Swiss TPH

Mental Health in the Basel Region and globally

Nicole Probst-Hensch

Swiss TPH Symposium 2021, June 28-30 2021



Mental Health – its global relevance

Mental Health – the impact of the COVID-19 pandemic

Mental Health – the pandemic impact in the Basel region

Mental Health – lessons learnt from the COVID-19 pandemic



Swiss TPH S

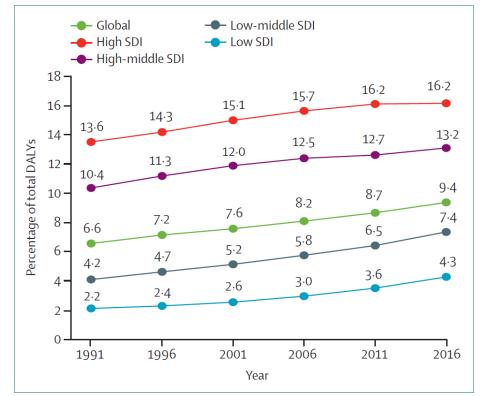
Mental health

of global importance

Global mental health

- Mental disorders also include substance use disorders, self-harm and dementia
- The global burden of disease attributable to mental disorders has risen in all countries before the pandemic – in the context of major demographic, environmental, and socio-political transitions
- The pandemic accelerated the increase

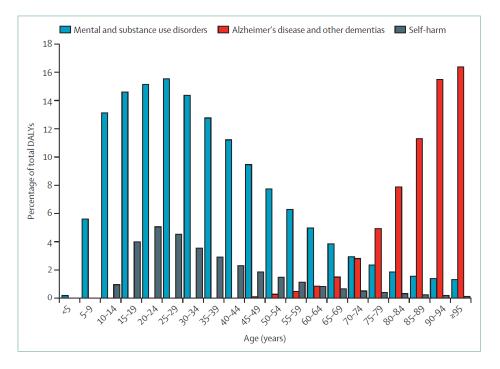
 particularly among the poor and the
 young
- All countries can be thought of as developing countries in the context of mental health



The rising burden of mental and substance use disorders, Alzheimer's disease and other dementias, and suicide (self-harm) by SDI groups



The heavy global burden of poor mental disorders

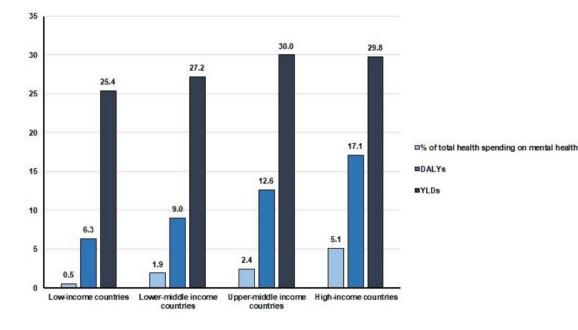


 according to natural history models
 > 13 Mio deaths attributable to mental disorders in 2010

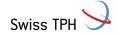
> poor mental health top-ranking contributor to years lived with diability



Inadequate investments into mental health care



1% (Nigeria) to 18% (US) of people with anxiety, mood, or substance use disorders used mental health services in previous year according to World Mental Health Survey



The vicious circle of poor mental health and poverty

Determinants of poor mental health

- Social disadvantage
 - Poverty
 - Childhood adversity
 - Violence
- Environmental threats
- Political conflicts
- Poor social support
- Delayed intervention

Consequences of poor mental health

Loss of income

- Poor educational attainment
- Reduced employment opportunities
- Reduced productivitty
- Intergenerational transmission of poverty
- Higher risk of substance abuse
- Poor social network
- Unhealthy lifestyle
- Increased cardiovascular disease risk
- Poor residential conditions
- Different health seeking behaviour and treatment compliance



Swiss TPH S

Mental health

the impact of the pandemic

COVID-19 pandemic and mental health

Direct effect of pandemic

- Fear of contagion
- Perception of danger
- Infection
- Long COVID

Indirect effect of containment

- Financial and economic threats
- Social isolation
- Restrictions to healthy lifestyle
- Restrictions in access to health care



Mental health issues among the general population during the COVID-19 pandemic: a meta-analysis

January 2020 to June 2020:

