



# PSYCHOSOCIAL CARE

MITIGATING IMPACT OF DISASTERS ON MENTAL HEALTH



**REFORMS THAT TRANSFORMED**

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**NATIONAL DISASTER MANAGEMENT AUTHORITY**  
MINISTRY OF HOME AFFAIRS, GOVERNMENT OF INDIA

# MITIGATING IMPACT OF DISASTERS ON MENTAL HEALTH

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## Background

### Widespread mental distress after pandemic outbreak

The novel coronavirus disease, COVID-19 as coined by the World Health Organization (WHO), had its origins in a cluster of unexplained cases of pneumonia in the city of Wuhan in China. It was declared a pandemic on 11 March 2020 by the WHO and has affected countries all over the world since. The sudden and unexpected outbreak of the COVID-19 pandemic has raised several concerns about its impact on people's mental health and the psychosocial consequences for society. According to the WHO, safety measures such as self-isolation and quarantining have affected the day-to-day activities, routines and livelihoods of people, leading to increased loneliness, anxiety, depression, insomnia, harmful alcohol or drug use, and self-harming or suicidal behaviour among them.



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"I was extremely hurt when I came to know that some people are misbehaving with those who are being advised home quarantine. We need to be sensitive and understanding. Increase social distancing but reduce emotional distancing.

”

- Shri Narendra Modi, Prime Minister  
Mann Ki Baat, Telecasted on 29 March 2020



There is emerging evidence of the direct and indirect psychological impacts of the pandemic – the direct impact being the distress of individuals who have confirmed positive for the disease and their near and dear, and the indirect impact being the constrained lives people must lead due to public policies and interventions to contain the pandemic.

India reported its first COVID-19 positive case on 30 January 2020, and when spread of the disease seemed inevitable, a nationwide lockdown was announced on 24 March 2020 to reduce the rate of transmission. The subsequent mass unemployment, homelessness, increase in gender-based violence, alcoholism, hunger, and poverty are some of the elements that led to mental health problems among the population. There was also an exponential increase in chronic stress, anxiety, depression, substance abuse and self-harming behaviour in the country.

A survey by the Indian Psychiatric Society also indicated a 20 per cent increase in mental illnesses in the country since the coronavirus outbreak. There were isolated reports from India of suicide as an outcome of excessive fear of contracting the virus as early as in February 2020, when the infection had not yet spread evenly across the



country. Two case studies in the Indian scenario indicated attempts at self-harm provoked by anxiety about developing the virus and dying from it.

### Groups vulnerable to the psychological impact of COVID-19

Some groups are more vulnerable to the psychosocial impacts of the pandemic, particularly those who are already infected, those who are at high risk of contracting the virus, and those with pre-existing psychiatric, medical or substance-abuse issues. Post the pandemic, risk factors such as exposure to trauma, low social support, pre-existing psychiatric illness, and additional factors, like high population density in the urban areas, added to the likelihood of infection and negatively affected the mental health of the vulnerable segments of the population.



My own family, relatives and friends are not contacting me in this period and you, an unknown person whom I have never met, are spending your time comforting and guiding me. I never expected this.



- COVID-19 affected patient

## Healthcare providers

As healthcare providers come in direct contact with the virus, they become increasingly prone to emotional distress as they fear contracting the virus themselves and infecting their family members and friends. They also work under very difficult conditions. They have longer working hours during any public health crisis and often face a shortage of personal protective equipment. Earlier outbreaks of communicable diseases such as SARS or Ebola have had significant psychological impacts on healthcare workers, and the high-pressure work environment and scarcity of resources diminished their motivation levels. The frontline healthcare workers combating COVID-19 are also going through similar psychological experiences. There is also the social isolation they must put up with because of their high exposure to and risk of contracting COVID-19 (UNICEF, 2020).

## Police Personnel

The COVID-19 pandemic has created social upheaval and altered norms for all sections of the society, but its effects on the first





Source: <https://www.news18.com>

responders have been particularly profound. Law enforcement officers have been expected to coordinate local shutdowns, encourage social distancing and enforce stay-at-home mandates, all the while completing their other responsibilities, for which they are already understaffed and underfunded.

Policing is one of the most mentally taxing occupations anywhere in the world. It involves long and often rotating shifts and increased need for vigilance during crises – all this in an atmosphere of lack of public support. It is for these reasons that it has been observed that law enforcement authorities like police personnel are at a higher risk for developing mental health issues. This is true of even non-pandemic times, and during pandemic times their stress increases manifold. They are also more likely to suffer from depression, experience familial strife, substance abuse, and suicidal tendencies in some cases.

