Policy changes needed to address the mental health impact of COVID-19 in Iran

In Iran, in 2019, mental health disorders accounted for 12·56% of the disease burden in women, whereas, in men it was comparatively lower, at 8·43%.[1] The COVID-19 pandemic has increased the incidence of factors that adversely affect mental health (eg, family disputes, social isolation, fear of contagion, uncertainty, chronic stress, hopelessness, feelings of entrapment and burdensomeness, substance misuse, loneliness, domestic violence, child neglect or abuse, unemployment, and economic difficulties), while concurrently reducing access to mental health services.[2] Thus, we can expect an overall increase in the burden of mental health disorders. After the COVID-19 pandemic began, in 2020–21, the incidence of death by suicide in Iran increased substantially to 6·6 cases per 100 000 people (an increase of 7·8% from the previous year); however, it reached 16·5 cases per 100 000 people in some provinces, with the highest proportion in individuals aged 18–29 years (33·9%).[3]

However, in Iran, policy makers are focused on efforts to mitigate the pandemic's devastating economic and social impacts, and the long-term consequences on mental health are being overlooked. The Iranian Government must first examine and map the evidence regarding incidence and prevalence of mental health disorders, and social determinants of mental ill health. Policy makers should implement strategies to increase societal and health system resilience, such as the Mental Health Gap Action Programme.[4]

Appropriate and coordinated mental health services should be widely available to the public to prevent the spreading and deepening of the adverse effects of the pandemic on mental health.[5] Screening services should be provided in primary health-care centres to refer identified patients to specialised services. Special registry systems for psychological problems and their consequences should be developed.[6] Depression and anxiety in medical students and staff should be monitored. The high costs of psychotherapy should be covered by basic health insurance or included in the Iranian national essential health benefits package. Digital technologies and social media could help to reduce psychological problems through education, encouraging the use of mental health services, and improving social interactions and the community's mood.[5]

Policy makers should address the social determinants of mental health problems. General strategies include creating supportive services to protect vulnerable groups (eg, people of low income, people who are unemployed, women and girls, older people, children, and refugees); building social capital and enhancing cross-generational cohesion in the face of economic difficulties (eg, cross-generation support and support for younger and older adults); and promoting mental health through recreational environments, group sports, life skills, and the use of mental health services (eg, related to stress management and anger management). Overall, policy makers must apply a systems-thinking approach to mental health.

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