- 28% depression
- 27% anxiety
- 24% post-traumatic stress symptoms
- 37% stress
- 50% psychological distress
- 28% sleep problems

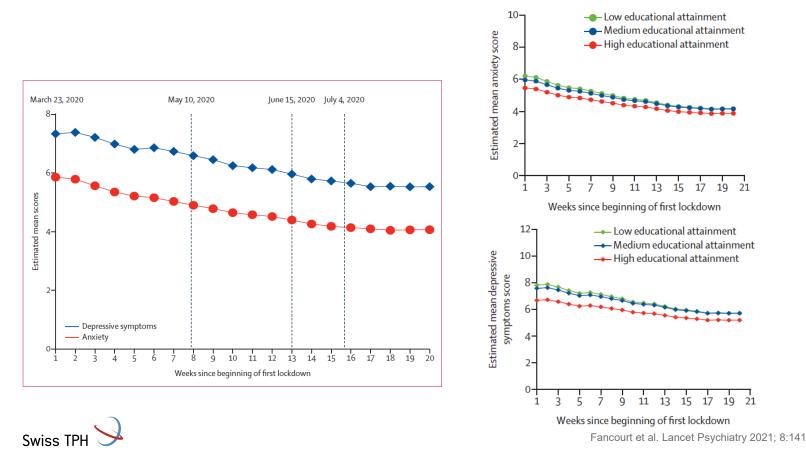
high compared to pre-pandemic different by prevalence of other stressors long-term course and consequences?

African Region								_				
Olaseni et al	Nigeria	215	502					_				
Heterogeneity: /2=NA			502			1						
Region of the Americas						- i -						
Liu et al	United States	286	898				-					
Heterogeneity: /2=NA			898			1						
South-East Asia Region						- i -						
Varshney et al	India	119	653									
Heterogeneity: /2=NA	inula	115	653									
neterogeneity. /NA			055									
European Region						. i						
Hyland et al	Ireland	184	1041		- 1							
Costantini et al	Italy	44	329		-							
Forte et al	Italy	629	2286									
Rossi et al	Italy	6666	18147									
González-Sanguino et al		550	3480				_					
Odriozola-González et al		1276	2530						•			
Parrado-González et al	Spain	707	1596					- e 1	_			
Seyahi et al	Turkey	232	917			- +-		_				
Levita et al	United Kingdom	106	1971									
Shevlin et al	United Kingdom	340	2025									
Heterogeneity: /2=99.7%			34322				>					
	(THE									
Eastern Mediterranean						1			_			
EI-Zoghby et al	Egypt	265	510					-				
Joseph et al	Saudi Arabia	277	534				_	-	-			
Fekih-Romdhane et al	Tunisia	199	603				-					
Heterogeneity: /2=NA			1647			1	V	\sim	\geq			
Western Pacific Region												
Guo et al	China	1944	2441									
Li et al	China	640	3637								_	
Li et al	China	160	1442									
Liang et al	China	84	584			- i -						
Ren et al	China	82	1172	1		1						
Sun et al	China	96	2091	- e		1						
Sun et al	China	338	1912		. I							
Tan et al	China	73	673		-							
Tang et al	China	67	2485		-							
	China	914	1210								-	
Wang et al											-	
Zhang et al	China	20	263									
Zhao et al	China	29	515		-	-						
Heterogeneity: /2=99.8%	(aaro-aaraw): b<0.	001	18425			-						
						- i						
Random-effects meta-a	nalysis		56447			4	>					
Heterogeneity: /2=99.8%	(99.5-99.9%); p<0.	001		_		_i_			, ,			_
Test for subgroup differen	ces: v2==96.87 df	=5. p<0.00	01	1	1		1			1	1	
reaction adogradp dilleren	οσο. Α 5-00.07, di	0, p=0.00		0	10	20	30 4	40 5	60 60	0 70	80	90



Proportion

The growth trajectories of depression and anxiety symptoms scores: non-representative longitudinal study in UK

