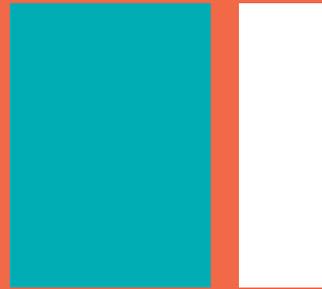


# Psychosocial Support for People Testing Positive for COVID-19

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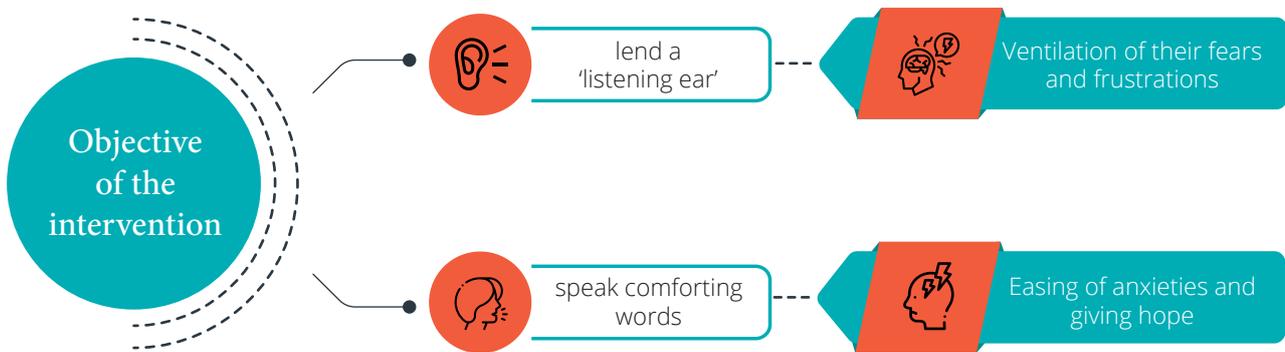
The World Health Organization has expressed its concern over the impact of the global pandemic on the mental health and psycho-social concerns of people. It is speculated that safety measures like self-isolation and quarantine have affected usual activities, routines and livelihood of people that may lead to increased loneliness, anxiety, depression, insomnia, harmful alcohol or drug use, and self-harm or suicidal behavior (World Health Organization, 2020). The lockdowns around the world have also led to an increase in domestic violence cases as victims of violence are restricted to stay in the same place as their perpetrators, with no escape. Stigma and discrimination against person(s) who have tested positive for COVID-19 is another major source of distress for them, in addition to the already existing physical and mental health issues. A recent survey by the Indian Psychiatric Society indicated a twenty percent increase in mental illnesses in the country since the coronavirus outbreak. It is understandable that at times like this, people may be feeling afraid, worried and overwhelmed with the constantly changing alerts and media coverage regarding the spread of the virus. Psychosocial interventions are therefore important, to keep the population informed and assist them in following mental health tips and strategies to look after themselves as well as others in the community.

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

In keeping with the this need, NDMA initiated a helpline for people testing positive for COVID-19 whereby psychosocial support is being provided to the latter in the form of remote counseling. Being isolated and quarantined, the COVID-19 patients face a myriad range of anxieties and worries pertaining to their own health including uncertainty of recovery, co-morbidity, health and welfare of their near and dear ones, financial security etc. which lead to feelings of loneliness, hopelessness and frustration. NDMA has enlisted volunteer counselors and engaged them to counsel the patients through telephone.

The objective of the intervention is to offer basic psychosocial support to people who have tested positive for COVID-19, through telephonic counseling / 'compassionate talking' by qualified and experienced counselors. Such compassionate talking or counseling entails specific components of Psychosocial First Aid (PFA) such as: listening non-judgmentally; giving re-assurance and general information; and encouraging self-help and other support strategies.

Being conducted from a remote place, such counseling does not entail any psychological assessment or treatment. It is not intended to fulfill the objectives of conventional psycho-social counseling such as: providing practical assistance for meeting immediate needs; helping establish social supports; and 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 do not call up the helpline but are instead called up for checking on their psychosocial state and providing some relief in the form of counseling. Most of the times people testing positive are relieved to get such a call where the caller promises to hear out their problems and thought processes and keep everything confidential. In cases where the person requests for call back or exhibits need of further counseling, the same is arranged by NDMA.

