



Review of COVID-19 Mental Health Disparities: Evidence, Mechanisms, and Policy Recommendations for Promoting Societal Resilience

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DESCRIPTION

The global health emergency of COVID-19, as well as its economic and social consequences, has disrupted almost every aspect of life in all social groups. However, people of different ages feel its effects in different ways. The COVID-19 crisis poses significant risks to young people, especially vulnerable youth, in terms of education, employment, mental health and disposable income. Furthermore, while young people and future generations will bear the brunt of the long-term economic and social consequences of the crisis, their well-being may be overshadowed by short-term economic and equity considerations. Governments need to anticipate the impact of mitigation and recovery measures across different age groups to avoid deepening intergenerational inequalities and engage young people in building societal resilience. Based on survey results from 90 youth organizations in 48 countries, this brief outlines practical steps governments can take to design inclusive and equitable recovery measures that leave no one behind. Inequality, both social and economic, is a chronic stressor that erodes the mental and physical health of marginalized groups and undermines overall societal resilience. We present evidence of greater increases in mental health symptoms during the COVID-19 pandemic among socially or economically marginalized groups in the United States, including people with low income or homelessness, racial and ethnic minorities, women, and lesbian, gay, bisexual, and transgender people. Queer and questioning communities, immigrants and migrants, children and people with histories of childhood and gender adversity. Based on this evidence, we suggest that reducing social and economic inequality would benefit the mental health of the population and society's resilience in the face of future crisis. We propose concrete, actionable policy, intervention, and practice recommendations that would strengthen the five "pillars" of societal re-

silience: Economic security and equity, affordable health care, including mental health services, combating racial injustice, and promoting respect for diversity, equity, and inclusion, child and family protection services and social cohesion. Although the recent pandemic has exposed and deepened the stark inequalities of our society, rebuilding efforts provide an opportunity to rethink societal resilience and policies to reduce various forms of inequality for our collective benefit. Many observers believe that voice and/or video outreach is superior to email and text messaging. Special efforts should be made to connect with people who are typically marginalized and isolated, such as the elderly, undocumented immigrants, the homeless, and people with mental disorders. Social media can also be used to connect groups and direct individuals to trusted mental health resources. These platforms can also improve check-in functions to maintain regular contact with individuals and to allow people to share information about their health and resource needs with others. Despite all these measures, some segments of the population will remain lonely and isolated. This suggests the need for remote approaches to outreach and screening for loneliness and related mental health conditions to provide social support.

CONCLUSION

As a result of their work, health workers across health systems and disciplines face significant mental health stressors, burdens and problems. This is especially true for those working on the front lines of public health crises, with additional challenges for those working in impoverished, low-resource settings or in settings where stigma is prevalent. The COVID-19 pandemic has exposed the important and invaluable work that frontline and other healthcare workers perform daily in difficult circumstances, as well as the limitations of global health systems. Before the memory of the pandemic response fades,

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appropriate measures and evidence-based interventions must be put in place and implemented to protect the mental health and well-being of healthcare workers not just during public health crises, but on an ongoing basis. The measures and policy recommendations outlined in this article are just a few of the many effective interventions that can reduce the likelihood that healthcare providers will suffer long-term psychological harm as

a result of COVID-19 and others.

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CONFLICT OF INTEREST

The author's declared that they have no conflict of interest.