EXPERT PANEL ON EFFECTIVE WAYS OF INVESTING IN HEALTH

Request for an opinion: Supporting the mental health of health workforce and other essential workers

Background - Rationale

The health workforce and other essential workers have been hit hard by the consequences of the COVID-19 pandemic. Apart from the direct infection risks arising from close contact with patients, the general public and potentially infectious co-workers, essential workers have been also under increasing stress and mental health risks.¹

Essential workers include healthcare personnel, long term care workers, teachers, cleaners, cooks, emergency personnel (police, fire department, civil protection), people working in transport, agriculture and food production, critical retail (grocery stores, hardware stores), critical trades (construction workers, electricians, plumbers etc.), water and wastewater management, energy production and distribution, social service organisation and other sectors that manage critical infrastructure and services.

When the Covid-19 pandemic hit, essential workers had no choice but to continue working physically at their workplace and could not switch to telework. These employees leave their households to help maintain services for others, and society as a whole, at great risk to their own health and that of their families. Evidence² from the pandemic shows that essential workers were exposed to COVID-19 transmission much more than other workers. Moreover, some essential workers are particularly vulnerable, in terms of both financial and health risks. This includes elderly workers, people from low-income households, workers with underlying health conditions (e.g. chronic illness), workers with existing mental health issues, workers in temporary employment, and refugees and those with a migrant background.

The Health at a Glance: Europe 2020³ report points to several factors that adversely affected the mental health of health workers: lack of personal protective equipment, the exceptionally high workload and psychological drain on health professionals. This led to a considerable mental health burden, with possible long-term effects for their well-being. For example, in Italy, a survey of health care workers carried out in March 2020 suggests increased symptoms of stress, anxiety, depression and insomnia, especially amongst frontline workers and young women. In Spain, research found that in April 2020, 57% of health workers presented with symptoms of

¹ UN Policy Brief: COVID-19 and the Need for Action on Mental Health. https://www.un.org/sites/un2.un.org/files/un policy brief-covid and mental health final.pdf

² European Parliament, Mental health during the COVID-19 pandemic, ENVI Webinar Proceedings, https://www.europarl.europa.eu/RegData/etudes/BRIE/2020/658213/IPOL_BRI(2020)658213 EN.pdf

³ https://ec.europa.eu/health/state/glance_en

post-traumatic stress disorder. Support services for mental health and well-being of doctors, nurses and other hospital workers were expanded by many countries to help them deal with the high level of stress, fatigue and psychological distress during these extremely challenging times, for example through peer support groups or dedicated phone support lines.

There is a proliferating number of articles and studies on the mental health consequences of the pandemic on health care workers, but there is much less research available on how essential workers in other sectors coped with the psychosocial effects of the crisis and what has been done to support their mental health. The European Commission set up a virtual network of (not-for-profit) stakeholder organizations on its Health Policy Platform to discuss and share knowledge and practices on COVID19-related mental health issues, also developing a set of guidance documents that can help address the mental health aspects of the COVID19-pandemic. The Expert Panel is encouraged to take into account the work done by this network, coordinated by Mental Health Europe.

Many countries have been providing psychological support to the general population, for example through online advice or phone hotlines, but it is less known what other actors, for example companies and organisations, have been doing to support their essential workers and employees with pre-existing mental health conditions. There is a need to explore the link between public health and occupational health, in particular how stress related aspects of working at risk of COVID-19 can be seen as occupational risk.

The Expert Panel on effective ways of investing in health (EXPH) highlighted in its previous opinion⁴ that aggravated levels of psychological distress should be recognised as a public health priority. It requires a rapid adoption of clear strategies to reduce the burden of disease and the dramatic mental health consequences of this outbreak. In the case of essential workers, it is vital to address the consequences of fear, stress, moral injury and the emotional and social aspects of their work so that the potential current mental health conditions do not become a disability.

In summary, innovative solutions are required to meet the mental health support needs of essential workers. These solutions could involve societal, organisational, team and individual responses, the utilization of psychosocial support services, primary care and community care, as well as the role of occupational health programs and e-health.

The primary target audience of this opinion includes the EU and national policy makers and senior managers in sectors with high shares of essential workers. The secondary audience are mental health and occupational health practitioners.

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⁴ EXPH (2020), The organisation of resilient health and social care following the COVID-19 pandemic, https://ec.europa.eu/health/sites/health/files/expert panel/docs/026 health socialcare covid19 en.pdf

QUESTIONS TO THE EXPERT PANEL

- 1.) What are the specific factors influencing mental health of the health workforce and essential workers?
- 2.) What interventions could be effective in addressing mental health support needs of health workers and essential workers, including those with preexisting mental health conditions? What are the conditions for the delivery of these interventions in a cost-effective, affordable and inclusive manner? Using existing data, assess the cost of mental health problems in the health workforce and the cost-effectiveness of mental health interventions.
- 3.) How can the EU address these concerns?

Timing

Finalisation by July 2021

Associated DG: EMPL