The sudden disruption of society as a result of COVID-19 is particularly concerning as it carries a high probability of impacting the mental health of police personnel. Law enforcement officers are not immune from the stress that COVID-19 places on the general population; they too face economic uncertainty, fear of contracting the virus, social isolation, etc. In fact, they are likely to be more affected as they fall in the category of 'essential workers'.



One such case that stays with me was this elderly gentleman who enquired about my well-being and advised me to call and encourage the frontline workers (police, doctors, nurses, etc.) instead. Very selflessly he pushed his needs aside and highlighted others' needs!



- Volunteer counsellor

### Essential services personnel

People working in essential services had to discharge their normal duties while being exposed to the additional risk of infection from COVID-19. Though the practice of wearing masks, gloves and personal protective equipment mitigated the risk to some extent, sanitation workers in different urban areas of the country were in a highly vulnerable situation as disposal of masks etc., carried the risk of spread of the virus.

### Central Industrial Security Force (CISF)

CISF personnel too were a very vulnerable lot as COVID-19 spread in India, as they were in charge of screening passengers at airports, checking the credentials of passengers, the sanitisation of luggage, ensuring security at airports, etc., all of which increased their own risk for contracting the infection. This resulted in considerable mental stress among the force.

### Media infodemic and misinformation during COVID-19

The COVID-19 pandemic is the first in history to see use of technology and social media on a massive scale to keep people safe, informed, productive and connected. At the same time, the very technology we rely on to be connected and informed is being used to perpetuate and amplify an 'infodemic' that continues to undermine the global response and jeopardise measures to control the pandemic.

'Infodemic' refers to an overabundance of information, both online and offline. It includes deliberate attempts to disseminate wrong information to undermine the public health response and advance the alternative agendas of various groups and individuals. Misinformation and disinformation can be harmful to people's physical and mental health, lead to increased stigmatisation, threaten precious health gains and lead to poor observance of public health measures, thus endangering a nation's ability to stop the pandemic.

Misinformation costs lives. Without public trust and correct information among the public, diagnostic tests will go unused, immunisation campaigns (or campaigns to promote effective vaccines) will not meet their targets, and the virus will continue to thrive. Furthermore, disinformation can lead to confusion in the minds of people with respect to distinguishing between the myths and facts about the pandemic, that can cause additional stress in them. It is important that information be verified before circulation to avoid stigmatization of individuals diagnosed with the virus. Our aim should be to fight the virus and not the person.

It is understandable that at a time like this, people are likely to be anxious, worried and overwhelmed because of the constantly changing alerts and media coverage regarding the spread of the virus. Psychosocial interventions are therefore important, to keep the population informed and to assist them in following mental health tips and strategies to look after themselves as well as others in the community.



One of the patients, towards the end of the call wanted to know more about me and enquired about my well-being and age. On hearing that I was a senior citizen myself, he advised me to take care, strictly stay at home to not expose myself to the virus!



- Volunteer counsellor



“ This is a thoughtful and farsighted move by NDMA. The contribution of NDMA's counsellors in helping keep up the morale of the Delhi Police, when COVID-19 struck the force, was immense. The system of counselling is still going strong.”

- **S. Sundari Nanda**, IPS,  
Special Commissioner of Police (Vigilance),  
Delhi Police

## Actions taken by the current government

### Psychosocial interventions

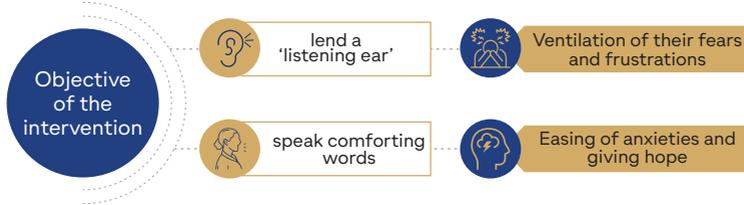
In the pandemic scenario, psychotherapy (a form of counselling) has proved to be an essential component in addressing the emotional fallouts of self-isolation, job loss, grief, and fear of contagion. It has been noted that psychological first aid (PFA) helps to reduce the immediate effects of any traumatic event and has been effective during outbreaks of large-scale disasters or epidemics in the past, like the SARS disease.

