

The impact of COVID-19 on mental, neurological and substance use services:

results of a rapid assessment



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Abbreviations

AFR	WHO African Region
AMR	WHO Region for the Americas
EMR	WHO Eastern Mediterranean Region
EUR	WHO European Region
IASC	Inter-Agency Standing Committee
MHPSS	Mental health and psychosocial support
MNS	Mental, neurological and substance use
NCD	Noncommunicable disease
NGO	Nongovernmental organization
PPE	Personal protective equipment
SEAR	WHO South-East Asia Region
WB	World Bank
WHO	World Health Organization
WPR	WHO Western Pacific Region

Executive summary

The World Health Organization (WHO) has identified mental health as an integral component of the COVID-19 response. Its rapid assessment of service delivery for mental, neurological and substance use (MNS) disorders during the COVID-19 pandemic, on which this report is based, is the first attempt to measure the impact of the pandemic on such services at a global level. The data were collected through a web-based survey completed by mental health focal points at ministries of health between June and August 2020. The questionnaire covered the existence and funding of mental health and psychosocial support (MHPSS) plans, the presence and composition of MHPSS coordination platforms, the degree of continuation and causes of disruption of different MNS services, the approaches used to overcome these disruptions, and surveillance mechanisms and research on MNS data.

In total, 130 (67%) WHO Member States, across all WHO regions, submitted answers to the survey. Data were disaggregated by region, income group and stage of transmission of COVID-19.

The vast majority, 116 or 89% of responding countries, reported that MHPSS response is part of their national COVID-19 response plans. However, only 17% of these countries have ensured full additional funding for MHPSS covering all activities.

Two-thirds (65%) of responding countries have a multisectoral MHPSS coordination platform for COVID-19 response, and more than 65% of these countries include the ministries of health, social/family affairs and education and also nongovernmental organizations as part of these platforms.

Almost half (51%) of responding countries reported that ensuring the continuity of all MNS services was included in the list of essential health services in their national COVID-19 response plan, while 40% of countries reported the inclusion of some MNS services in the list of essential health services in their national response plan.

To understand government policies on access to a range of MNS services, the status of closure of existing services was checked across different categories and settings. A total of 10 types of services for MNS disorders were included, such as inpatient and outpatient services at mental hospitals; outpatient services, inpatient psychiatric and neurological units as well as treatment of substance use disorders at general hospitals; and services for MNS disorders at primary health care, residential, home and day care services at community level. No country reported a full closure of all services; but in only 7% of responding countries were all services fully open, with 93% of countries reported disruptions in one or more of their services for MNS disorders.

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