

# SUPPORTING MENTAL HEALTH OF THE HEALTH WORKFORCE AND OTHER ESSENTIAL WORKERS

## Fact sheet accompanying the Opinion by the Expert Panel on Effective Ways of Investing in Health (EXPH)

### THE IMPACT OF THE COVID-19 PANDEMIC ON MENTAL HEALTH

The lockdowns, the experience of illness and uncertainty, and the economic fallout of the COVID-19 pandemic have all impacted on the mental health of the population. The health workforce and other essential workers have been hit particularly hard during the pandemic. Beyond the direct risks of infection arising from close contact with patients, the general public, and potentially infectious co-workers, essential workers have also faced high levels of stress and accompanying mental health risks. Even prior to the pandemic, mental health problems among these workers, and in the population in general, had a significant financial impact.

### THE TWO DIMENSIONS OF MENTAL HEALTH

Mental health is represented as a two-dimensional continuum, with a scale of mental illness on one axis and mental wellbeing (languishing/surviving – flourishing/thriving) on the other. Optimal mental health requires low levels of mental illness and high levels of mental wellbeing. It is influenced by current or past factors that increase risk or offer protection.

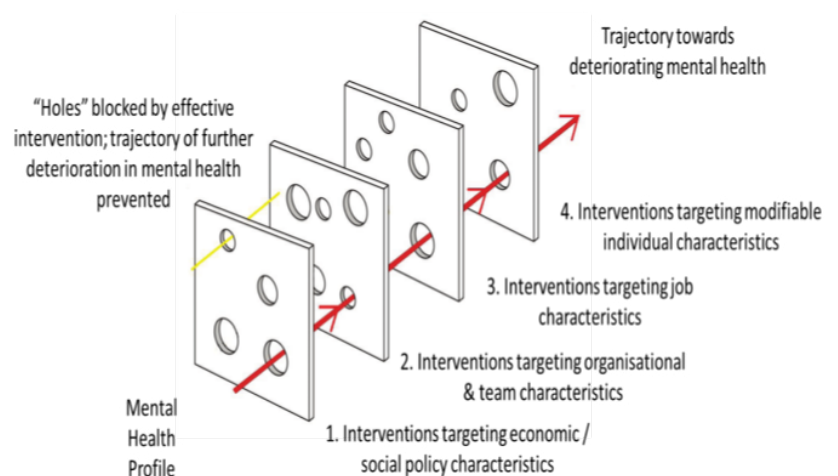


### WORKPLACE MENTAL HEALTH INTERVENTIONS

Mental health of the health workforce and other essential workers can be supported by interventions at primary, secondary, and tertiary levels. The emphasis must be on prevention of work-related psychosocial risks and the strengthening of protective factors in the workplace.

The Swiss cheese model illustrates how to prevent mental health deterioration by effectively addressing risk factors via interventions at multiple levels.

Contextual factors such as supportive workplace cultures and effective leadership are essential for successful implementation of mental health programmes. All measures must confront the role of stigma and potential discrimination.



Source: Adapted from Reason (2000)\* Swiss Cheese model

\*Reason J. Human error: models and management. West J Med 2000; 172(6): 393-6

# RECOMMENDATIONS FOR ACTION

## 1. FOCUS ON MENTAL WELLBEING.

**Focus on the positive aspects of mental health by re-conceptualizing the discussion from mental ill health into mental wellbeing.** Focus on promoting, maintaining, or restoring mental health/wellbeing.

## 2. TREAT MENTAL WELLBEING OF STAFF AS AN INHERENT PART OF THE ORGANISATION.

**Have a mental wellbeing plan** to address mental wellbeing of workers.

**Report on mental wellbeing**, using common quantitative and qualitative indicators.

**Identify workplace hazards to mental wellbeing**, develop and improve protocols and standards for this purpose.

**Ensure that organisations of all sizes participate** by providing tools to the organisations that are too small to develop their own tools.

**Creating a Charter of Rights to Wellbeing at the Workplace** could set the norms at EU level.

## 3. CREATE A SUPPORTIVE ENVIRONMENT AT EU-LEVEL.

**Protect mental wellbeing in labour market legislation** by including mental wellbeing and mental health protection as part of legislative changes addressing employment conditions and social protection.

**Set an EU-level mechanism to measure wellbeing of workers.**

**Develop reliable screening tools** that people and organisations may use to assess their mental wellbeing status.

**Ensure accountability** by appointing a responsible entity at regional/national level to monitor the promotion of mental health in organisations.

**Develop an EU handbook with guidance** on establishing “mentally protective” workplaces.

**Continue to promote and strengthen further European Commission and Member States collaboration.**

## 4. CREATE AN APPROPRIATE COST-EFFECTIVENESS METHODOLOGY.

**Launch a specific research programme** to develop methodology of cost-effectiveness (cost-benefit) analysis of mental wellbeing interventions using a comprehensive concept of value-based health care.

## 5. BUILD AND SHARE KNOWLEDGE ON INTERVENTIONS, FURTHER DEVELOPING CURRENT INITIATIVES.

**Provide research funding** to help build a high quality knowledge base, filling the gaps in current research results.

**Create and foster the conditions for innovative and effective interventions** and mental wellbeing programmes to be implemented in all organisations.

## 6. HAVE A SHARED EU-WIDE VIEW OF MENTAL WELLBEING IN THE WORKPLACE.

**At EU-level, identify low-cost but effective structural interventions** that can be implemented rapidly by Member States that find themselves with limited capacity to provide mental health services.

## 7. PREPARE ORGANISATIONS AND THEIR LEADERS.

**Improve leadership.** Train leaders of organisations on fostering positive mental wellbeing in their organisations.

**Provide guidance and training** on how organisations can actively “prepare staff for the job”.

**Provide added support in emergency situations.**

**Train for the long term.** Human resources management training and continuous professional development should incorporate mental wellbeing.

## 8. PROVIDE TIMELY AND ADEQUATE ACCESS TO MENTAL HEALTH CARE.

**Ensure adequate referral from organisations to health care services**, so that diagnosis and (eventual) treatment take place.

**Develop new solutions**, such as a primary care based integrated approach to mental wellbeing and a strengthening of community mental health.

About the Expert Panel on Effective Ways of Investing in Health: The Expert Panel’s mission is to provide sound and independent advice in the form of opinions in response to questions (mandates) submitted by the Commission on matters related to health care. The opinions of the Expert Panel present the views of the independent scientists who are members of the Expert Panel. They do not necessarily reflect the views of the European Commission. For more information and to read the opinions in full: [Opinions | Public Health \(europa.eu\)](#)



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