The volunteers for this counseling service have been selected after a thorough screening process which included checking for appropriate qualification and experience. These volunteers are mainly Psychiatrists, Clinical Psychologists, Counselors, Psychiatric Social Workers. They are conducting the counseling from remote places in different parts of the country. Apart from English and Hindi, these counselors speak a variety of regional languages, which enables them to communicate effectively with the beneficiaries.



**Figure 1:** Mobile Based Application for Calling

The counselors were provided necessary guidance on operational procedures, ethics and mental health advisories issued by NDMA as well as the Ministry of Health and Family Welfare, which would need to be strictly adhered to while carrying out the service. On completion of the service a certificate of appreciation is provided to them.

The counseling is being conducted through a specially designed mobile application which is installed in the counselor's mobile phones. This mobile App ensures that neither the patient's number is visible to the counsellor nor the counsellor's number is visible to the patient. NDMA collects data of people testing positive for COVID-19 in India and feeds it into the application installed in the counselor's phone. When the counselor calls up a COVID-19 positive person from the app, the app only reveals the basic information required for counselling of the person. It does not reveal the phone number to the counselor. This ensures confidentiality of the details of the patients as well as the counselors.

These counselors offer psychosocial support to the patients in the form of COVID-19 education and bereavement counseling as well as enabling catharsis and inspiring hope. The various types of issues which the COVID-19 people vent out to the counselors include:

- Confusion regarding prescribed duration for isolation/quarantine
- Concern about testing
- Concern about lack of knowledge about test report result
- Concerns about own health, welfare of family
- Anger regarding quarantine
- Worries pertaining to what the future holds
- Worries about stigma and discrimination that family may face
- Stress of family members due to high risk age of patient
- Feelings of loneliness stemming from separation from near and dear ones
- Worries pertaining to family members not admitted in hospital
- Frontline health workers not getting to meet family
- Lack of contact with family due to phone connectivity issues



# Client Overview — —

65 year old male, living in isolation, post diagnosis of COVID-19.

## Background

- Patient diagnosed of COVID-19 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

## Client benefits and outcome

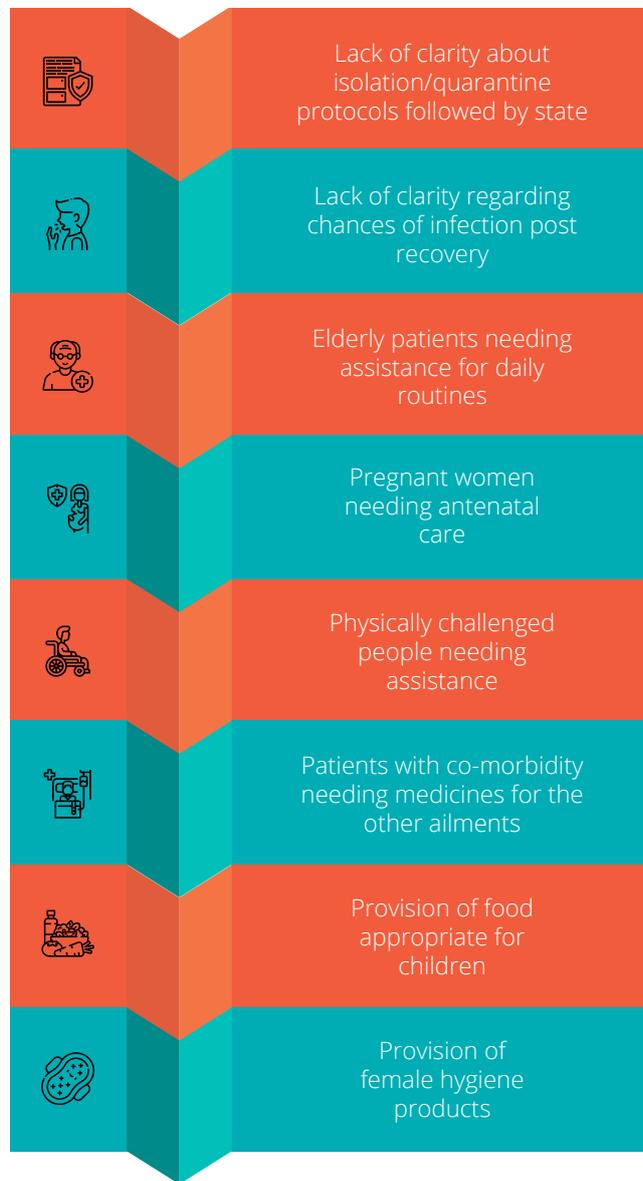
- Talking to someone who could lend an ear greatly relieved him and he expressed that he felt as if void had been filled. He appreciated that someone understood his whole realm and answered him.
- Discussion on some of his problems lead him towards a more spiritual and transcendental mindset. The patient 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.