Psychosocial interventions refer to strategies that target excessive, uncontrollable stress or concern, and persistent excessive arousal. Mental health professionals like psychologists, psychiatrists, and psychiatric social workers help the patients and the larger community to understand the potential impact of the virus and help the infected persons, their families and societies deal with the potential threat to their physical and mental health. Psychological assistance services, delivered on the telephone or internet, and application-based counselling or interventions have been widely deployed by local and national mental health institutions as a response to the COVID-19 outbreak. Availability of transparent, appropriate and timely information is vital for helping infected persons and their family members maintain their emotional equilibrium, and also for helping the general population keep calm.

## Taking counselling to the people – a unique 'reverse' call helpline

To reach counselling to COVID-19 patients who are unlikely to seek or obtain psychiatric help, the Government of India initiated a helpline for people testing positive for COVID-19, whereby psychosocial support is provided to them in the form of remote counselling. Being isolated and quarantined, COVID-19 patients face a myriad of anxieties and worries – as to the uncertainty of their recovery, their comorbidities, the health and welfare of their near and dear, financial security, etc. This often leads to feelings of loneliness, hopelessness and frustration in them.

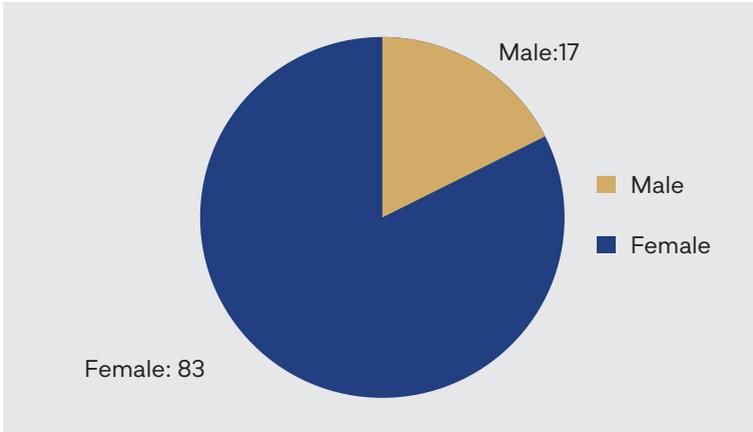
NDMA enlisted volunteer counsellors and engaged their services for tele-counselling of COVID-19 patients. The objective of this intervention is to offer basic psychosocial support to people who have tested positive for COVID-19 through tele-counselling/'compassionate talking' by qualified and experienced counsellors. Such compassionate talking or counselling entails specific components of PFA, such as listening non-judgmentally, providing reassurance and general information, and encouraging self-help and other support strategies.



Being conducted remotely, such counselling does not entail any psychological assessment or treatment. It is not intended to fulfil the objectives of conventional psychosocial counselling, such as providing practical assistance for meeting any immediate needs, helping establish social supports, or providing linkages with referral services.

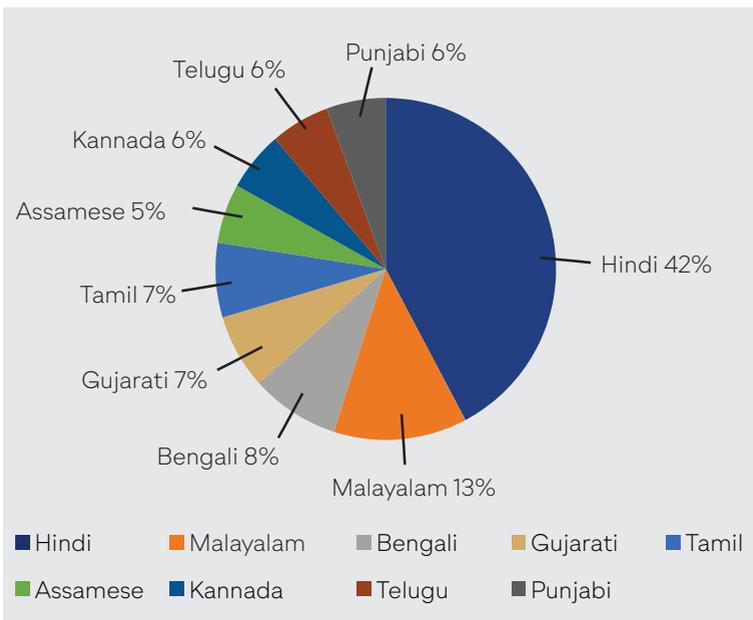
This intervention is unique and is one of its kind in the country as it is a kind of a 'reverse' helpline, whereby people testing positive for COVID-19 were not required to call up the helpline. Instead, the counsellors proactively rang up the patients to check on their psychosocial state and provide them some relief in the form of counselling. The people who tested positive are relieved to get such a call, where the caller promises to hear out their problems and thought processes and keep

Chart 1 : Gender distribution of counsellors



everything confidential. In cases where the person requests for a call back or exhibits the need for further counselling, the necessary service is arranged by NDMA.

