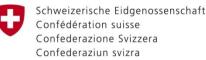
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### **Impact of COVID-19 pandemic** on Mental Health Services **Reform in Moldova**

Valeriu SAVA- National Program Officer, Swiss Cooperation Office in Republic of Moldova,

SRHR Conference Hidden Scars: the Impact of Violence and the COVID-19 Pandemic on Women's Mental Health, 18-19 May 2021



# **Background Information**

- In 2013, Switzerland started supporting Moldova in a systemic reform of the Mental Health (MH) Care.
- **Through MENSANA Project**, launched in 2014, a community-based model of MH care was developed and introduced countrywide.
- Implementing Project Partner: TRIMBOS Institute of Mental Health and Addictions (the Netherlands).
- Phase I: 2014 2018; Phase II: 2018 2022



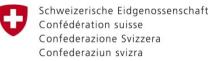
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## **Overall Goal and Key Objectives**

People with MH issues in Moldova receive care appropriate for their needs and reach their recovery goals.

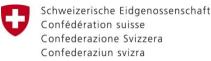
 $\Leftrightarrow$ 

A countrywide network of mental health service providers ensures equitable access to quality and affordable care, responsive to the users' needs. People across Moldova are more aware of the importance of their own and others' MH, more willing to access mental health services, if necessary, and support the social inclusion and recovery of the people with mental health issues.



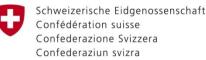
# Main Project Results before COVID-19 Pandemic

- A favorable policy environment and legislative framework for MH services reform has been created.
- MH care pathway is in place: *community mental health centres, primary care, specialized inpatient care.*
- A network of Community Mental Health Centers (CMHCs) was set up countrywide and 89% of all registered people with mental health needs were assisted (*data at the end of 2019*).



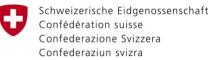
# Pandemic effect on Health Care System

- <u>Overloaded hospitals</u> with increased number of COVID-19 patients in critical condition.
- The <u>high infection rates</u> among health workers and burnout led to increasing shortages in healthcare personnel.
- Many <u>health conditions other than COVID-19</u> didn't get necessary attention, which, along with the fear of getting infected in healthcare facilities, discourages people's healthcare seeking behaviour.

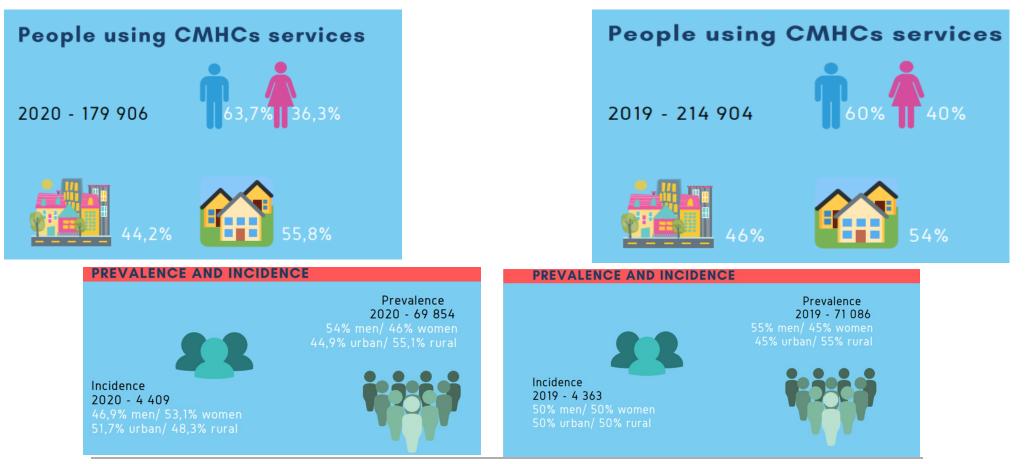


# Pandemic effect on MH services

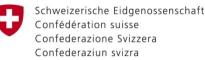
- The COVID-19 pandemic has had a <u>negative impact</u> on:
  - <u>people's mental health conditions</u>: the increased risk of anxieties, burnout, depression, etc.
  - <u>access to healthcare</u> and <u>users' addressability</u> to services as well as on outreach actions targeting vulnerable and excluded groups.
- The <u>users' visits</u> to CMHCs dropped by **25%**, while the number of <u>home visits</u> by CMHCs specialists decreased by **70%** in 2020 compared with 2019.



