

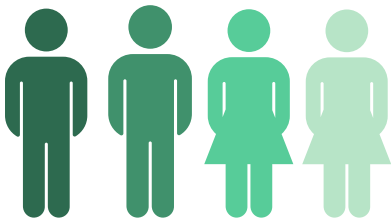
Mental Health Need Assessment of Frontline Healthcare Workers, Individuals infected with COVID-19 and their Family Members

Scope and Method

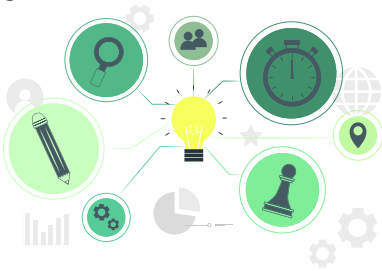
- 65 participants were interviewed at the SAJIDA Foundation COVID-19 hospital in Narayanganj, in July 2020



- FLHW demographic comprised of doctors, lab technicians, nurses and paramedics, cleaners, chauffeurs, and security guards



- A qualitative topic guide was prepared through mind-mapping, followed by a moderate length, semi-structured qualitative interview guide



- COVID-infected mental health professionals were included in the COVID-infected group of respondents; they were able to offer professional recommendations informed by personal experiences of suffering from the coronavirus



Assessing COVID-19's Impact on Mental Health

The advent of the novel coronavirus and its subsequent spread across the globe has put people at risk of adverse physiological and psychological risk. To address this multidisciplinary crisis, SAJIDA Foundation conducted a need-based assessment of the mental health status of four groups of individuals in Bangladesh: front-line healthcare workers (FLHW), family members of FLHWs, COVID-infected individuals, and family members of COVID-infected individuals.



This report summarizes:

- Respondents' current psychosocial status and needs
- Services that can help mitigate psychological concerns

Identifying Well-Being Factors

Participants were first asked to identify the factors through which they define their "overall well-being". The key findings of the assessment were recorded in terms of COVID-19's impact on these factors.

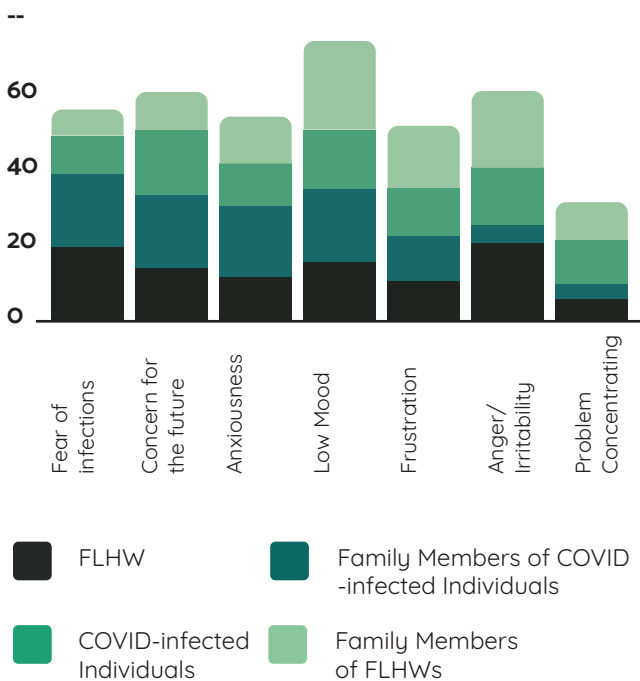
Respondents shared that their well-being (both positive and negative) is most significantly shaped by:

- Psychological Impact
- Behavioural Change
- Social Attitude and Behaviour
- Workplace
- Family Relationships
- Parenting
- Physiological Impact

Psychological Impact

Across all four groups, fear of infection, anxiousness, frustration, low mood, anger and irritability, problems with memory, and lack of concentration were reported to be the most significant psychological concerns. Participants also reported feelings of rumination, helplessness, guilt, grief, lack of confidence and self-control, delusion, crying spells, social anxiety, compulsive action, self-harm, sexual frustration, and suicidal thoughts.

Figure 1 shows the percentage frequency of psychological symptoms in respect to each group



Behavioural Change

Talking slowly and preferring to be alone, irritable behaviour, reluctance to converse, higher news consumption, over-protectiveness, spending time with colleagues, increased benevolence and recalling of old memories were reported by FLHWS.

While with children, increased dependence on and access to mobile phones, disrupted sleep cycles, hyperactivity, unwillingness to stay at home, reluctance to study, fighting with siblings, disobeying parents, staying up late at night, and more time spent playing games were identified.

Social Attitude and Behaviour

Lack of socialization, inadequate awareness, and social harassment were identified as some of the more prominent symptoms. Deliberate avoidance, negligence, torture, blaming, bullying and threatening were the most notable reported forms of social discrimination faced by participants. However, support from neighbours and colleagues were also emphasized as significant sources of positive impact.

FLHWs shared that they have been hiding work details from family members to protect them from stress. Elsewhere, they have been hiding their professional identity to avoid social stigma and discrimination.

Workplace

Extended duty hours and work load – particularly for FLHWs; having to wear PPE and masks for a considerable period of time, lack of safety, and unsupportive and empathetic management were identified as work-related issues.

