ISSN: 2642-1747

Research Article

Copyright © Deborah M Wilson

COVID-19 and Mental Health Counselling Intervention

Deborah M Wilson*

Assistant Professor, College of Education, Department of Counselling, Texas Southern University, USA

*Corresponding author: Deborah M Wilson, Assistant Professor, College of Education, Department of Counselling, Texas Southern University, USA.

To Cite This Article: Deborah M Wilson*. COVID-19 and Mental Health Counselling Intervention. Am J Biomed Sci & Res. 2023 20(5) AJBSR. MS.ID.002744, DOI: 10.34297/AJBSR.2023.20.002744

Received:

Movember 20, 2023; Published:

November 27, 2023

Abstract

Background: Both SARS-CoV-2 and the COVID-19 have significantly affected the mental health of adults and children, and opened doors for further examination of a various of mental health issues [1,2] and how they are assessed and treated by mental health counsellors. These mental health issues have impaired individuals and families in different ways and have continued to be a focus as the COVID virus cycle continues [3]. Some of the most common mental health concerns that surfaced or were exacerbated over the course of COVID and subsequent strains include; depression, anxiety, brain fog, extreme cases of forgetting, limited cognitive abilities, Alzheimer and dementia, and Suicidal behaviours, among others [4]. While some of the issues and trauma presented by clients were pre-existing, so to speak, and possibly exacerbated due to restrictions in the midst of the pandemic, counselling professionals were challenged when deciding whether it was suitable to use traditional assessment and evidence-based therapeutic intervention to assist clients, to seek out new ones [5,6], to address this new phenomenality.

In a reviewing the research, Covid presented as both a challenge and opportunity for mental health counsellors and other helping professionals, from an overall mental health and wellbeing perspective and, from the standpoint of the individual, families, and communities. When in doubt referral is a reciprocal relationship between mental health counselling professionals, family servicing agencies, and medical professionals (ex, primarily care doctors and psychiatrists). When working with patients who present with medical complaints or psychological issues that cannot be explained via medical assessment and testing a traditional practice is to refer to a mental health professional and vis versa; a client who presents for counselling with issues are referred to a primary care physician for evaluation or psychiatrist for evaluation and/or medication who in many cases recommends coordination of care with the mental health professional. This coordination of care was critical over the course of COVID where telemedicine was the lifeline of patients/ clients and an obvious "new" approach to therapeutic intervention. What were some of not so obvious challenges encountered when working with clients is the course of interventions and techniques used by mental health counsellors to assist these clients.

Objective: In general, the primary aim was to conduct an in-depth examination of the mental health issues that surfaced in the wake of the Covid-19 pandemic [6,7] and subsequent strains of the virus, as the virus continues to cycle. Correspondingly, this research intends to address how mental health counseling professionals approached and are approaching clients who present with various COVID related mental health issues within the therapeutic setting [8]. The research is based on contemporary theories, assessments, and interventions, and courses of therapies that might have emerged amid the pandemic.

Methods: The report was compiled through a general search of the literature drawn from, the American Counseling Association, the National Institutes of Health, Google Scholar, MEDLINE, EMBASE, Chemical Abstracts, Scopus, and the WHO website. The search terms used include; Coronavirus, mental health, mental health counseling professionals, therapeutic counseling in the wake of Covid-19, dementia, traumas and intervention, depression, anxiety, cognitive abilities, Alzheimer's, dementia, brain fog, Suicidal behaviors, among others [9].

Results: There is a wide-ranging number of reports and research focused on mental health issues that were and continue to be identified in the wake of Covid-19 and it's continuing cycle; and the way mental health professionals addressed such matters when presented in the therapeutic setting [10]. Depression, anxiety, post-traumatic stress, dementia, Alzheimer's, brain fog, and suicidal behaviors, among others, were major mental health issues cited [11]. Some effective interventions cited were traditional theoretical therapeutic interventions such as Cognitive Behavioural Therapy (CBT), Dialectical Behavioural Therapy (DBT), mindfulness, and social skills training. Others cited the importance of relaxation, social support, resilience training, meditation, yoga, and encouraging sleep quality among others [12]. Important measures to increase quality of assessment were constructed over the course of the virus. This included introduction of new and updated assessment tools, to screen for changes in clients overall mental health and



well-being possibility attributable to COVID. These quality improvements and/ or updates factored in the impact of the pandemic on their daily lives.

