

Mental Health - comparative study on mental health responses (both public and private) during the COVID-19 pandemic in Southeast Asia

Overview

As countries grapple with the unprecedented COVID-19 virus, **mental health remains one of the most neglected areas in public health agendas**. According to a 2021 WHO survey,¹ Mental health conditions make up **20% of years of life lost** due to disability and are associated with up to **~768 billion GBP per year in economic losses**. Close to **300 million people are living with a mental disorder**, while **death from suicide (800,000 deaths / year) is a leading cause of death among young people**. More than 80% of people experiencing mental health conditions **do not receive appropriate treatment**.

Considering the **adverse pandemic-related effects on mental health in Southeast Asia (SEA)**, it is crucial to examine this phenomenon to provide the necessary support and care to communities during these trying times. The ongoing COVID-19 pandemic has **prompted governments and non-governmental organisations to move from cycles of crisis response to recovery and reform with astonishing speed**.

We conducted a comparative study (comprising a desk review and stakeholder consultations) to identify **key government and non-government mental health responses for the general population during the COVID-19 pandemic** focused on the four BHP SEA countries - **Malaysia, the Philippines, Thailand and Vietnam**.

Country spotlights - impact of COVID-19 on mental health, and immediate key responses

Malaysia



Impact: Increase in suicide cases reported in 2020 (631 cases) compared to 2019 (609 cases).² From January to March 2021 alone, a total of 336 reported suicide cases.³

Reaction

- Revival of the National Suicide Registry Malaysia - to facilitate development of policies and long-term solutions in preventing suicides.⁴
- Five-year blueprint (2020-2025) to promote and sustain good mental health, as part of the National Recovery Plan, Malaysia's Roadmap to Safely Exit the COVID-19 Pandemic.⁵

Thailand



Impact: As of 2020, more than 3 million people in Thailand live with poor mental health and face stigma about their psychological well being.⁹ Increase in number of suicides of more than 20% between 2019 to 2020.¹⁰

Reaction

- Government's plan to "Combat 4th Wave of COVID-19: C4" - depicted by psychic trauma, mental illness, economic injury and burnout.¹¹
- Mental Health Crisis Assessment and Treatment Team set up to address the mental health impacts of COVID-19.¹²

Philippines



Impact: Costs of mental health conditions in the Philippines currently 1.01 billion GBP per year (0.4% of GDP) - 39.42 million GBP in direct healthcare costs and 0.97 billion GBP in indirect workforce and productivity costs.⁸

Reaction

- Department of Health incorporated mental health and psychosocial services into their COVID-19 emergency responses.⁷
- The National Mental Health program was rolled out, and guidance for agencies to provide mental health and psychosocial support services were released.⁸

Vietnam



Impact: A study of 1412 18-39 year olds residing in Vietnam during the pandemic showed 35.9% experiencing psychological distress, 23.5% exhibiting depression, 22.3% exhibiting stress, and 14.1% experiencing anxiety.¹³

Reaction

- Ministry of Health issued a National Response Plan including task forces comprising of mental health professionals.¹⁴
- Increase in mental health professionals to population ratio from 3.91 in 2014 to 4.16 in 2020 workers per 100,000 population.¹⁵

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COVID-19 mental health taskforce

MYS

Mental Health and Psychosocial Support Service (MHPSS) teams deployed to provide psychosocial support to COVID-19 patients.

PHL

Incorporation of MHPSS into Department of Health (DOH) COVID-19 emergency responses and increased training of primary health care professionals across provinces.

THA

The Mental Health Crisis Assessment and Treatment Team (MCATT) set up by Ministry of Public Health (MOPH) to address the mental health impacts of COVID-19.

VNM

Regional COVID-19 prevention task forces including health care workers and psychological professionals deployed to provincial treatment sites to support local regions.



COVID-19 mental health guidelines / toolkits

MYS

The standard operating procedure released by Ministry of Health (MOH) Malaysia to provide MHPSS services for COVID-19 response in quarantine stations.

PHL

The government's National Mental Health Program provided community based mental health guidelines, strengthening mental health advocacy and promotion, and enabling capacity building of rural health workers.

THA

The Department of Mental Health's (DMH) "Mental Vaccine in Communities" project - provided health education via social media to encourage the community to engage in healthy and pandemic resilient activities.

VNM

Release of timely information and guidelines on COVID-19 and mental health through constant updates on WHO Vietnam's webpage.



Communication, transparency and education

MYS

MOH and WHO's Communication for Health (C4H) approach ensured efficient, data driven two-way communication channels between and within communities.

PHL

Pandemic related policies, news, guidelines and innovative media issued by the DOH disseminated systematically through the regional offices, to local units.

THA

The center for COVID-19 Situation Administration communicated risks and engaged communities daily broadcasts of briefings across all public media channels.

VNM

Accurate, timely and consistent information was disseminated by the government, while ensuring strict enforcement (e.g., mobilising police forces) against misinformation and "fake news".



Online mental health services

MYS

MHPSS helplines run by NGOs (e.g., Befrienders); Conduction of innovative remote programmes (e.g., online spiritual therapy by MIASA); Mental health screening with online tools (e.g., DASS-21).

PHL

National Center for Mental Health's toll free-crisis hotline; Online counselling services for patients and family; Phone based psychological screening.

THA

"Mental Health Check In" via the DMH's 24-hour hotline, Facebook chat service, Line messenger app and web-based platform; Nationwide mental health screening by MCATT.