Family Relationships

Increased interpersonal communication and care among family members were reported. However, poor communication, conflict, misunderstanding and physical distance from family members were also reported as the most prominent concerns.

Parenting

Difficulty managing children, worrying over children’s education and not being able to take proper care of them due to work load were emphasized.

Physiological Impact

Fatigue and weakness, disruption in sleeping patterns, headaches, and breathing difficulties were shared as the most common impacts on physical health.

Participants also talked about episodes of sweating, tastelessness, choking or breathlessness, startling, chills, and chest pain.

Respondents shared the coping strategies through which they have been adjusting to the aforementioned issues, and the additional support systems that they needed in order to cope better. They also identified the services, i.e. the processes through which they would prefer to receive psychosocial support.

Current Coping Strategies

- Listening to music
- Sharing and communicating
- Praying
- Following health and safety measures
- Psychological techniques
- Watching movies and videos

Additional Needs For Coping

- Job security and organizational support
- Financial support
- Psychological counselling
- Family, self and social support

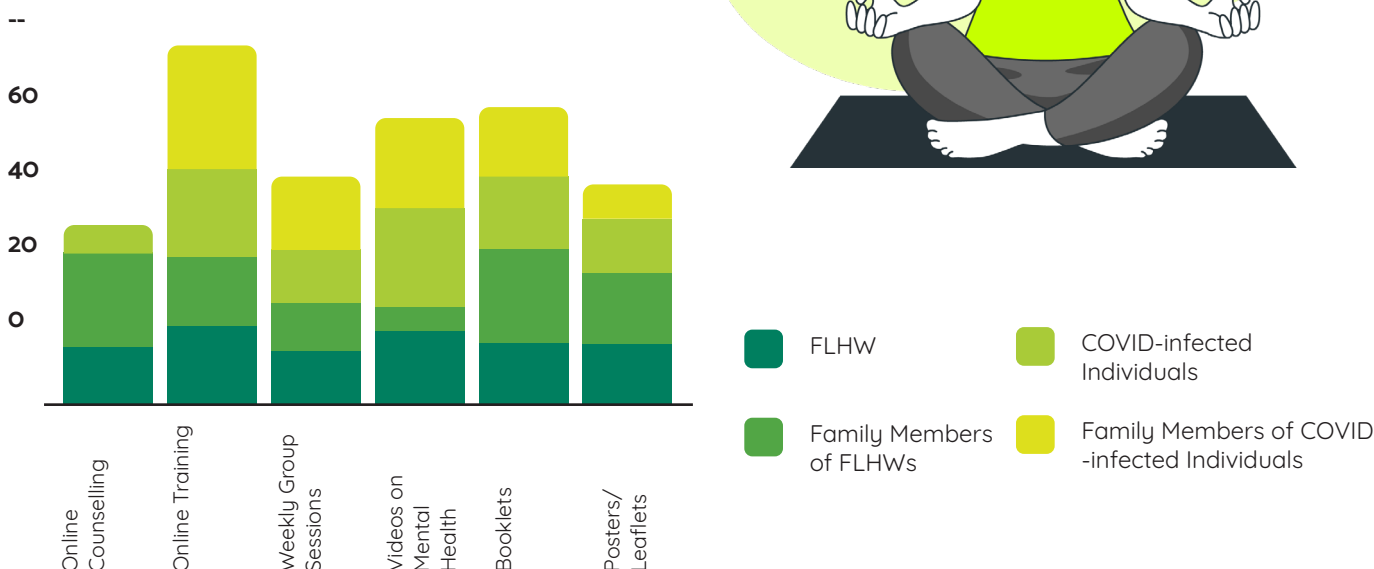
Preferred Modes of Psychosocial Help

Online counselling, online training, and various self-help materials were identified as the most frequently preferred modes of psychosocial support.



Other preferred options included emergency helpline, psychologists at COVID dedicated hospitals, and online support for FLHWs

Figure 2 shows the percentage frequency of modes selected by each respective group



Types of Support	FLHWs and their Families	Covid-Infected Individuals and Families
Training	<ul style="list-style-type: none"> ● Burnout management ● Stress, anxiety and anger management ● Crisis management ● Increased concentration ● Self-care ● Parenting ● Effective communication ● Training on managing mental health issues 	<ul style="list-style-type: none"> ● Anger, stress and anxiety management ● Parenting ● Income Generation
Information	<ul style="list-style-type: none"> ● Booklets ● Online videos and webinars ● Published guidelines on mental health services to help reduce stigma 	<ul style="list-style-type: none"> ● Online awareness programs ● Print and online self help material
Social Support	<ul style="list-style-type: none"> ● Safety measures (PPE, masks) at work ● Incentives, acknowledgement of performance at work ● On-site psychological counselling at work ● Empathy 	<ul style="list-style-type: none"> ● Online and face-to face counselling
Professional Support	<ul style="list-style-type: none"> ● Helplines for psychological and physiological emergencies ● Online and face-to-face counselling 	<ul style="list-style-type: none"> ● Round the clock tele-health consultation services

Get in Touch

Learn more about SAJIDA Foundation and its Mental Health Program

Visit sajidafoundation.org/mental-health-program
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