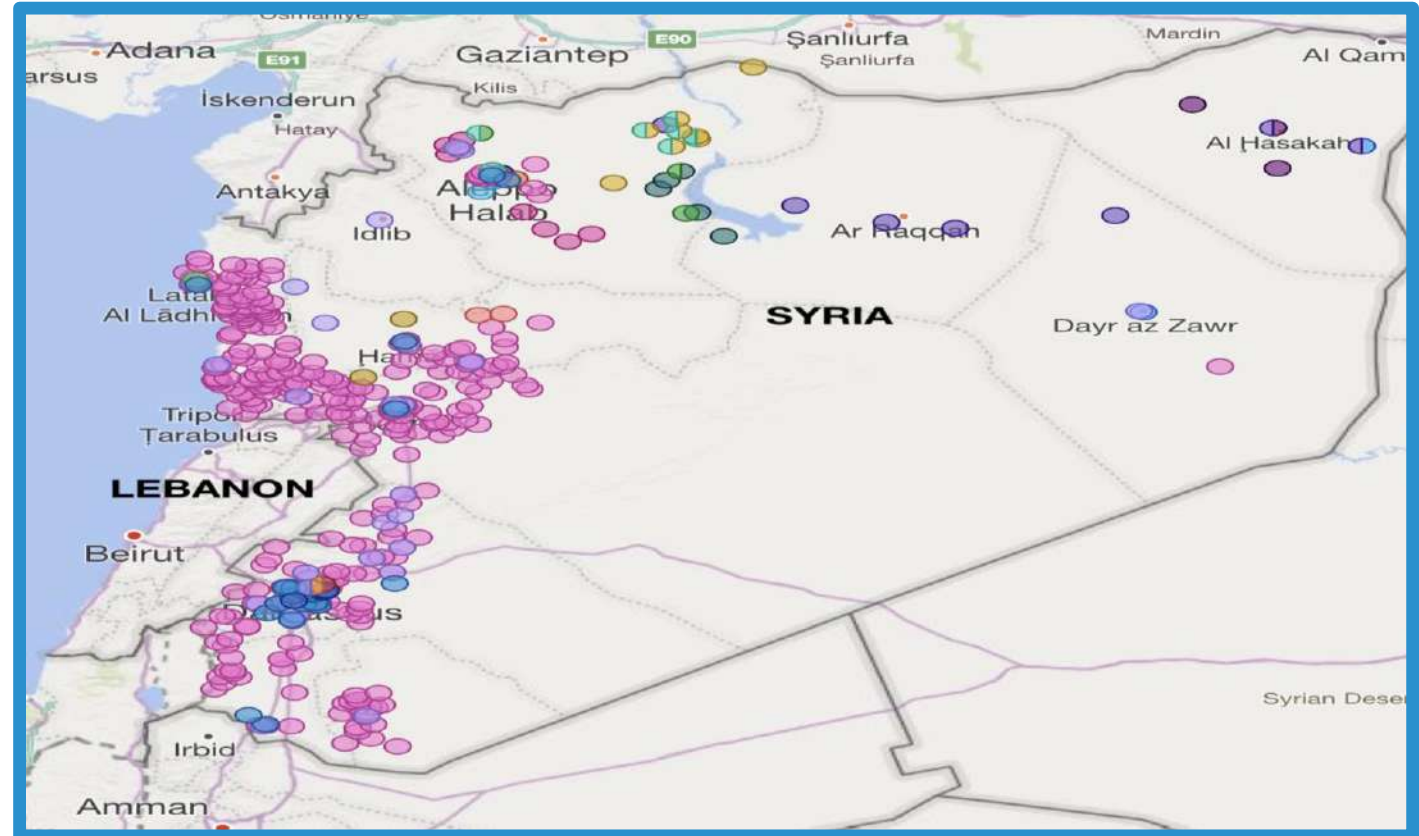
MHPSS in 89% countries COVID-19 country response

A WHO assessment report showed that out of 130 countries, the vast majority (89%) of countries reported that MHPSS is part of their national COVID-19 response plans. AND number of country-level multi sectoral coordination groups for MHPSS in humanitarian settings doubled from 22 countries in March 2020 to 50 countries in November.