Conclusion: Many mental health concerns have surfaced over the course of the COVID pandemic and are still prevalent as the virus continues to cycle into various strains. The impact is still being witnessed among certain groups [13,14]. Mental health professionals must apply traditional interventions to aid clients looking for therapeutic interventions and address challenges that may indicate that both traditional and non-traditional therapeutic interventions such as meditation and yoga, and adequate sleep may offer, in terms of client interventions. The research findings also indicate that seeking new interventions may be required.

Keywords: Mental health, PTSD, Therapeutic intervention, Mental disorders, Alzheimer's, Dementia, Anxiety, Depression

Introduction

In the wake of the Covid-19 pandemic, many challenges were unfolding, some of which created an upsurge in mental health issues. Among the issues that are deemed to have triggered mental health concerns were; long lockdown and quarantine measures, sickness, fear of the unknown where people did not know whether the virus would come to an end, doubts about the drugs that were being used, and loss of close family members among other factors [15]. When addressing mental health challenges presented, mental health professionals found it sometimes difficult to settle on the most effective interventions to help deal with them [16]. The therapeutic counsellors were struck between using the traditional evidence-based and assessment methods and intervention and/ or a mix of traditional evidence-base and non-traditional interventions, and the challenge of applying new ones to assist clients. Some of the methods used in this context included: yoga, sleep quality, Dialectical behavioural therapy, relaxation, social support and mindfulness, resilience training, cognitive behavioural therapy, social skills training, and meditation, among others.

Methods

The research was compiled through a general search of the literature drawn from the American Counselling Association, the National Institutes of Health, Google Scholar, MEDLINE, EMBASE, Chemical Abstracts, Scopus, and the WHO website. The search began by conducting an in-depth examination of mental health issues that emerged or were identified in the wake of the Covid-19 pandemic in the midst of the pandemic [17], and on-going mental health issues as the virus continues to cycle. Similarly, a review of research on how mental health counselors are meeting mental health challenges when presented in the therapeutic setting [18,19]. Consequently, a review of different theories, assessments, and courses of therapies that might have been developed during the ongoing pandemic and as the virous continues to cycle [20], was also considered.

Results

Definitions

In the report's context, mental health has been used to mean emotional, social, and psychological wellbeing amid the Covid-19 pandemic. For a person to be deemed to have been in the right state of mental health from an overall mental health and wellbeing perspective, they should be free from PTSD, Alzheimer's, dementia, anxiety, depression [21], suicidal thoughts and have a good support system. PTSD in this context has been defined as the extreme mental health disorders that might have been triggered by the emotionally upsetting or disruptive events witnessed during the Covid-19 pandemic, such as masses of individuals, families, and communities, impacted by life threatening sickness, and loss of lives in some cases multiple family members [20]. Therapeutic interventions are the mechanisms and evidence-based approaches uses to help clients contain and ease the mental health challenges affecting clients [22]. Alzheimer's, dementia, anxiety, and depression are among the mental health disorders that emerged or were exacerbated (from pre-existing issues) and affected clients during the pandemic. Humans are social beings with intricate social networks and complex social cognition and are prone to suffer acute stress from perceived social isolation-commonly referred to as loneliness.

Evolutionary Theory of Loneliness

The evolutionary theory of Loneliness is grounded on the notion that feelings of loneliness among people emerge and are dealt with over time. For example, the loss of a partner or spouse and eventually remarrying, or empty nesters, in both situations some level of depression and/ and or anxiety may be experienced. However, the expectation is that in both cases the individuals impacted will eventually adjust and embark onto the next phase in their respective developmental journey. In the midst of COVID, sickness, death, and long periods of lockdowns coupled with loss exacerbated fear and loneliness. The theory further posits that Loneliness can cause negative implications for the physiological and mental health of individuals. The theory's proponents argued that social isolation can result in harm, just like physical pain. It is deemed that human beings have been created with an inbuilt desire to link with others to acquire and get protection against any possible threats [23]. Therefore, the failure to achieve a connection with others can result in Loneliness.

