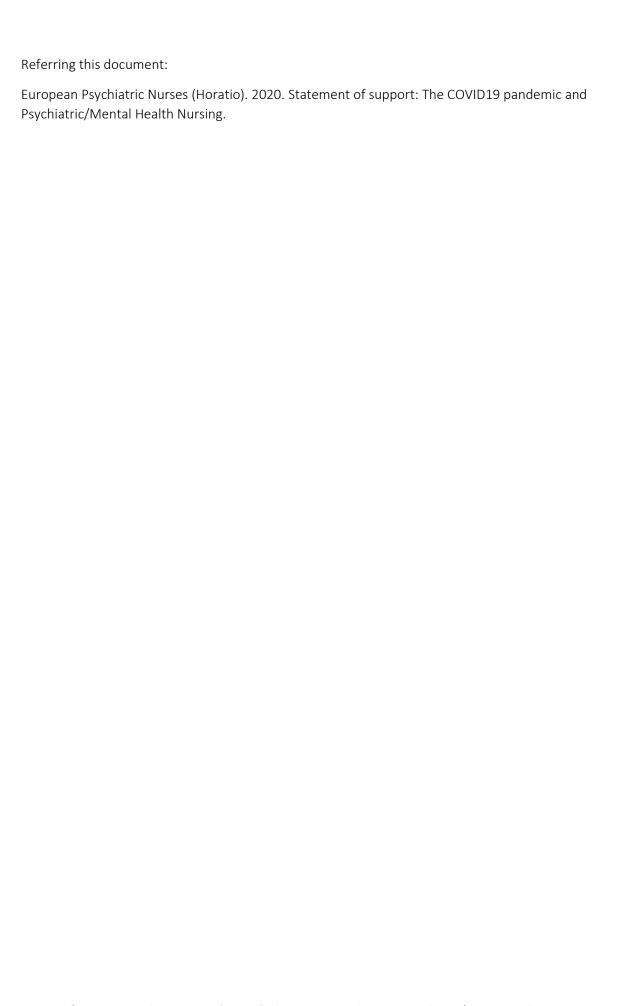


Statement of support

## The COVID19 pandemic and Psychiatric/Mental Health Nursing

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COVID19 pandemic has affected and will continue to affect significantly many individuals, families, communities and societies globally. One of the major concerns is the consequences of the pandemic for our mental health. Several risk factors, as well as protective factors, are already recognized and known but the burden is so high that it is impossible to do any definite, long term predictions. Time in the isolation itself has had its effect and the need for precautions in everyday life are emotionally burdensome and have had their consequences. Of course, the situation is more worrying for those individuals and their families with preexisting health and/or social problems.

Loneliness, worry, fear, unemployment, substance abuse and an increase in suicide and domestic violence, in some countries along with reported underutilization of mental health services are already serious warning signs and a true cry for help. It is also important to acknowledge that many people cope well and there is no need to medicalize all the reactions as a sign of a need for professional help; much could be done by supporting the informal support between people and by strengthening the resilience factors of individuals, families and communities. Also, in these promotive and preventive actions mental health understanding and knowledge as well as assessment skills are required.

Health professionals are facing a huge task to recognize and assess the need for professional help and mental health care. At the moment it is hard to predict how much more resources are needed in mental health services, but this situation will cause a need to strengthen these services as well as the mental health literacy and competence in primary health care, social services and in different other services where people reach for help. Nurses as the biggest professional group in health services, and especially psychiatric/mental health nurses, are in crucial role here.

In some countries, the underutilization of mental health services has been reported during the pandemic, which might reflect a hesitation to contact these services. This is a cause for concern especially in mental health out-patient and community services as the same mental health risks apply for all, but could have even more serious consequences for vulnerable groups, such as those with severe and enduring mental health problems, old people, adolescents and children. Of course, for some people isolation might have been a bit easier time with less need for social contacts, but in the long-term social isolation, loneliness and unmet caring needs are creating problems. In several mental health services, different remote and digital services have been used instead of face-to-face meetings to ensure the continuity of these relationships, but it seems that there are also development needs in the provision of the online services and with patients' and client's access to technology.