Chart 2 : Major languages spoken by counsellors



The volunteers for this counselling service have been selected after a thorough screening process, which included verification of their qualifications and experience. These volunteers are mainly psychiatrists, clinical psychologists, counsellors and psychiatric social workers. The counselling is conducted remotely from different locations across the country.

### Training and supervision of counsellors

NDMA has collaborated with 'Rahbar', Tata Institute of Social Sciences (TISS), Mumbai, to provide training and supervision for counsellors, both for the counselling work itself and for documentation of the initiative.

Four training sessions were conducted by TISS for volunteer counsellors enrolled with NDMA for the psychosocial support helpline. The sessions were conducted weekly for a duration of two hours via a video-based platform. Based on the needs and challenges articulated by the counsellors, and the emerging psychosocial challenges of people diagnosed with COVID-19, a training plan was designed and delivered. The following table outlines the content and process of training sessions.

**Table 1 : Training sessions for volunteer counsellors**

Date of Session	Content Covered	Methodology
3.9.2020	Working with grief	Case discussion, reflective activity and theoretical review
7.9.2020	Family focused interventions	Case discussion, reflective activity and theoretical review
1.10.2020	Supporting the elderly and ethics in tele-counselling	Case discussion, reflective activity and theoretical review
15.10.2020	Micro-skills and interventions	Case discussion, reflective activity and theoretical review

29.10.2020	Review of Counselling Skills and Interventions	Skill building exercises
12.11.2020	Managing challenging calls	Experience sharing, skill building and conceptual review
26.11.2020	Counsellor's growth and motivation	Experiential activity and reflective discussion
10.12.2020	Review, Feedback and Planning for 2021	Reflective Discussion

The supervision sessions conducted by TISS were aimed at motivating the counsellors, enhancing their professional resilience, building their skills, and promoting reflective practice among them. Supervision sessions were conducted in a group format, which helped counsellors utilise the opportunity of peer learning through experiential activities, reflective dialogue and skill-building tasks. The focus of the supervision sessions was modified as per the needs and competencies of the counsellors.

### Mobile application for India-wide counselling

The counselling is being conducted through a specially designed mobile application which is installed in the counsellors' mobile phones. This mobile application ensures that neither the patient's number is visible to the counsellor nor the counsellor's number to the patient. NDMA collects the data of people testing positive for COVID-19 and feeds this information into the application installed in the counsellor's phone. When the counsellor calls up a COVID-19-positive person from the application, only the basic information

required for counselling of the person is revealed. This ensures confidentiality of the personal details of both patient and counsellor.



## Psychosocial issues faced by COVID-19 patients

Counsellors offer psychosocial support through COVID-19 education, bereavement counselling and by building a sense of optimism in patients. The various issues that came up during the counselling of COVID-19-positive people included:

- Confusion regarding prescribed duration for isolation/quarantine  Lack of clarity about isolation/quarantine protocols followed by state
- Concerns about testing  Lack of clarity regarding chances of infection post recovery
- Inability to interpret test report  Elderly patients needing assistance for daily routines
- Concerns about personal health, welfare of family  Pregnant women needing antenatal care
- Anger at being quarantined  Physically challenged people needing assistance
- Worries pertaining to the future  Patients with co-morbidity needing medicines for the other ailments
- Worries about social stigma and discrimination that their families may face  Provision of food appropriate for children
- Stress over senior family members who are at high risk  Provision of female hygiene products
- Feelings of loneliness
- Worries pertaining to family members not admitted to hospital
- Frontline health workers not getting to meet family
- Lack of contact with family
- Grief due to loss of loved ones
- Worry about financial losses and debts