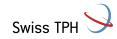


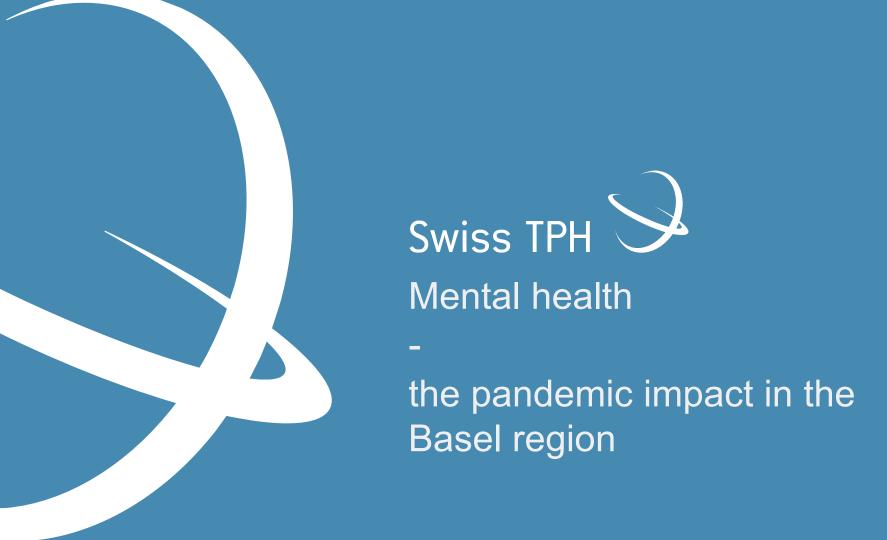
Research and evidence need

Population-based long-term studies

• Long-term individual mental health trajectories as a result of the pandemic

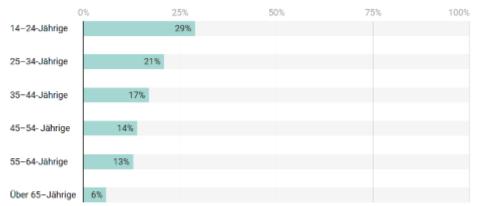
• Learning on determinants of resilience (personal; structural)





Impact of pandemic on depression and suicide in Switzerland

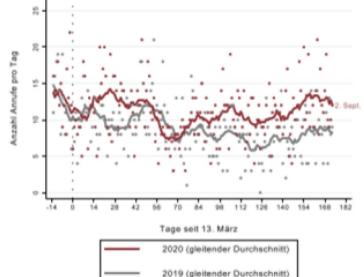
Häufigkeit schwerer depressiver Symptome nach Altersgruppe in Prozent



Die Resultate beziehen sich auf den Erhebungszeitraum vom 11.–19. November 2020. In diesem Zeitraum haben 11'612 Personen aus der gesamten Schweiz an der anonymen Online-Umfrage unter www.coronastress.ch teilgenommen.

Quelle: Corona Stress Study - Einbetten - Erstellt mit Datawrapper

suicide-related calls





COVCO Basel – a public health perspective on the pandemic impact

Impact of SARS-CoV-2

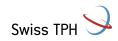




Impact of containment measures

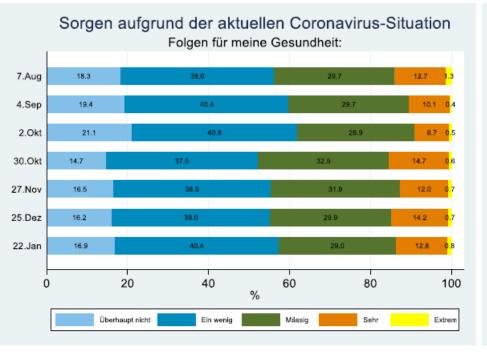




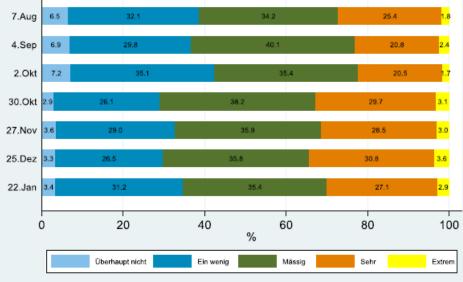


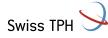


Fear of consequences of pandemic for health (own/family member).....