Collaboration between MHE and WHE in scale up of MHPSS country operations

Examples of concrete achievements:

- 1 in 4 of every in Syria have mental health integrated. MHPSS services in Syria established in 13 cities compared to two cities in 2011.
- Expansion of service in South Sudan outside Juba to include PHC centers in 7 South Sudanese states.
- Development of 2 years proposal in Libya funded by DFID to scale up mental health system at PHC level.
- Scale up of community-based services through mobile teams in conflict affected areas in Ukraine



Primary Health Care Centers in Syria with one person trained and system in place providing mental health care

Through WHE funds MSD worked in 2020-2021 on integrating MHPSS in COVID-19 activities, publications and pillars

Launch of MHPSS Clinic
for live Q and A with
Health Cluster Partners



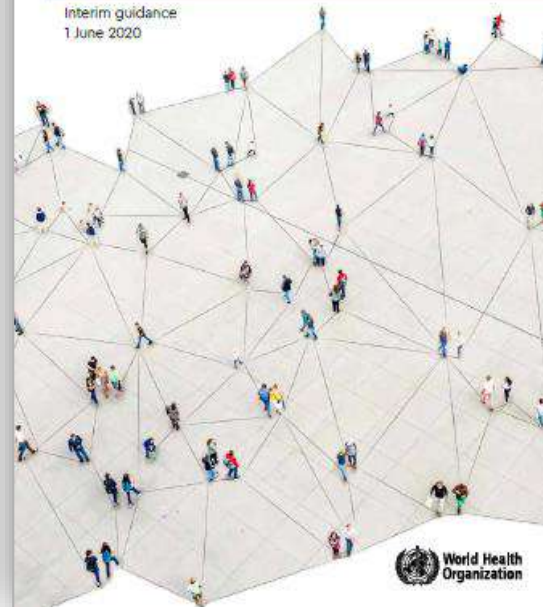
The impact of COVID-19 on mental, neurological and substance use services:

results of a rapid assessment



Maintaining essential health services: operational guidance for the COVID-19 context

Interim guidance
1 June 2020



Clinical management of COVID-19

Interim guidance
27 May 2020

Launch of full package with Means of Verification



World Health
Organization

Coming soon

#1

For first time collective impact of MHPSS at country level can be measured through common data collection tools.

**A Common
Monitoring and
Evaluation
Framework for
Mental
Health and
Psychosocial
Support in
Emergency
Settings**

IASC
Inter-Agency Standing Committee
IASC Balance group for mental health and
psychosocial support in emergency settings

Field test version



WHE OPENWHO Training Platform: An online course for WHE Staff on MHPSS

Coming soon

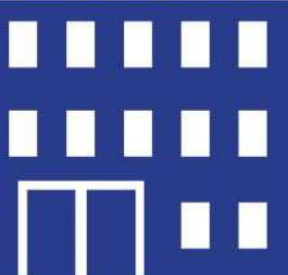



World Health
Organization

Based on a recommendation from WHO Health Security Council in 2019 and DG message to RDs in April 2020, MSD is working with WHE for development of an online training platform for humanitarian health actors including WHE Staff.

The course will be launched in 2021.

ACADEMY



**World Health Organization**


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Introducing Mental Health and Psychosocial Support (MHPSS) in Emergencies

Course Administration

In preparation

Learnings Discussions Progress Certificates Collab Space Course Details Documents Announcements



This will be an online orientation course for strengthening the competencies of health sector actors working in emergencies to establish, support and scale up MHPSS in countries. The focus will be on how to apply existing practical, evidence-based, scalable tools and practice-led approaches for successful implementation of projects to strengthen mental health and psychosocial support in emergencies operations, protection from mental health and psychosocial consequences of crises and towards the realization of universal mental health coverage. Through this training, the participants will learn about key approaches to advocacy and to identify entry points for mental health and psychosocial integration as an integral and cross-cutting component in public health emergency responses and in humanitarian emergencies. The training will also emphasize a focus on early recovery, highlighting WHO's past successes in building back better.

Photo credit: WHO Syria/ Photographer

Coming soon
Language: English
[Enroll me for this course](#)

Course information

Overview: This online orientation course aims for strengthening the competencies of health sector actors working in emergencies, to establish, support and scale up MHPSS in countries

Enroll me for this course

The course is free. Just register for an account on OpenWHO and take the course!