VNM

Collaboration between private organisations and the government to provide online counselling and helpline services (e.g., OUCRU online workshops to support the mental health of workers during COVID-19).



Social and community support

MYS

Collaboration between government and NGOs to support MHPSS services for the community (e.g., support from community and religious leaders on vaccine awareness).

PHL

A community platform provided by DOH for communication, collaboration and social support between and within communities.

THA

Collaboration between government, provinces, districts and villages (e.g., in the MCATT) to form whole-of-society mental health initiatives for the community.

VNM

The country's strong culture of resilience - "Tam Giao" - reflects the successful health literacy, optimism and positive attitudes towards the pandemic, and cooperative and harmonious solidarity of the community.

We examined unique segments of the population particularly vulnerable to the psychosocial impacts of the pandemic - highlighting the importance of looking into inequalities and unequal distribution of social, environmental and economic conditions within societies...



Women and children

Women's **health** and **financial security** were impacted more significantly than men. **Women also experienced increased burden from unpaid care and domestic work.**

Due to lockdowns and restrictions, children have spent a **large amount of time away from family, friends, playgrounds and classrooms** - taking away quintessential aspects of their childhood and imposing **detrimental mental health impacts** (e.g., dropping out of school).



LGBTQI communities

LGBTQI youths face unique challenges compared to their peers during the pandemic such as **feelings of isolation from their family at home, and struggles with identity and freedom of expression.**

Older adults of the LGBTQI community tend to **live alone, without the support from family**, leading to adverse mental health impacts (e.g., loneliness, emotional exhaustion, and feelings of hopelessness).



People with disabilities

As one of the most marginalised social groups, individuals with disabilities are constantly at risk of **exclusion from opportunities across all areas of society** - from education, employment, political participation and social relations.



Older adults

The pandemic has demonstrated an **aggravating effect on older adults' physical health and psychosocial wellbeing.**

Older adults have an increased probability of contracting the COVID-19 virus with **severe symptoms.**

Further, various studies across nursing homes and private residences show majority of older adults being affected by symptoms of psychological distress (e.g., depression).

... together with key lessons learned through three perspectives:



Sustainability

While there was immediate response by governments to establish task forces, guidelines and online mental health services, there is still **lack of buy-in to prioritise budget allocation and to fully integrate mental health into primary health care.**

On online mental health services, stakeholders were supportive of the effectiveness of online therapy and its continued use beyond the pandemic. However, there are factors which are likely to affect the scale of continued use include **accessibility, data protection in terms of confidentiality, privacy, and unreliable technology, limited or lack of insurance coverage, and ethical and legal concerns.**



Transferability

Based on our desk review and stakeholder consultations, there are multiple advantages to **online mental health services** which can be just as effective as in-person therapy for various mental health conditions. These responses can **work in parallel with strong community support and key strategic partnerships.**



Future pandemic preparedness

The WHO Secretariat has set out a series of recommendations in relation to mental health, to coordinate and improve efforts to effectively address future global health threats. These recommendations include applying a **whole-of-society approach** to promoting, protecting and caring for mental health, and specific actions to ensure **widespread availability of emergency mental health and psychosocial support** during similar public health emergencies. In our view, these recommendations capture the lessons learned from Southeast Asia during the COVID-19 pandemic well.

Mental health responses in the broader Asia-Pacific region



We have looked at other major countries in the Asia-Pacific region to identify best practice examples with regards to mental health responses. The examples below are ‘special highlights’ of best practices within the region, and is a useful guide for stakeholders in policy making and investment planning of mental health care and services in the region.

COVID-19 Mental Health Taskforce

- **Singapore:** Nationwide COVID-19 Mental Wellness Taskforce set up to **connect key agencies involved in protecting mental health and wellbeing.**
- **China:** Joint Prevention and Control Mechanism of the State Council developed **mental health support system of various mental health stakeholders** (from local governments to volunteers).
- **India:** Responses in regions within countries were activated before nationwide plans.

COVID-19 Guidelines/ Toolkits:

- **Singapore:** Psychological Preparedness Toolkit for healthcare workers designed for the National Centre for Infectious Diseases. **Websites such as ‘Stay Well to Stay Strong’** by the Health Promotion Board of Singapore **featured mental health as one of the focus areas**; and **“My Mental Health”** by Temasek Foundation and Agency for Integrated Care provided resources on psychological aspects of life and how to support oneself and loved ones.
- **India:** Ministry of Health and Family Welfare of India introduced guidelines for **prevention activities to address mental health**, as part of the National Taskforce **finalisation, implementation and monitoring of the psychosocial action plan for COVID-19 response.**

Communication, Transparency and Education:

- **Singapore:** **Regular public engagements** with government officials and infectious disease experts deployed to alleviate any apprehension and doubts within the citizens and counter the spread of disinformation and fake news.
- **China:** China’s central health authority held **daily press conferences** to provide their citizens with timely data (including mental health education).

Online Mental Health Services:

- **Singapore:** **A national hotline** established with other **community-based hotlines.** Furthermore, website Mindline.sg **includes a clinically validated self-assessment tool** that allows individuals to engage with via a user friendly artificial intelligence enabled chatbot.
- **China:** **In addition to a free 24-hour online psychological counselling services,** self-help psychological interventions were made easily accessible online (e.g., through WeChat). Mental help assessments were provided **via online self-assessment tools on hospital websites and numerous mobile applications.**
- **Indonesia:** A dedicated mental health counselling service “Sejiwa” provided **remote family services that includes the family of COVID-19 patients.**

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