Updates

Mental support for health care professionals essential during the COVID-19 pandemic

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The coronavirus disease 2019 (COVID-19) pandemic continues and concerns regarding its consequences rise. This concern is addressed by other professionals (e.g. the use of a multidisciplinary approach¹ or the possible increase in suicidal behaviour).² However, the continuing huge pressure on mental health care professionals warrants the supporting of their mental health but regretfully, this topic received little attention.

In general, these unprecedented times will cause distress to individuals and leave many people vulnerable to mental health problems. Mental health consequences will be present for a long period and may peak later than the actual pandemic because people initially respond to the increase of pressure using survival mode but get exhausted after some weeks of continuous pressure. In 2002–2003 during the SARS epidemic, health care professionals experienced physical and mental symptoms, 4 which makes the support of mental health of health care professionals key during this pandemic.³ So far, the limited attention for the mental health of health care professionals is astonishing. Others addressed important topics, ^{1,2} but since it is uncertain when the COVID-19 pandemic ends, the workload for health care professionals will continue to be high. This applies for the hospital setting as well as mental health care setting, and other sectors. Furthermore, we expect a sudden increase of registrations as soon as the pandemic decreases (in the Netherlands) and therapy contacts will increase. 5-8 Measures to prevent or support mental health of professionals in health care are limited, which is worrying because 25% of the general population reported decreased mental health during the pandemic.9

Some initiatives were developed to support the mental health of professionals in health care (e.g. World Health Organization). ¹⁰ GGz Breburg and Amphia hospital developed a protocol based on previous findings³ and provided an outline on how to improve their mental health. This protocol ¹¹ prevents incapacitation due to mental disorders using a

stepped care proposal consisting of: prevention of burnout, psychosocial support for experience anxiety related to the pandemic and offers a short-term post-traumatic stress disorder treatment. This protocol is made available upon request (please contact the corresponding author) and is just one possible way to support our health care professionals on which we rely so heavily but we would like to encourage the development of other mental support protocols. Mental support for the health care professional is necessary to prevent burnout and realize quick recovery when necessary, so more attention to this topic is pivotal.

Conflicts of interest

None declared.

References

- 1 Holmes EA, O'Connor RC, Perry VH et al. Multidisciplinary research priorities for the COVID-19 pandemic: a call for action for mental health science. Lancet Psychiatry 2020. doi: 10.1016/S2215-0366(20)30168-1.
- 2 Gunnel D, Appleby L, Arensman E et al. Suicide risk and prevention during the COVID-19 pandemic. Lancet Psychiatry 2020. doi: 10.1016/S2215-0366(20)30171-1.
- 3 Chen Q, Liang M, Li Y et al. Mental health care for medical staff in China during the COVID-19 outbreak. Lancet Psychiatry 2020;7:e15–6.
- 4 Wu P, Fang G, Guan Z *et al.* The psychological impact of the SARS epidemic on hospital employees in China: exposure, risk perception, and altruistic acceptance of risk. *Can J Psychiatry* 2009;**54**:302–11.
- 5 Probst T, Stippl P, Piek C. Changes in provision of psychotherapy in the early weeks of the COVID-19 lockdown in Australia. *Int J Environ Res Public Health* 2020;**17**(11):3815.
- 6 Duan L, Zhu G. Psychological interventions for people affected by the COVID-19 epidemic. *Lancet Psychiatry* 2020;**7**(4):P300–2.

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- 7 Volkskrant. Only Together, We Will Get through This Mentally [Article in Dutch]. Volkskrant: Amsterdam, the Netherlands 2020. https://www.volkskrant.nl/columns-opinie/alleen-samen-kome n-we-hier-ook-mentaal-doorheen~b8d0b6cc/ (01 June 2020, date last accessed).
- 8 CNN. The Coronavirus Pandemic's Impact on Global Mental Health Is "Already Extremely Concerning," UN says. CNN: Atlanta, United States of America 2020. https://edition.cnn.com/2020/05/14/health/un-coronavirus-mental-health/index.html (01 June 2020, date last accessed).
- 9 Choi EPH, Hui BPH, Wan EYF. Depression and anxiety in Hong Kong during the COVID-19. Int J Environ Res Public Health 2020;17(10):3740.
- 10 World Health Organization. *Mental Health and Psychosocial Considerations during the COVID-19 Outbreak*. World Health Organization: Geneva, Switzerland 2020. https://www.who.int/docs/default-source/coronaviruse/mental-health-considerations.pdf (01 June 2020, date last accessed).
- 11 De Vroege L, Gribling G, Van den Broek A. "Don't Forget about Yourself When Taking Care of Others": Mental Health Support for Health Care Professionals during the COVID-19 Crisis [Article in Dutch]. Tijdschr Psychiatr 2020; 62(6), 424–426. https://www.tijdschriftvoorpsychiatrie.nl/assets/epub_aheads/62-2020-6-artikel-devroege-online.pdf (01 June 2020, date last accessed).