Minimum Service Package for Mental Health and Psychosocial Support (MSP)

Ongoing project pilot testing will start in 2021

Coming soon



World Health Organization

Need for the MSP

- Scale-up of services to address gap in MHPSS services and activities in acute and chronic emergencies.
- Accessible, practical guidance on which activities should be prioritised at a minimum.
- A way to estimate the costs of these activities, to facilitate quick resource mobilization



Government of the Netherlands



World Health Organization



Goals of the MSP

Maximize positive impact through:

- better-informed response based on best-available evidence
- more effective use of limited resources
- faster resource mobilization
- more predictable & better coordinated response
- easier division of tasks among implementing agencies
- easier to feed into HNO, HRP, etc.
- easier to advocate for MHPSS to donors

MSP is an approved WHO Global Public Health Good and informed by existing guidance and recommendations



Scaling-up Mental Health and Psychosocial Support (MHPSS) During and Following the COVID-19 Pandemic

North-East Nigeria



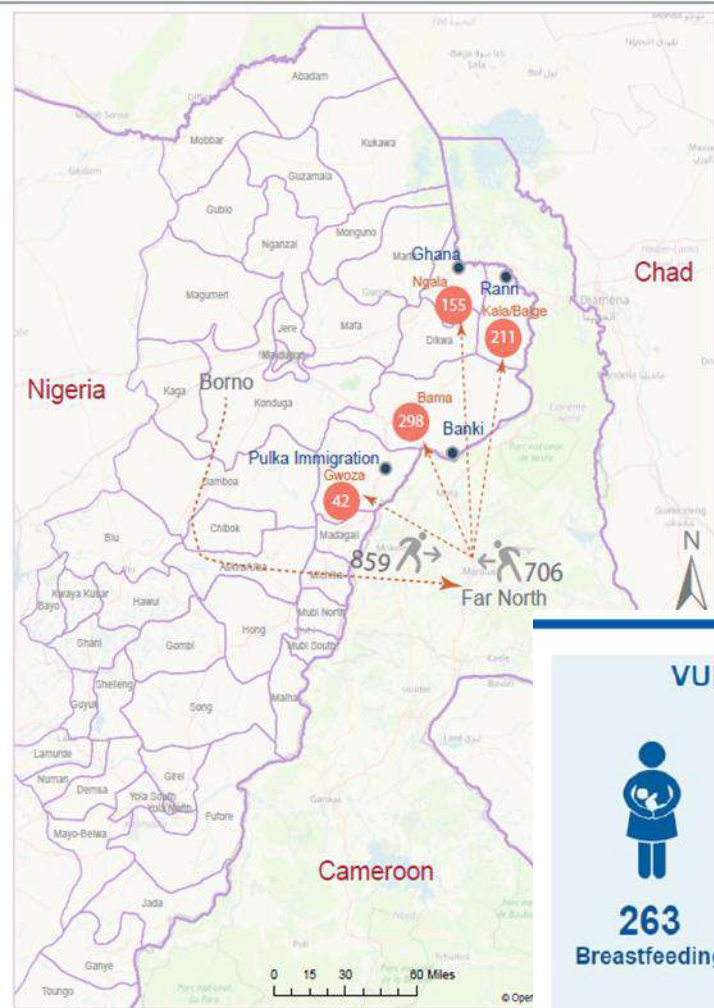
The Context of Crisis in Borno, Adamawa and Yobe States

The humanitarian crisis in Borno, Adamawa and Yobe states in North-East Nigeria is expected to persist in 2021. A total of 8.7 million people-in-need of humanitarian assistance in 2021 (*Humanitarian Response Plan 2021*)

Some 1.92 million people are displaced internally, and 257,000 living as refugees in neighbouring Cameroon, Chad and Niger. The majority (54%) of the internally displaced people (IDPs) are taking shelter across host communities. Borno State hosts 81% of the IDPs.

Issues of congested camps, increase of fire outbreak, flooding, lack of access to potable water, sanitation and hygiene, food insecurity, malnutrition, limited access to health facilities, multiple disease outbreaks, and increase of sexual violence and abuse.

