

Mental health services disrupted across Europe during the first wave of the COVID-19 pandemic

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A large-scale European survey has revealed significant changes in mental healthcare service delivery during the first wave of the COVID-19

pandemic.

The research, published in *European Psychiatry*, has found that [mental health services](#) were disrupted across Europe during the first wave of the COVID-19 pandemic (April 2020) despite World Health Organization (WHO) recommendations.

The COVID-19 pandemic has been associated with an increased demand for mental health services, with mental health disorders developing or deteriorating as a result of the social and economic impacts of the pandemic, as well as the infection itself. Consequently, the WHO declared that mental health services should be considered an essential service to be maintained during the pandemic. Nevertheless, psychiatric services were reduced to emergency care only in many countries, with the remaining services being required to adapt to being held remotely.

The European Psychiatric Association (EPA) surveyed 857 psychiatrists across Europe to obtain information about patient access to care, the number of patients treated, and the organization of mental healthcare for patients with pre-existing mental health problems.

Despite the WHO recommendations, the survey revealed that the number of patients treated by psychiatrists in outpatient settings halved in April 2020 compared to previous months, with the largest reduction being seen in Southern Europe. In most European countries, 50% of face-to-face psychiatric consultations were replaced with remote consultations, however in Western Europe this was much higher.

"Mental health care services were severely damaged by the first wave of the COVID-19 pandemic," says Dr Mariana Pinto da Costa, "with a drop in the number of outpatients visits and a shift towards online/remote psychiatric care. Hospital-based care for persons with COVID-19 and pre-existing mental disorders was markedly different between countries,

while cooperation between different stakeholders including policy makers generally decreased. We propose first maps of 38 countries, from Europe and beyond, describing these changes."

Although the number of psychiatric patients who were infected with COVID-19 was low, mental healthcare services had to be re-organised to accommodate patients with mental disorders who were infected with COVID-19. This reorganisation varied across Europe, with patients being cared for in general hospitals, psychiatric hospitals, COVID-19 wards specifically for psychiatric patients, and COVID-19 wards for all patients.

The authors conclude that future efforts should focus on implementation of new remote services based on the success of remote services across Europe during the pandemic. Since mental health difficulties post-pandemic are expected to rise, it is crucial for multidisciplinary cooperation to be maintained throughout in order to guarantee effective and efficient care. The authors suggest that data of the quality and accessibility of psychiatric services should continue to be monitored to guide policy and decision-making in mental health service organization.

The findings of the study will continue to be used by the EPA and Council of National Psychiatric Associations to facilitate implementation of good clinical practice throughout Europe, and to gain insight into the [mental health](#) services in many European countries from which we lack data.

More information: Martina Rojnic Kuzman et al, Mental health services during the first wave of the COVID-19 pandemic in Europe: Results from the EPA Ambassadors Survey and implications for clinical practice, *European Psychiatry* (2021). [DOI: 10.1192/j.eurpsy.2021.2215](https://doi.org/10.1192/j.eurpsy.2021.2215)

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