During the pandemic, individuals were compelled by law enforcers and the ministries of health to minimize social contacts and interactions as this could limit the possibility of spreading the virus. People were put under quarantine and lockdown measures that took a long time, which in the event turned out to be harmful to their mental health [24,25]. From the research, perceiving others as a probable threat of infection and, therefore, the urge to stay away from them can result in extreme avoidance behaviour [26]. In a nutshell, lonely people view social interactions much more negatively enforced or triggered by the containment measures instigated during the pandemic. Since the pandemic it has become a focus when assessing for mental health issues because of the toll the lockdown took on the mental health of the elderly, children and adolescence, and young adults. These populations all have critical emotional, social, and physical developmental challenges to be considered when assessing for presenting issues in the therapeutic setting. For example, the elderly loss of a spouse presents challenges, but with a good support system the adjustment and journey is smoother. For school age populations adjustment to an external locus of control via new social interaction with peers proved devastating for those impacted including the overall school systems and counterparts. While some adjusted many suffered issues that that required assessment and intervention.

Distress and Loneliness Assessment

In the wake of the pandemic, there was a reduction in daily routines, and human beings were compelled to operate from their homes to mitigate the chances of spreading the virus. Such situations cause distress, Loneliness, and detachment behaviours which, when they occur for a long time, can affect mental health [27]. Mental health counsellors are therefore supposed to possess the knowledge, skills, and dispositions in such instances to assist, advise, and guide individuals on the mechanisms of dealing with Loneliness and the fear of interaction while ensuring that the virus is still under control [28]. Therefore, it is prudent to assert that the Covid-19 pandemic resulted in increased distress and Loneliness, which was common among populations subjected to quarantine and lockdown measures. Prevalence of stress, anxiety, depression among the general population during the Covid-19 pandemic: a systematic review and meta-analysis.

Depression and Anxiety Assessment

From the search, it is clear that there is a great connection between anxiety and depression [29]. Studies indicate that amid the Covid-19 pandemic, there was eminent depression and anxiety among certain groups, especially those with pre-existing mental health issues [30]. It is deemed that peri-traumatic distress can trigger extreme negative mental implications [31]. In the event, the feelings can raise anxiety-associated symptoms, leading to willful withdrawal from social spaces and connections in the quest to observe safety measures. Further study has hinted that when social withdrawal re-occurs for a long time, human beings might suffer from extreme depressive symptoms [32,33]. Depression is featured by the absence of interest, Loneliness, lack of interest, general withdrawal, and feeling useless, [34] and in suicidal ideation. National Center for Health Statistics. U.S. Census Bureau, Household Pulse Survey, 2020–2023. Anxiety and Depression. Generated

interactively: from https://www.cdc.gov/nchs/covid19/pulse/mental-health.htm.

Alzheimer's and dementia Assessment

Covid-19 is deemed to have uneven implications for people with Alzheimer's and dementia, those who care for them, and their immediate family members. It is argued that underlying health conditions can result in increased cases of contracting dementia [35]. A broader study demonstrates that individuals aged 65 years and above were at a greater risk of contracting dementia and Alzheimer's after being infected by Covid-19

[36]. Individuals are urged to consult mental health counsellors, especially after suffering from long Covid-19, because it has been deemed to affect memory and thinking, leading to dementia and Alzheimer's. However, further search has indicated that a study is still underway to ascertain the connection between these mental health disorders and Covid-19 [37].

Discussion

The wake of the Coronavirus pandemic, with its quick spread, has caused eminent anxiety, depression, social disorders, and fog brain worldwide, resulting in mental health complications in human beings [38,39]. Evidence demonstrates that human beings can encounter symptoms of anxiety, psychosis, trauma, panic attacks, suicidal thoughts, and Loneliness among people. There are many factors or reasons that justify the ability of Covid-19 causing mental disorders [40]. The virus is deemed to have rapid transmission, extreme rates of mortality, and many unknowns, which tend to trigger extreme anxiety among people [41]. Important to note is that when anxiety goes beyond normal levels, it affects the immune system and, in the event, increases the chances of catching the virus [42,43].

The Course of Therapies Developed During the Pandemic

In the wake of the pandemic, The World Health Organization has been developing the most recent clinical practice regulations that can be used by therapists to aid patients with Covid-19 who might be suffering from mental health issues. WHO Guideline Development Group often meets to create and review evidence summaries drawn from global clinical trials. This is then used to come up with clinical practice suggestions or instead recommendations for the reliance on therapeutics to assist patients suffering from Covid-19 [44]. Quick adaptation and implementation of the therapeutics recommended by WHO in the Coronavirus clinical avenues has been critical at both the local and national levels.