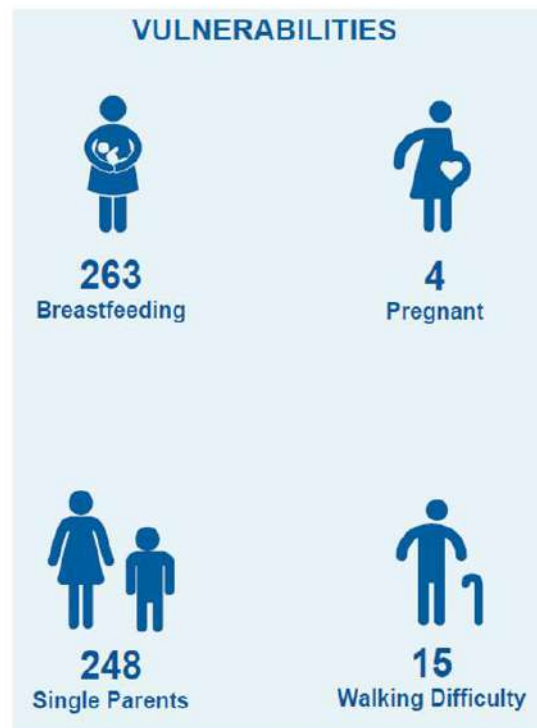
The Impacts on Mental Health and Psychosocial Well-Being



IOM DTM in collaboration with WHO and SMOH conducting monitoring the movements of individuals to and from Nigeria's conflict-affected States. Assessments are conducted at points of entry located along the border with Cameroon. The movement with various reasons: seasonal, family visit, economic migration, forced due to insurgency. Mode of transportation: 42,9 % by foot. (*COVID-19 Point of Entry Dashboard: North-East Nigeria Monthly Snapshot, May 2021*)

In 2020, among the reason of movement: due to fear of COVID-19 and health conditions.

It has major impacts for the overall living standards, physical and psychological wellbeing, and the capacity for resilience and having positive coping mechanisms of the IDPs, returnees and host communities.





COVID-19 Pandemic?

Anxiety, fear, confusion and frustration, worried about their own or the health of their family members, risk of contracting or transmitting COVID-19, cumulative of family tension, intimate partner violence or gender-based violence, not having access to food with issue of economic hardship or lack of livelihoods, limited access to the services including MHPSS, worried to visit the health care facilities due to high-level of stigmatization.



Multi-sectoral and coordinated responses, localization strategy or building on local capacity.

Collaboration Efforts to Provide and Scaling-Up Mental Health and Psychosocial Support

A momentum and the essential of localization strategy or build the capacity of local organizations to carry out the activity.

SMoH, WHO, IOM in collaboration with Government Agency and local partners, provided Psychological First Aid, community awareness and health and hygiene sensitization at the points of entry.

IOM conducted an assessment to gain insights about community perceptions of COVID-19 pandemic, the recommendations were shared in coordination meetings.

Various capacity building activities are organized for humanitarian partners, health workers, Government officials on different related-topics on MHPSS and COVID-19.

The Child Protection Sub-Sector in collaboration with the MHPSS WG developed a catalogue of activities and games which can be done at home, within the community or in child friendly spaces. It includes guidance on the level of person-to-person contact to take as a consideration before engaging children in activities.

Collaboration Efforts to Provide and Scaling-Up Mental Health and Psychosocial Support

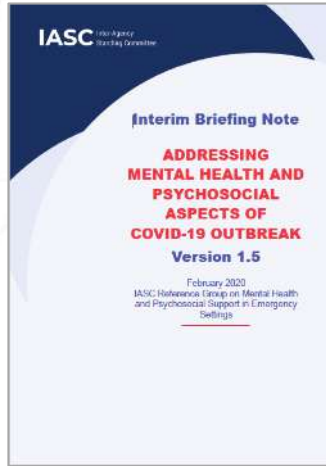


MHPSS partners carried out their MHPSS COVID-19 activities: house-to-house, phone consultation, PSS support group in a safe space with a smaller number of individuals, referral for specialized services for the areas that have ease lockdown regulations. Toll-free numbers (two different operators), managed by Médecins du Monde (MdM) supported by MHPSS partners.