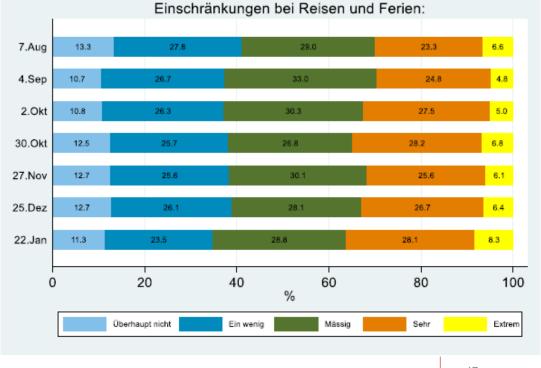
Sorgen aufgrund der aktuellen Coronavirus-Situation Die Gesundheit von Verwandten und Freunden:







....but more worries about travel/holiday restrictions



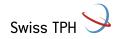
Sorgen aufgrund der aktuellen Coronavirus-Situation





Careseaking among persons in need of psychological support

	M2	M3	M4	M5	M6	M7	M8	
	(7. Aug)	(4. Sep)	(2. Oct)	(30. Oct)	(27. Nov)	(25. Dez)	(22. Jan)	
N	560	1274	1969	2816	3494	3913	4366	
Not seeking psycho- logical care out of fear of infection	4.00%	3.80%	3.31%	8.84%	7.98%	9.62%	12.22%	





Change in depressive symptoms depends on household income

	DEPRESSION												
		M2 (7. Aug)	M3 (4. Sep)	M4 (2. Oct)	M5 (30. Oct)	M6 (27. Nov)	M7 (25. Dez)	M8 (22. Jan)					
	Ν	543	1230	1909	2733	3392	3790	4234					
	Alle	2.95%	2.03%	1.78%	2.52%	2.83%	3.01%	3.54%					
	< CHF 3000	2.17%	4.72%	4.24%	6.42%	8.42%	5.90%	8.66%					
	CHF 3000 - 6000	1.55%	1.11%	1.86%	2.03%	3.17%	3.55%	3.58%					
	CHF 6000 - 9000	4.26%	2.31%	1.91%	2.34%	1.87%	2.36%	3.14%					
	CHF 9000 - 12000	1.19%	1.28%	1.16%	1.84%	1.51%	2.65%	2.28%					
	CHF 12000 - 15000	0.00%	0.00%	0.57%	2.54%	2.90%	3.69%	3.85%					
	> CHF 15000	5. <mark>4</mark> 5%	2.96%	1.79%	2.10%	2.68%	1.52%	2.83%					

Swiss TPH

Change in unhealthy lifestyle during pandemic

Increase in mean daily sitting hours 5.94 to 6.72

Change in body weight (+/- > 3kg) since start of pandemic: ~12%

Unhealthy eating behaviour: 15-20%, tendency for increase among 18-49 yrs

Increase in self-reported unhealthy media consumption: from 15% to 21% among 18-49 yrs

Increase in self-reported unhealthy alcohol consumption: from 5% to 10% among 49-65 yrs

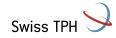




Temporal changes in lifestyle and addictive behaviour

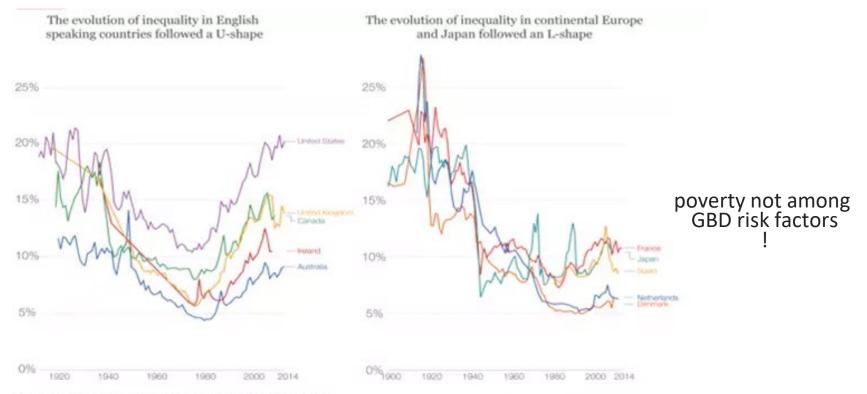
- Less physical activity
- Longer sitting hours
- Weight change
- Unhealthy eating behaviour
- Media use
- Alcohol consumption







The COVID-19 pandemic increased social inequality globally



Data source: World Wealth and Income Database (2018). This is income before taxes and transfers-

This data visualisation is evailable at DuWorldinData org. There you find the raw data and more visualisations on inequality and how the world is changing. Licensed under CC-BY-SA by the author Mas Roser.