#### The use of mental health services during pandemic period



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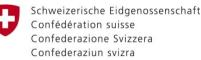


### Pandemic effect on domestic violence

• The rate of reported domestic violence increased with **2.4%** in 2020 compared to the same period of 2019.

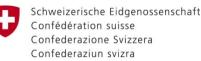
• **90.4%** of registered domestic violence victims were women.





### **Psycho-emotional counselling offered to medical professionals during pandemic**

- The reason for addressing to mental health services (out of 195 assessed cases):
  - Anxiety in **62%** of cases (121 persons.)
  - Signs of depression in **59,5%** (116 persons.)
  - Asthenia, fatigue in **52,3%** (102 persons)
  - Burnout in **44,6%** (87 persons)
  - Sleeping disorders in **40%** (78 persons)
- **79%** of cases were women and only **21%** were men looking for mental health support



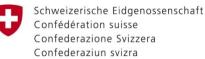
#### Assessment of burn-out syndrome among health professionals

- The burnout syndrome was assessed among 137 health professionals
- Out of all **137** respondents, **119** were from the emergency services



- Out of all **137** respondents **89,1%** have different levels of burnout:
  - 55% low
  - **31%** medium
  - 14% high level

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#### Measures taken to ensure the access of population to MH services (during COVID-19 pandemic)

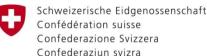
**National Clinical Protocol** for treatment of COVID-19 – chapter on mental health of patients with COVID-19

**Instructions on intervention** of mental health in the Moldova context of COVID-19 (*responsibilities, levels of intervention, general recommendations*)

**Intervention algorithms** (for general population; for medical workers and pharmacists at community level; for team leaders and managers)

**Methodical instruction** of psychological counseling in stress reduction for general population and in burnout for medical workers

**Guidelines for medical professionals** on intervention in COVID-19: how to help families, children / adults with special need in a public health crisis



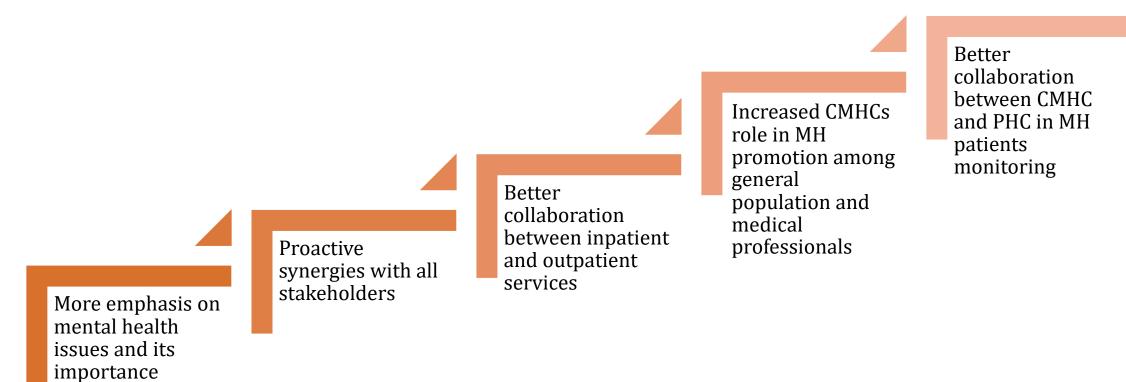
### **Interventions during COVID-19 pandemic**

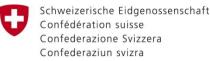
• **Training on First Psychological Aid** for all CMHCs professionals, psychologists from all hospitals (*psychiatric and general*) and for all specialists of residential institutions and prisons.

• **Capacity building of MH staff** (*webinars: on organizational matters during pandemic; on key actions for maintaining safety in the psychiatric hospitals and residential institutions; on mental health intervention during crisis situations*)

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### **Opportunities identified during crisis situation**





### **Lessons learned**

- Health professionals usually do not ask for psycho-emotional support because of low knowledge about MH and high level of double stigma (*COVID-19 and MH*).
- Adequate and timely information of health professionals in MH topics: *acute stress disorders, PTSD, adjustment disorders, somatization, etc.* is an effective prevention measure.
- The COVID-19 pandemic period revealed the importance of inter-sectoral collaboration in MH domain and different sectors started effectively collaborate.
- People quickly adjust to changes Public Health restrictions, isolation, new technological approaches, remote service delivery, etc.
- Web-based meetings and online trainings strengthen the participation and partnerships.



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