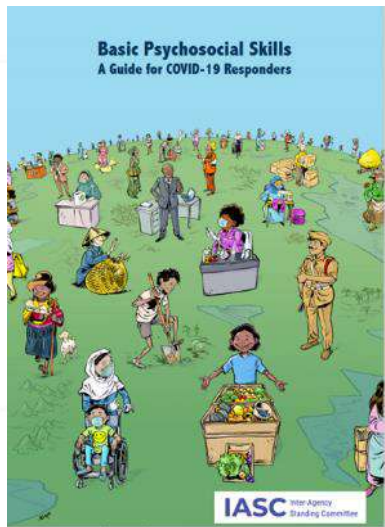


Deep concerns over loss of livelihood, increased of distress and anxiety that mainly resulting from socio-economic impact of COVID-19 related issues. Several MHPSS partners integrated MHPSS and livelihoods support in this current COVID-19 situation, through face mask production training. The livelihoods represent much more than income or employment, it is understood that livelihoods are a fundamental component of overall psychosocial well-being.

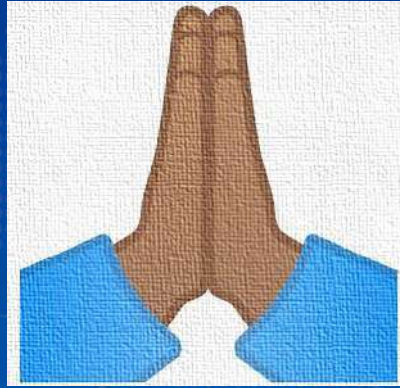
Collaboration Efforts to Provide and Scaling-Up Mental Health and Psychosocial Support Tools Developed by the IASC RG on MHPSS in Emergency Settings



- Borno State Ministry of Health COVID-19 Preparedness and Response Plan (March 2020).
- COVID-19 preparedness and response priorities for the ongoing humanitarian situation in North-East Nigeria.
- Multi-Sectoral Response Strategy COVID-19 North-East Nigeria.
- MHPSS partners to adjust the project proposals and MHPSS activities.
- National Interim Guidelines for Clinical Management of COVID-19 (Ver. 3 - June 2020).



- In collaboration with Translators Without Borders (TWB), My Hero is You, Storybook for Children on COVID-19 was translated into 9 local languages and IASC Guidance on Basic Psychosocial Skills A Guide for COVID-19 Responders was also translated into 3 main local languages.



Thank you!

Myanmar MHPSS TWG

With the onset of Covid-19 there were two identified needs.

- Capacity building on Basic Psychosocial Skills for first responders
- Adapting our activities and approach in order to reach persons of concern

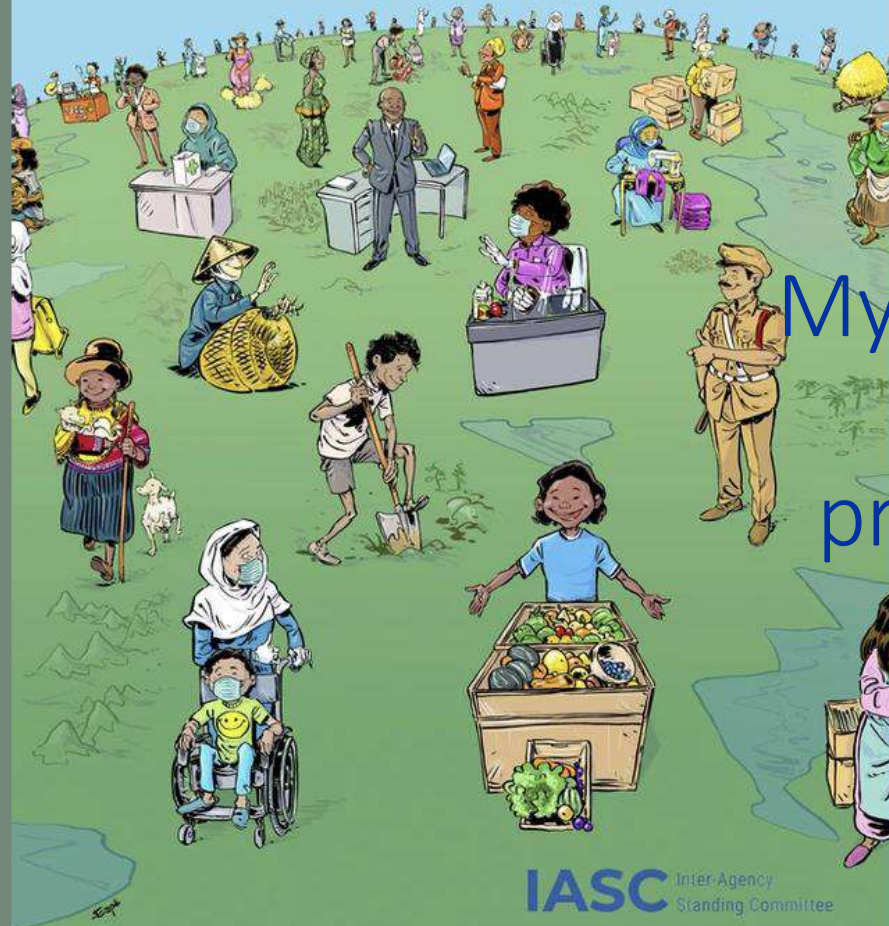
Basic Psychosocial Skills A Guide for COVID-19 Responders

