Protecting the mental health of healthcare workers in Pakistan using telehealth during the COVID-19 pandemic

Letter to Editor

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The role of telehealth and its effect on reducing mental health burden from COVID-19 is of pressing concern. Telehealth is defined as the delivery of health education, health care, and health information sciences using remote technologies.[1] The psychological impact of the COVID-19 must be identified within the group of health care workers. Telehealth services are an area that requires imminent intervention for the support of health care workers in Pakistan, subjected to applicability and feasibility. The World Health Organization (WHO) announced the novel coronavirus as a Public Health Emergency of International Concern (PHEIC) on 30 January 2020.[2, 3] With the number of confirmed COVID-19 cases topping over 284,000 in Pakistan on 10 August 2020, the numbers may rise.[4] However, the impact on health care workers is yet to be measured on various levels in Pakistan. The psychological symptoms related to the COVID-19 infection have already been identified and assessed at the population level. These include first paranoia, and second anxiety-driven panic buying. [5] By substitution, these may apply to healthcare workers in Pakistan. The unpredictability and uncertainty of pandemic outbreak are yet to be evaluated in terms of international public health and the under-preparedness of health facilities in Pakistan. Health care workers in Pakistani healthcare centers have been under immense psychological and physical pressure with a high risk of contracting the virus, and inadequate personal protective equipment.[6]

The psychological pressure also relates to the lack of contact with family members as workers are urged to limit interaction to prevent the spread of COVID-19. The stigma towards contracting the infection and transmitting it to others aggravates mental health problems, which not only affects the decision-making ability of the healthcare worker but also influences the overall well-being. The need of the hour for telemental health purposes is first to build a team for mental health intervention, producing concrete online courses for the psychological impact of pandemics to guide solely health care workers.

Second, a psychological assistance hotline is required for healthcare workers to discuss struggles relating to patients, families, and themselves in their narrative. Lastly, telemedicine-based practices by counseling psychologists must be promoted to healthcare workers for support and enabling catharsis.

Examples that support the effectiveness of telemental health services such as text-messaging, depression, PTSD, anxiety, online forums, videoconferencing, and smartphone apps have been useful in promoting the delivery of mental health services.[7] While many individuals are aware of the mortality and transmissibility rates of COVID-19, the nation must be cognizant of the impact on the mental health of healthcare workers, in a short and long-term basis.

REFERENCES


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