Among health care professionals, we can recognize different risk groups and risk environments from the mental health viewpoint., Professionals, and especially nurses working in the intensive care units (ICU) with infected persons and in need for high protection for themselves, they also face a risk for their wellbeing and mental health. Working in these conditions has attracted a lot of public attention, especially from the viewpoint of protective equipment, but this is not the whole story. It is also emotionally very burdensome to work with patients who might not survive and to meet and support their families. Besides those senior nurses in ICUs there are many nurses who have needed to prepare themselves to work in other and less familiar settings often feeling unsure about their competence and coping, some of them only commencing their nursing career or still in nursing education. The risk for their wellbeing and mental health needs to be fully acknowledged by employers and professional emotional support must be provided for nurses working in ICUs with COVID19 patients.

But the threat of infection, in conjunction with worry and fear is a reality, not only for those working in ICUs but also in other health care services, including psychiatric wards and other mental health services. This threat is real; globally the number of people dying because of COVID19 is still increasing and there are no statistics showing how many of these people have been health care professionals. CEO of the International Council of Nurses (ICN) Howard Catton has declared this as a scandal (Twitter 30.6.2020). The primary task needs to be in life-saving activities, but the psychological reactions can't be neglected, whether it is the emotional reactions of the patient or the professional. From the professionals' viewpoint the risk of emotional fatigue, compassion fatigue and vicarious trauma is high and sadly we have also witnessed this with reported suicides among health care professionals because of the consequences of COVID19. Therefore, it is imperative that the mental health and wellbeing of nurses, as well as all health professionals, is given equal priority in planned responses to this pandemic. This is extremely important during the times of nursing shortages and when COVID19 raises also a potential risk for some to leave the profession. It is essential to acknowledge this in the organizational and administrational level and to develop and implement a plan on how to safeguard the mental health of the nurses, if that has not been done yet.

Some of our colleagues in health care will also need help from the mental health services because of the emotional reactions, mental health distress and ill-health caused by COVID19, in a similar manner to many others. Mental health nurses need to prepare to encounter such patients, their emotions and different conditions like anxiety, complicated grief, depression, PTSD, addictions and suicide attempts, in several different health care environments. Mental health competence is needed now also in NGOs, especially in those providing the increasing levels of support via helplines, in primary health care, residential care and several other non-traditional mental health services. When the acute phase of the pandemic is over, the need for professional mental health support and care is not. Therefore, mental health nurses will be working with the consequences of COVID19 for a very long time, in some cases for years. To ensure their own wellbeing and ability to provide high quality care, the availability of clinical supervision and mentoring needs to be guaranteed by employers with understanding of the nature of psychiatric/mental health nursing.

COVID19 has revealed the need for mental health literacy and competence in different health care settings and for many other service providers, clearer than ever. This has been discussed and acknowledged for several years, especially by mental health professionals, but only now we see how important it is that we have mental health competent professionals working in different kinds of health services. It is time to strengthen the mental health competence of all nurses, but also to ensure the availability of competent mental health nurses. At the same time this situation demands us to develop new models of co-operation between services such as consultations, mentoring and joint clinical supervision to ensure the mental health nursing competence is used in full capacity for the benefit of all patients.

COVID19 challenges us also to strengthen the multidisciplinary co-operation between all the professionals in mental health care and to find new ways to work in true collaboration. The core of mental health nursing is in the encountering of clients, patients and families with dignity and humanity in a reciprocal relationship, wherever we work. When we collaborate in such values, acknowledge such approaches with other mental health professionals, we can develop joint research and development activities together and support each other's work in a best possible way against this joint enemy, COVID19 and its negative mental health consequences for so many.

## Some sources of information:

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