Basic Psychosocial Skills A Guide for COVID-19 Responders



IASC Inter-Agency
Standing Committee

စိတ်လူမှုပိုင်းဆိုင်ရာ အထောက်အပံ့ပေးခြင်း
အခြေခံကျွမ်းကျင်မှုများ
ကိုဗစ်-၁၉ ကုံ့ပြန်ဆောင်ရွက်သူများအတွက်လမ်းညွှန်



IASC Inter-Agency
Standing Committee

တၢ်ဂ့ၢ်စီၣ်ထံးလၢအဘဉ်ဃးဒီးတၢ်သုတၢ်ဘၣ်
လၢတၢ်ကမၤစၢၤကမၤဃၢ်သးဂ့ၢ်ဝီၣ်ညါဒီး
တၢ်ရူၤလိာ်ဘဉ်ထွဲဒီးပုၤအတၢတတဖဉ်
တၢ်န့ၣ်ကျဲလၢပုၤမိၤဆၢ(Covid -19)တဖဉ်အဂီၢ်



IASC Inter-Agency
Standing Committee

Adapted 5
Myanmar language
versions and
provided training

MHPSS REFERRAL DIRECTORY

The MHPSS Referral Directory is a resource for field staff in Myanmar seeking organisations they can refer beneficiaries with MHPSS needs. Please find details organizations in each states below:



COVID-19
MHPSS REMOTE SERVICES

Find Referral



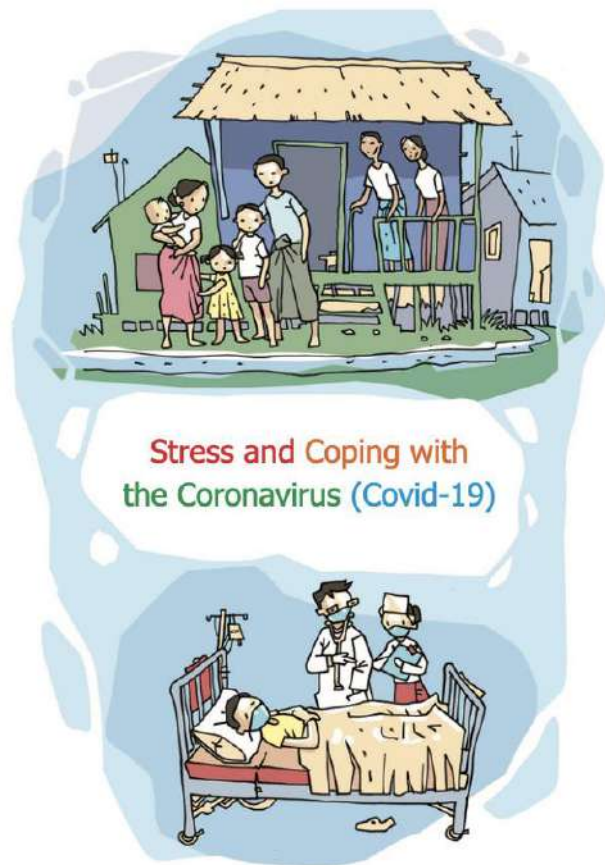
YANGON

Find Referral

Adapting our activities
and approach in order to
reach persons of concern

Mapping MHPSS Remote Services





Stress and Coping with
the Coronavirus (Covid-19)



