



PERISCOPE

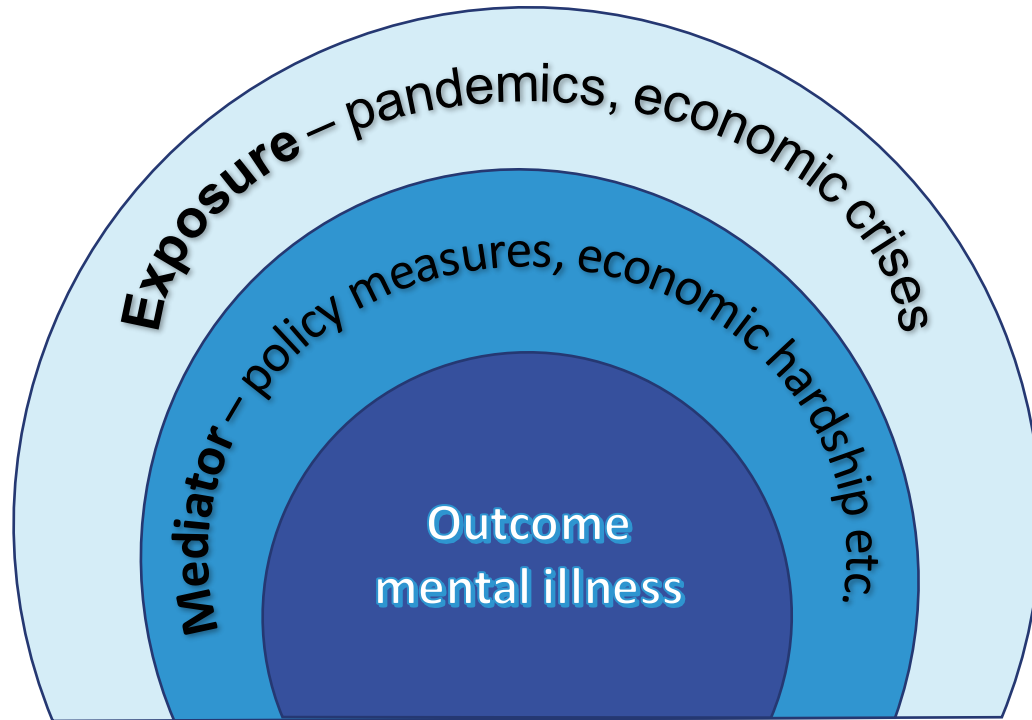
PAN-EUROPEAN RESPONSE TO THE IMPACTS OF COVID-19 AND FUTURE PANDEMICS AND EPIDEMICS

EFFECTS OF THE COVID-19 PANDEMIC, PREVIOUS EPIDEMICS, PANDEMICS AND ECONOMIC CRISES ON MENTAL HEALTH: A SYSTEMATIC REVIEW

Maria Niemi, Ph D, Assistant Professor, Karolinska institutet, Department of Global Mental Health



