



INDIAN PSYCHIATRIC SOCIETY

[Estd: 1948]

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Ref: IPS/HGS/20-22/0264 (Covid 19)

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IPS Position Statement for Government

The COVID-19 pandemic is a great challenge for India. The pandemic has disrupted functioning of all spheres of life, beyond expectations. Governments across the world are taking unprecedented steps to curtail the spread of illness and quick successions of changes are happening around us, making people bewildered and confused.

The emotional stress of pandemic, as well as the opportunity for self-growth, can be understood from a statement made, over 102 years back, during the Spanish Flu, by the Father of the Nation, Sri. Mahatma Gandhi:

"This protracted and first long illness in my life thus afforded me a unique opportunity to examine my principles and to test them" (From Pale Rider, Laura Spinney,2017).

The Indian Psychiatric Society (IPS), recognizes the vital role of emotional health at all stages of the pandemic and in all groups of population. The emotional impact of the behavioral changes the population is forced to make, the care of the persons experiencing various forms of emotional distress due to stress and the care of pre-existing mental disorders needs to be addressed.

IPS recognizes the following needs of the community during the pandemic:

1. To **reorganize the mental health care** in a manner that makes it accessible, affordable and acceptable to the community.
 - a. This would include moving the services from the clinic as a center, to the community as the place of delivery of services.
 - b. This will also require using all available information technology to 'reach the unreached; and sustain them in the care system. Online consultation with the psychiatrist could be an asset to the patients in isolation to monitor their symptoms.
 - c. There is a high risk of relapse in patients with mental illness due to difficulty in visiting psychiatrists during pandemic and due to non-availability of psychotropic medications without written prescription. Hence, it is necessary to amend policy, so that patients with mental illnesses can get their regular medications with old prescriptions or with online prescriptions, till crisis is over.



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2. **To focus on vulnerable groups**, who under the stress of the pandemic can develop mental disorders and to initiate preemptive steps to prevent the same.

- This would require delivery of crisis support, life skills education, strengthening of the families, rebuilding of communities etc. Special support to be provided to care-givers and family members of patients suffering from preexisting mental illness, as they are doubly jeopardized by the ongoing crisis.
- Mental health professionals should be included in the COVID-19 task force to address various mental disorders related to the pandemic like adjustment disorder, depression etc. Many people might suffer from mental health issues due to loss of their loved ones, loss of job and financial issues.
- Mental health professionals are required to address not only the issues during the pandemic but also in the future to deal with aftermath of COVID-19.
- Psychiatry clinics should be allowed to function normally in view of addressing various psychiatric emergencies like acute psychotic disorder, mania and catatonia.
- Special focus should be given on alcohol and other substance use related disorders as sudden non availability of alcohol / substitution drugs in the current scenario of lockdown might increase the incidence of alcohol / drug withdrawal, alcoholic hallucinosis and delirium tremens.
- Special focus and services should also be provided for children and adolescents staying at home for long time. Anxiety and fear related to illness, death and parental separation are often not expressed by the young and expert advisory for them needs to be communicated.
- Elderly and the disabled are uniquely disadvantaged in this pandemic as they are more vulnerable to mental health problems. Psychiatric services focusing on the requirements of these groups need to be provided.



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3. **Promotion of mental health** in the general population with the objective to increase resilience.

a. Adverse psychological response during infection outbreaks are common and include conditions like insomnia, substance use, headache and somatic pain.

b. Easy access to media and internet enables the spread of rumors and misinformation. It also distracts the public from gaining accurate and necessary information.

c. Therefore, evidence based mental health promotion activities by individuals (daily indoor exercise, 8 hours of sleep, yoga/ meditation, music, art, journaling, spirituality, etc.) should be disseminated in a culturally relevant formats and using the mass media, and community resources.

4. **Health care workers face additional challenges** including safeguarding health of themselves and their family, stigma within community due to fear spreading infection, and distress from managing critical patients. Mental health aspects of health care workers must be properly addressed. The exposure to risk in health workers is recognized by the Government and is mitigated through insurance. There is need to provide day to day support to all levels of health personnel.

5. **Documentation and research** to understand the needs, vulnerabilities and interventions effectiveness needs to be carried out. Health focused research looking into community factors facilitating resilience, post-traumatic growth and the cultural good practices needs to be documented. India, with its diverse culture, spirituality, religion, social status, lifestyles, provides an unique opportunity to understand both the vulnerabilities and protective factors in epidemic response.



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Strategies of the IPS to address the needs:

1. Reorganizing the psychiatric care provided by the members of IPS, to make it available at all time, accessible, affordable and acceptable to the community. There will be greater openness to reach those who need care and to provide the care using the information technology (mobile phones, helplines, etc.)
2. Developing educational materials for personal emotional health and resilience and disseminating the same by using different forms of media; so that every person in the community can have access to information to care for his/her mental health.
3. Support of health care personnel providing essential services, to strengthen their resilience, and for early identification, support and clinical care of their mental health problems, when needed.
4. To be a resource facility for the Government, mass media, NGO's etc. on all matters of mental health relating to the pandemic.
5. Documentation of evidence through the use of the routine records of care, and through specific studies in special groups of populations.

The IPS and its members are at the service of the nation at this challenging time; to minimize emotional distress, strengthen governmental interventions, and to maximize the emotional strength of the population. We look forward to working hand in hand and in partnership with the people, the Government, and with the academia world over.

(Prof. T.S. Sathyanarayana Rao)
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(Prof. P.K. Dalal)
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Dated: 30th March 2020