## Method Followed

- Counselor started of 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

These counselors maintain a record of the different types of psychosocial and other problems faced by them and submit it to NDMA on a daily basis. Though this helpline is specifically meant for psychosocial help, NDMA communicates with the state government regarding issues faced by the patients. At times NDMA has also intervened and communicated with relevant authorities for solving certain critical problems faced by individual patients.

## Issues faced by patients



## Inspiring hope and positivity



## Case Escalation by NDMA

Seema (name changed) a female patient aged 23 years from Madhya Pradesh was in advanced stage of pregnancy. Being Covid 19 positive, she had been in quarantine centre for over one month. She was tested four times for Covid-19 but the test results were not shared with her. Having been cured of the disease, she was desperate to go home. Case was verified and taken up with the local administration by NDMA. The intervention bore fruit and the lady got discharged from the Centre immediately. The latter profusely expressed happiness and gratitude.

# From a Counselor's Diary...

*This was a 30 year old female who had tested positive for COVID 19. I spoke to her sometime back. She had just got discharged from hospital after which she was in home quarantine.*

*She told me about how they (her husband and herself) sensed that they should get themselves checked because of having slight fever and breathing problems. She mentioned that even now when she thinks of those days or about the COVID-19 she feels breathless. She narrated a few more instances of anxiety. I consoled her saying that the circumstances were quite demanding and it's normal to feel a little worried and asked if this is happening too often that it disturbs her daily functioning. She rated it 7 on 10, affecting her daily functioning. So I asked her about her past. She mentioned that she had always been a person who tends to get worried and when that happens she feels panicky and breathless.*

*I asked her to share her thoughts on the present COVID-19 situation and asked, "what did you do when you felt breathless?" She said, "I immediately got myself tested". I pointed out to her, "you did what you felt was right, acted on your feelings, took timely action, and therefore you have recovered." I encouraged her to appreciate herself for taking timely action.*

*I asked her to ask questions like, "What makes me anxious?," "what do I feel when anxious?," "Are my thoughts always right like this time?"*

*Her answer to the last question was "No". I told her about the cognitive distortion we may all feel sometimes when we see either black or white and miss out all the grey areas.*

*Her belief that feeling worried means that's something unpleasant would happen had to be worked on by following a thought diary. This could help her to understand the source of the issues and work with it. I also explained how to use deep breathing and relaxation exercises to calm herself when she felt anxious.*

*She was thankful for the support and guidance. She said that she felt better by talking and would definitely follow the exercises I suggested.*

Till the third week of July, more than 50 counselors had spoken to over 10,500 COVID-19 patients. NDMA is collaborating with Tata Institute of Social Sciences, Mumbai for providing regular training and supervision to the volunteer counselors, documentation, and analysis of the feedback received from the counsellors. Such analyses and documentation can provide an otherwise un-researched insight into the psychosocial status of the COVID-19 patients. Such an insight could form a basis for the design and formulation of future psychosocial care interventions.

The practice of proactively reaching out to COVID-19 patients and providing them initial psycho-social care has not only benefited the patients but has also provided valuable feedback to the overall system for managing COVID-19, and take corrective steps. NDMA is now working to take this to scale, in partnership with institutions with expertise on psycho-social care, public health management system, as well as technology providers.





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