Theoretical background - social determinants of health



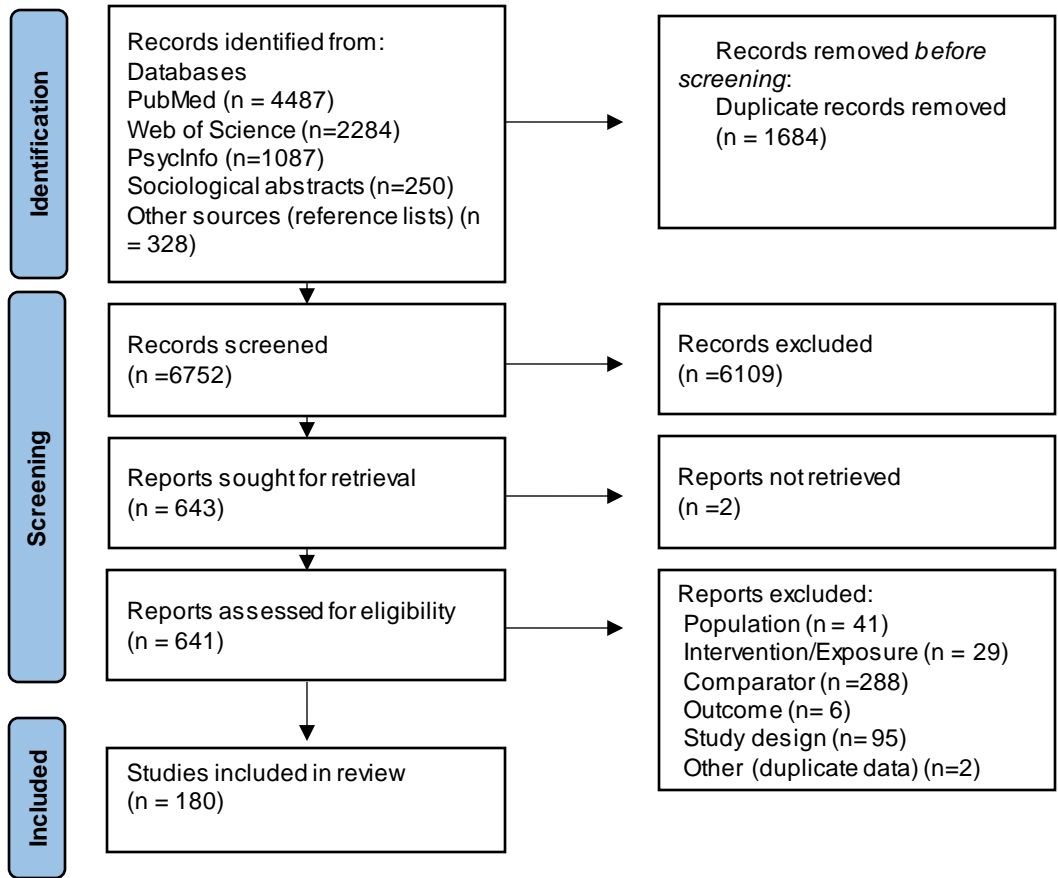
REVIEW OF MENTAL HEALTH IMPACTS

Aim

To systematically assess the mental health impacts of the COVID-19 pandemic and possible additional impacts from an eventual economic crisis.

- To map information on the impact of previous pandemics/epidemics similar to COVID-19, and on the impact of earlier economic crises
- To guide prevention and management of ongoing and expected mental health impacts.

Identification of studies via databases and registers



Results – COVID-19 exposure

- **Altogether 90 studies from the following 24 countries:** UK, Italy, USA, Canada, Kazakhstan, Peru, China, Bangladesh, Australia, Croatia, Switzerland, Japan, Germany, the Netherlands, New Zealand, Sweden, Singapore, Israel, France, Spain, India, Denmark, Serbia, South Sudan

Affective disorders

- Altogether 46 studies, 36 found increases in affective disorders

Health care utilization

- Altogether 10 studies, 6 found decreases in admission rates, 4 found increased admissions or severity.

Suicides

- Altogether 4 studies, all found decreased or unaltered rates

Other mental health outcomes

- Altogether 30 studies, 23 found deterioration, 7 found improvements

Results – 2008 economic crisis exposure

- **Altogether 87 studies from the following 40 countries:** UK, USA, Spain, Greece, Sweden, Australia, South Korea, Ireland, Italy, Austria, Belgium, Estonia, Finland, France, Germany, Ireland, Netherlands, Portugal, Slovakia, Slovenia, Spain, Bulgaria, Croatia, Czech Rep, Denmark, Hungary, Latvia, Lithuania, Poland, Romania, Montenegro, Norway, Serbia, Switzerland, Iceland, France, Taiwan, Japan, Canada

Affective disorders

- Altogether 15 studies, 10 found increases in affective disorders, 5 found either increases only among specific subgroups, overall decreases or unchanged rates

Health care utilization

- Altogether 8 studies, 7 found increases in admission rates, 1 found decreased visits

Suicides

- Altogether 39 studies, 8 found increases only among specific subgroups, 3 found decreases or unchanged rates.

Other mental health outcomes

- Altogether 25 studies, 23 found deterioration, 2 found improvements

Results – SARS exposure

- Only 3 studies, all from Hong Kong, all among adults of older age

Affective disorders

- No changes among men, only increases in depression among women (two studies)

Suicides

- Increased suicide rates among older adults

Further findings after our review:



Global prevalence and burden of depressive and anxiety disorders in 204 countries and territories in 2020 due to the COVID-19 pandemic



*COVID-19 Mental Disorders Collaborators**

- The locations that were hit hardest by the pandemic had the greatest increases in prevalence of major depressive disorder and anxiety disorders.
- A 26.6% increase in cases of major depressive disorder globally due to the COVID-19 pandemic.
- A 25.6% increase in cases of anxiety disorders globally due to the COVID-19 pandemic.

Conclusions and future recommendations:

- Mental health care utilization did not increase – perhaps due to regulations on travel and quarantine: ***The drawback of studying health care utilization in this context***
- Our findings highlight the importance of making mental health services ***available, accessible, and sustainable*** for those in need
- The ***socio-economically disadvantaged*** are at increased risk of adverse mental health outcomes – therefore these populations should be ***particular targets*** of policy interventions in the pandemic
- Future research may allow for ***international comparisons*** of mental health outcomes and detailed analyses on the differential impacts from the measures taken by different countries.

Conclusions and future recommendations for policy and practice

- This pandemic has created an increased urgency to strengthen mental health systems in most countries. Mitigation strategies could incorporate ways to promote mental wellbeing and target determinants of poor mental health and interventions to treat those with a mental disorder. Taking no action to address the burden of major depressive disorder and anxiety disorders should not be an option.



Collaborators:

Karolinska Institutet: Maria Niemi, PhD; Michaela Asper, MSc; Walter Osika, PhD; Christina Dalman, Professor; Elin Pöllänen, MSc; Otto Simonsson, PhD; Pär Flodin, PhD; Anna Sidorchuk, PhD;

Mental Health Europe: Laura Marchetti, MA; Fatima Awil, LMM;

FEAM: Rosa Castro, PhD

THANKS!

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