Conclusion

This research demonstrates that the Covid-19 pandemic has resulted in a series of mental disorders, some of which can be managed, while there are those that mental health counsellors are still working on to devise the most effective solution [27,65]. Many mental health concerns associated with Covid-19 were witnessed during the time and are still being witnessed among certain

groups [46]. Mental health care counsellors must apply traditional interventions to aid clients looking for therapeutic interventions [47]. Some of the methods that can be used in the context include; yoga, sleep quality, Dialectical behavioural therapy, relaxation, social support and mindfulness, resilience training, cognitive behavioural therapy, social skills training, and meditation, among others [48-50]. For mental health counsellors and other mental health professionals, a collaborative effort is necessary when addressing issues & challenges clients present in the therapeutic setting; as it relates to the impact on mental health, and as COVID and the various strains of the virus as it continues to cycle.

Acknowledgments

None.

Conflicts of Interest

None.

References

- Fiol DeRoque MA, Serrano Ripoll MJ, Jiménez R, Zamanillo Campos R, Yáñez Juan AM, et al. (2021). A Mobile phone-based intervention to reduce mental health problems in health care workers during the COVID-19 pandemic (PsyCovidApp): randomized controlled trial. JMIR Mhealth Uhealth 9(5): e27039.
- 2. Kar SK, Yasir Arafat SM, Kabir R, Sharma P, Saxena SK (2020) Coping with mental health challenges during COVID-19. In Coronavirus disease 2019 (COVID-19) pp. 199-213.
- 3. Dawel A, Shou Y, Smithson M, Cherbuin N, Banfield M, et al. (2020) The effect of COVID-19 on mental health and wellbeing in a representative sample of Australian adults. Front Psychiatry 11: 579985.
- 4. Simon N M, Saxe G N, Marmar C R (2020) Mental health disorders related to COVID-19-related deaths. Jama 324(15): 1493-1494.
- Ransing R, Adiukwu F, Pereira Sanchez V, Ramalho R, Orsolini L, et al. (2020) Mental health interventions during the COVID-19 pandemic: a conceptual framework by early career psychiatrists. Asian j psychiatr 51: 102085.
- 6. Roy A, Singh A K, Mishra S, Chinnadurai A, Mitra A, et al. (2021) Mental health implications of COVID-19 pandemic and its response in India. Int J Soc Psychiatr 67(5): 587-600.
- 7. World Health Organization. (2022). COVID-19 pandemic triggers 25% increase in prevalence of anxiety and depression worldwide.
- 8. Rajkumar R P (2020) COVID-19 and mental health: A review of the existing literature. Asian j psychiatr 52: 102066.
- Tianchen Wu, Xiaoqian Jia, Huifeng Shi, Jieqiong Niu, Xiaohan Yin, et al. (2021) Prevalence of mental health problems during the COVID-19 pandemic: A systematic review and meta-analysis. Journal of affective disorders 281: 91-98.
- 10. Salari N, Hosseinian Far A, Jalali R, Vaisi Raygani A, Rasoulpoor S, et al. (2020). Prevalence of stress, anxiety, depression among the general population during the COVID-19 pandemic: a systematic review and meta-analysis. Global health 16(1): 57.
- 11. Muller A E, Hafstad E V, Himmels J P W, Smedslund G, Flottorp S, et al. (2020) The mental health impact of the covid-19 pandemic on healthcare workers, and interventions to help them: A rapid systematic review. Psychiatry research 293: 113441.
- Przybylko G, Morton D P, Renfrew M E (2021) Addressing the COVID-19 mental health crisis: a perspective on using interdisciplinary universal interventions. Front Psychol 12: 644337.