Supporting Our Children's Well-Being
Booklet for Parents and Caregivers

International Organization for Migration &
Metanoia Mental Health Services & Resource Center



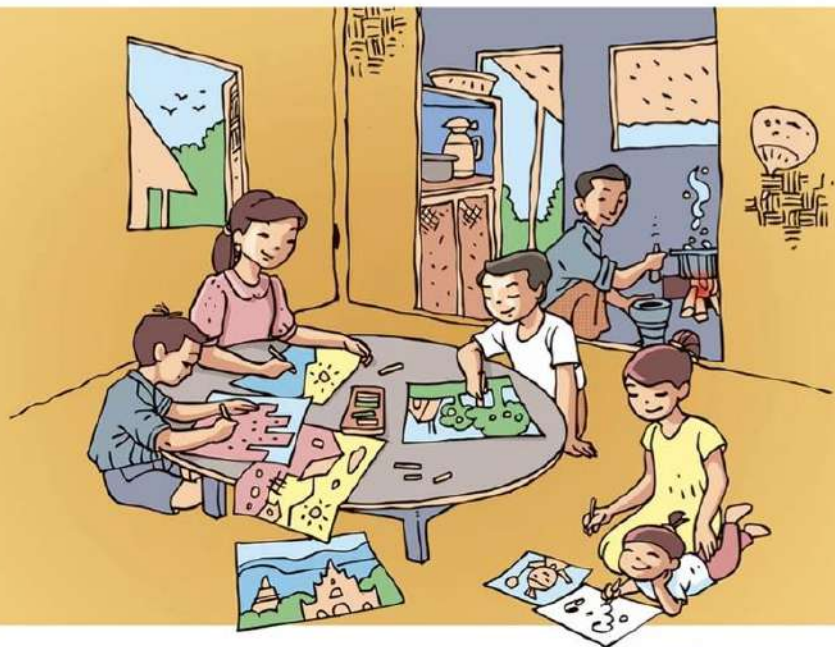
Adapting our
activities and
approach in order
to reach persons
of concern

Staying Safe, Happy, and Healthy

လုံခြုံ၊ ပျော်ရွှင်၊ ကျန်းမာစွာ နေထိုင်ပါ

Colouring Book for Children During the COVID-19 Outbreak

ကလေးငယ်များအတွက် ကိုဗစ်-၁၉ ကပ်ရောဂါကာလအတွင်း စိတ်အပန်းဖြေစရာ အရောင်ခြယ်စာအုပ်



USAID
FROM THE AMERICAN PEOPLE



MHF

Myanmar
Humanitarian
Fund



Adapting our
activities and
approach in order
to reach persons
of concern

Key Messages: Physical Distancing (safety & coping)



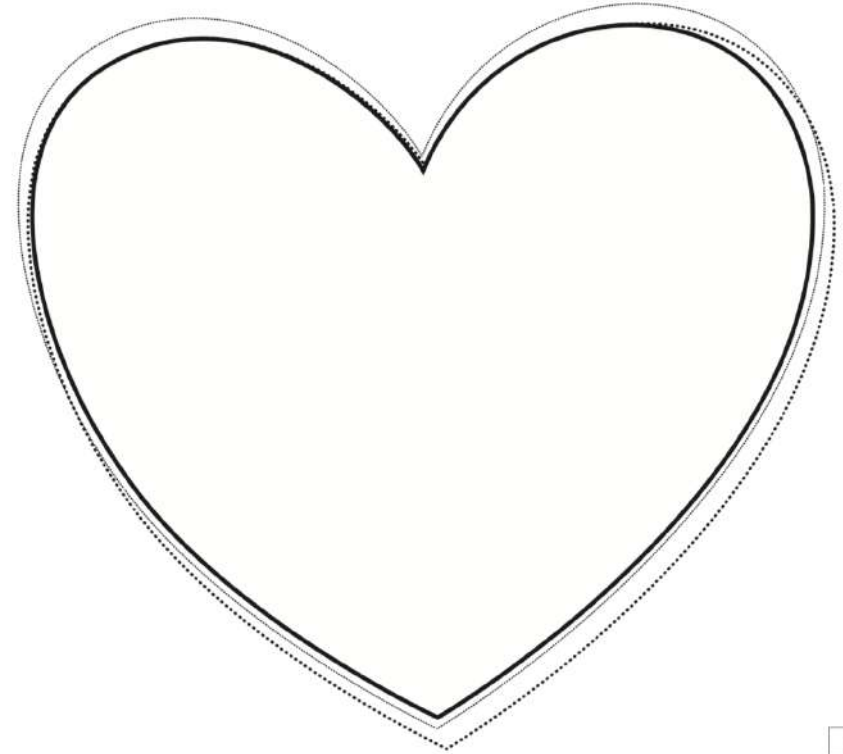
Because we care about our friends it is important
to **practice physical distancing** for now,
until it is more safe.