### **Case Study :**

*Post diagnosis of a COVID-19 affected, 65 year old male, living in isolation*



### **Background**

- *Patient diagnosed of COVID19 and after being treated in a hospital was prescribed self-isolation at home.*
- *Suffered from mild to medium PTSD symptoms, borderline Hypertensive and diabetic.*
- *Suffered from isolation anxiety and mild to medium PTSD. Easily triggered irritable because of the multiple follow ups from various governmental institutions.*
- *Was asked to self-isolate which aggravated his situation*



### **Method Followed**

- *Counselor started off by introducing himself from NDMA and the patient perceived it as another governmental institution enquiring about his health and try to trace his primary and secondary contacts.*

- *However, managed to convince the person that it was an anonymous helpline that can provide psycho-social help. The person was surprised in the beginning but later began to speak out and share about his experiences with COVID-19. This brought to fore the aspects of existential isolation and the plethora of conflicting news that he heard everyday. Since the patient was advised isolation both from a medical and social point of view, he felt that his social realm had suddenly become empty.*
- *At the age of 65 years, he wished to avoid the negative stereotypes associated with ageing. He was evidently stressed out by the current situation. When called up, the patient was already under trauma because of the COVID-19 diagnosis and has been answering calls from various organisations. He got irritated when asked about his present situation.*



### **Client benefits and outcome**

- *Talking to someone who could lend an ear greatly relieved him and he expressed that he felt as if a void had been filled. He appreciated that someone understood his whole realm and answered him.*
- *Discussion on some of his problems lead him towards a more spiritual and transcendental mindset. The patient felt connected and cared for without someone just asking about his condition in a pseudo-responsible monotone.*
- *Though it was not a complete 'Existential Therapy", it bordered on it, as it addressed not only his anxieties about his current situation but also took into cognisance his past experiences in a holistic manner. The cathartic outcome of the discussion has been fulfilling to the patient.*

## Intervention for Delhi Police personnel

NDMA started a helpline initiative in mid-April 2020 to offer basic psychosocial support to people diagnosed with COVID-19 through tele-counselling carried out by qualified and experienced counsellors. NDMA also collaborated with Delhi Police to provide psychosocial help to their personnel who were infected with COVID-19 as a result of working in the community on the frontlines.

Conversations with the police personnel revealed several particular concerns – apart from the standard logistical and social problems that are the lot of police – which were impacting their mental health. They feared infecting their families; they had health concerns; they were distressed due to their financial burdens and upset at the social stigma they faced. Some of them also said the residents of their housing societies had objected to their staying in the vicinity once they contracted the virus, making the police personnel feel alienated and hurt. It was observed that out of the concern to protect their families, the personnel did not confide in them to share their feelings. At times, the hyper-masculine culture of policing also played a role in deterring them from allowing themselves to appear vulnerable in front of anyone, including the counsellors.

Some methods to improve mental health of the police officers, as suggested by counsellors, include programmes that encourage them to positively cope with the situation through activities such as yoga and meditation. Talking to counsellors about their mental health concerns and following the interventions recommended by them have also been beneficial. As police officers continue to deal with the stress of potentially contracting the virus, it will be important for department heads to help ease their stress as much as possible and for officers to identify positive coping strategies for themselves.



Emphasis on Family support



Re-iteration of faith in God



Positivity about Recovery



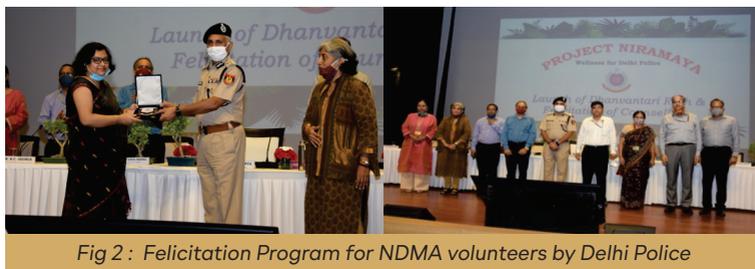
Sharing of positive coping strategies



Expression of relief after sharing anxieties



Expression of happiness on being contacted



*Fig 2 : Felicitation Program for NDMA volunteers by Delhi Police*

Following the continued success of NDMA's initiative in counselling Delhi Police personnel diagnosed with COVID-19, the authorities at Delhi Police felicitated the individuals who were involved in the exercise from the NDMA side. The felicitation programme was held on 18 August 2020.