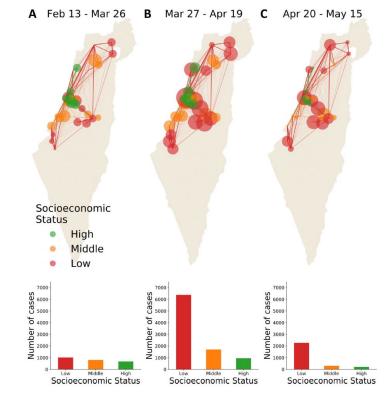


World Economic Forum 2020

https://www.weforum.org/agenda/2020/10/covid-19-is-increasing-multiple-kinds-of-inequality-here-s-what-we-can-do-about-it

Poverty – a main driver of the pandemic

- Poverty:
 - Less home office
 - crowded living space
 - Lower adherence to containments (hygiene; quarantine)
- Poor neighborhods for targeted lockdowns?:
 - Mind the social inequity and mental health gap!



Association between mobility and poverty in COVID-19 transmission in Israel



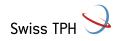
What medicine – What investments? Early Life and End-of-Life Medicine



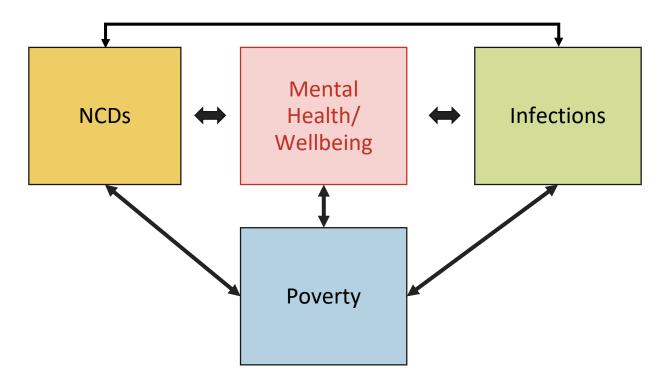
Rare diseases

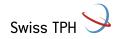
Alzheimer's Research UK Dementia

Defeat Dementia



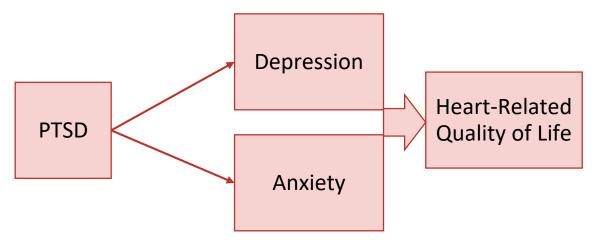
The integrated view on mental health





Post-Traumic Stress Disorder impact on heart related quality of life through depression and anxiety

CARMEN Study on heart disease patients in Palestine



- 20% lower heartQoL before the pandemic
- ...and now triple burden of pandemic, social inequity and conflict?



Goals of global mental health – 6 key action point

- Scaling up of mental health services as an essential component of universal health coverage
- Address barriers and threats to mental health
 - Lack of awareness of social and economic value of mental health promotion
 - Stigmatization and discrimination
 - Global challenges to mental health (e.g. climate change, migration, social inequity)
- Mental-health-in-all-policies (education, workplaces, social welfare, gender empowerment, child & youth services, health services, humanitarian assistance, environment, urban planning)
- Benefit from new opportunities for intervention (non-specialist; digital)
- Additional investments building on existing budgets (integrated mental care)
- Strengthen research

Lancet Commission on global mental health and sustainable development, Lancet 2018;392:1553

Acknowledgement



- COVCO Team under operational lead of Dr. M. Imboden, Swiss TPH
- Departments of Health Basel-Stadt and Basel-Landschaft

CORONA

- Corona Immunitas Team under scientific lead of Prof. Dr. M. Puhan
- SSPH+
- Corona Immunitas Program Funders

CARMEN Study Team

- An-Najah University, Nablus, Palestine (Profs. A. Alkayiat, H. Allabadi)
- ESKAS
- Freiwillige Akademische Gesellschaft