Key Messages: Physical Distancing (safety and coping)

We may be far from our friends
physically but we can still keep them
very close in our hearts.

Instructions:

You can draw and color the people
that you have inside your heart.

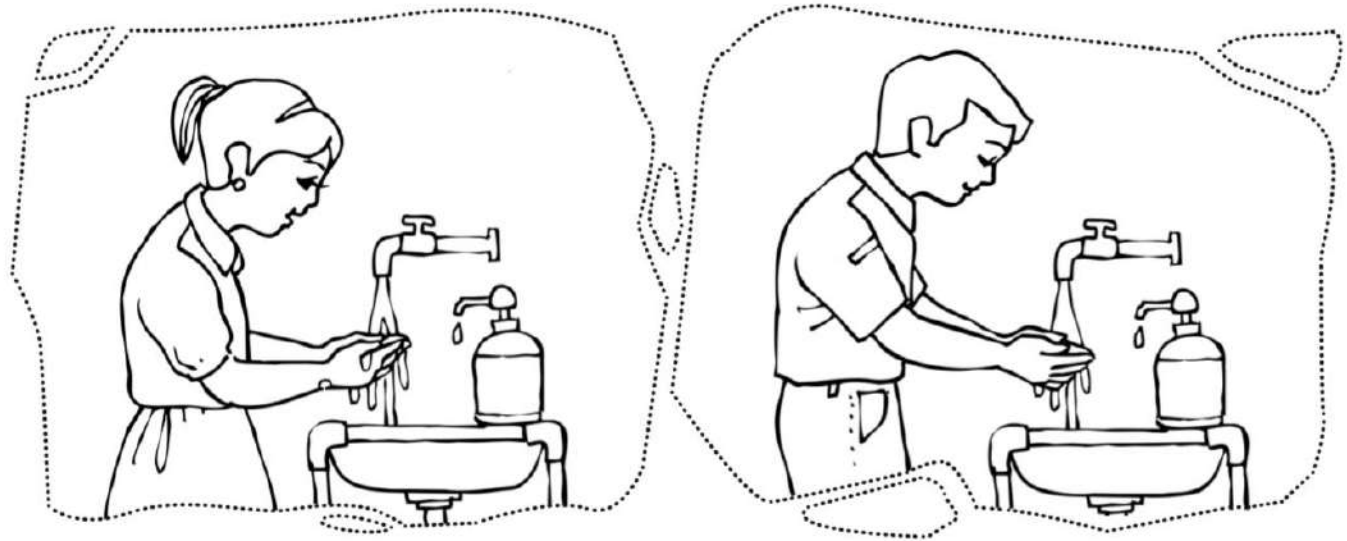


Key Messages: Hygiene

To protect the people we love,
let's **Cough** or **Sneeze** into our
bent elbow or into a **tissue**.



To protect ourselves and the people around us,
let's **wash our hands** frequently
with soap and water.



Key Messages: Psychosocial Activities and Coping Strategies



Let's feel better by
taking a **deep breath!**

Instruction:
Imagine taking a deep deep smell of
a sweet smelling flower.

And then,
imagine slowly blowing a big
bubble.





Key
Messages:
Well-Being
and Self
Care



Key
Messages:
Well-Being
and Self
Care