## Impact

### Over 1 lakh COVID-19 patients called by counsellors

As at end November 2020, the counsellors volunteering with NDMA had reached out to over 1 lakh COVID-19 patients and had counselled more than 54,000 individuals diagnosed with the disease. The NDMA volunteer counsellors intervened by providing them a space to express their feelings and be heard. The counsellors also educated the patients on the various triggers that could have an impact on their mental health, providing them advice on how to normalise their mental health. Supportive psychotherapy worked well with people by reassuring them that things would get better. A few instances of anxiety among the patients were navigated by helping them with grounding techniques, mindfulness and breathing exercises. Anger management was also used as an intervention where individuals felt very frustrated by their condition.

Additionally, counsellors helped individuals to recognize what matters were under their control and what active steps they could take towards their emotional and physical well-being. Some of these steps included acknowledging their feelings by maintaining a journal, talking to others, and channelling their emotions into something creative. Following a healthy routine – like eating healthy meals, getting some

form of physical exercise and good sleep – could also have a positive impact on their thoughts and feelings, they were told.

### Research and documentation

NDMA and TISS decided to produce a joint research report to document the processes and insights generated from the Psychosocial Care Helpline as outlined by counsellors. A draft report has been submitted to NDMA and is in the process of finalisation.



*Fig 3 : Documentation of the initiative by NDMA on mental health*

Training modules are also in the process of being developed by TISS. The topics covered would be

- Psychological first aid during a pandemic
- Supporting clients in high risk and distress
- Mitigating social stigma
- Ensuring ethical practice and self-care for counsellors

**Table 2 : Monthly distribution of calls**

Months	Total calls made	Calls above 2 minutes duration
April	2677	578
May	8046	1624
June	2573	676
July	11183	5363
August	25487	12476
September	19705	9638
October	25641	12464
November	23681	11481
Total	118993	54300

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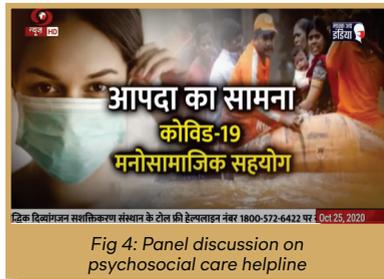
It is so kind of your organization to check on me in this moment of distress when my near and dear ones are not available. I can't thank you enough!

”

- COVID-19 affected patient

### Awareness generation for the initiative

On 25 October 2020, Doordarshan (DD) News aired a show on the public mental health initiative started by NDMA to support people diagnosed with COVID-19. The panelists included Shri Sandeep Poundrik (Additional Secretary, Mitigation, NDMA), Dr Chetna Duggal (Associate Professor, TISS), and Shri Jayakumar C. (Associate Professor, National Institute of Mental Health and Neuro Sciences). Various aspects of the psychosocial impact of the pandemic were discussed, and the work done by the helpline initiative to reduce pandemic-related stress among the public was showcased. The role of training of mental health professionals to provide counselling support in the aftermath of disasters was also highlighted.



NDMA also ran a mental health campaign on social media. Dr. H.S. Aditya, Consultant Neuropsychiatrist and Medical Director of Manasa Neuropsychiatric Hospital, Bangalore gave important tips on combating various mental health issues arising or aggravating because of the COVID-19 Pandemic. These tips were broadcast on the NDMA Twitter handle and included topics like combating insomnia, loneliness of physical distancing, lockdown blues etc.

## Conclusion

The practice of proactively reaching out to COVID-19 patients and providing them initial psychosocial care has not only benefited the patients but has also provided valuable feedback to the overall system for managing COVID-19 and taking corrective steps to mitigate its negative impact. NDMA is now working to upscale this initiative in partnership with institutions with expertise in psychosocial care and public health management systems, and with technology providers.



“ The Psychosocial Care Helpline initiative was a thoughtful move by the NDMA, keeping in mind the importance of supporting the emotional well-being of individuals who were diagnosed with CoVid-19. Through Rahbar (an initiative of Tata Institute of Social Sciences) we collaborated with the NDMA to provide training and supervision support to the counsellors who volunteered in the initiative. It has been inspiring to see how professionals from the mental health community have come together for a common cause to reach out to individuals who might not otherwise have had access to psychosocial support and care.”

**Dr Chetna Duggal**, Project Director,  
Rahbar Associate Professor, School of Human Ecology,  
TISS, Mumbai

***The details of the patients are confidential and hence not revealed.***



“India's motto is  
'Reform, Perform, Transform'.”

Prime Minister **Shri Narendra Modi**