- 13. Lai J, Ma S, Wang Y, Cai Z, Hu J, et al. (2020) Factors associated with mental health outcomes among health care workers exposed to coronavirus disease 2019. JAMA Netw Open 3(3): e203976-e203976.
- 14. Moreno C, Wykes T, Galderisi S, Nordentoft M, Crossley N, et al. (2020) How mental health care should change as a consequence of the COVID-19 pandemic. Lancet Psychiatry 7(9): 813-824.
- 15. Wathelet M, Duhem S, Vaiva G, Baubet T, Habran E, et al. (2020) Factors associated with mental health disorders among university students in France confined during the COVID-19 pandemic. JAMA Netw Open 3(10): e2025591.
- 16. Usher K, Durkin J, Bhullar N (2020) The COVID-19 pandemic and mental health impacts. Int J Ment Health Nurs 29(3): 315-318.
- 17. Stein M B (2021) COVID-19: Psychiatric illness.
- 18. Jaguga F, Kwobah E (2020) Mental health response to the COVID-19 pandemic in Kenya: a review. Int J Ment Health Syst 14: 68.
- 19. Panchal N, Kamal R, Orgera K, Cox C, Garfield R, et al. (2020) The implications of COVID-19 for mental health and substance use. Kaiser family foundation pp. 21.
- Safieh J, Broughan J, McCombe G, McCarthy N, Frawley T, et al. (2021).
 Interventions to optimise mental health outcomes during the COVID-19 pandemic: a scoping review. Int J Ment Health Addict 20(5): 2934-2955.
- 21. Spoorthy M S, Pratapa S K, Mahant S (2020) Mental health problems faced by healthcare workers due to the COVID-19 pandemic-A review. Asian J psychiatry 51: 102119.
- 22. Saltzman L Y, Lesen A E, Henry V, Hansel T C, Bordnick P S (2021) COVID-19 mental health disparities. Health secur 19(S1): S5-S13.
- 23. Schäfer S K, Sopp M R, Schanz C G, Staginnus M, Göritz A S, et al. (2020) Impact of COVID-19 on public mental health and the buffering effect of a sense of coherence. Psychother psychosom 89(6): 386-392.
- 24. Greenberg N (2020) Mental health of healthcare workers in the COVID-19 era. Nat Rev Nephrol 16(8): 425-426.
- 25. World Health Organization (2022). Therapeutics and Covid-19.
- 26. Semo B W, Frissa S M (2020) The mental health impact of the COVID-19 pandemic: implications for sub-Saharan Africa. Psychol Res Behav Manag 13: 713-720.
- Giuntella O, Hyde K, Saccardo S, Sadoff S (2021) Lifestyle and mental health disruptions during COVID-19. Proc Natl Acad Sci U S A 118(9): e2016632118.
- 28. Keller FM, Derksen C, Kötting L, Dahmen A, Lippke S (2023) Distress, loneliness, and mental health during the COVID-19 pandemic: Test of the extension of the Evolutionary Theory of Loneliness. Appl Psychol Health Well Being 15(1): 24-48.
- 29. Story M, Team M O P Part 6: Brain Dysfunction After COVID You are here.
- 30. Camilleri C, Fogle CS, O Brien, KG, Sammut S (2022) The impact of COVID-19 and associated interventions on mental health: a crosssectional study in a sample of university students. Front psychiatry 12: 801859.
- 31. Talevi Dalila, Valentina Socci, Margherita Carai, Giulia Carnaghi, Serena Faleri, et al. (2020) Mental health outcomes of the CoViD-19 pandemic. Riv psichiatr 55(3): 137-144.
- 32. Duan L, Zhu G (2020) Psychological interventions for people affected by the COVID-19 epidemic. Lancet Psychiatry 7(4): 300-302.
- 33. De Kock JH, Latham HA, Leslie SJ, Grindle M, Munoz SA, et al. (2021) A rapid review of the impact of COVID-19 on the mental health of healthcare workers: implications for supporting psychological wellbeing. BMC public health 21(1): 1-18.
- 34. Liu JJ, Bao Y, Huang X, Shi J, Lu L (2020) Mental health considerations for

- children quarantined because of COVID-19. Lancet Child Adolesc Health 4(5): 347-349.
- 35. Pisaturo M, Calò F, Russo A, Camaioni C, Giaccone A, et al. (2021) Dementia as risk factor for severe coronavirus disease 2019: a casecontrol study. Front Aging Neurosci 13: 698184.
- 36. Gordon MN, Heneka MT, Le Page LM, Limberger C, et al. (2022) Impact of COVID-19 on the Onset and Progression of Alzheimer's Disease and Related Dementias: A Roadmap for Future Research. Alzheimers Dement 18(5): 1038-1046.
- 37. Lange KW (2020) Mental health problems in COVID-19 and the need for reliable data. Journal of Disease Prevention and Health Promotion pp. 4.
- 38. Hossain MM, Tasnim S, Sultana A, Faizah F, Mazumder H, et al. (2020) Epidemiology of mental health problems in COVID-19: a review. F1000Res 9: 636.
- 39. Kwobah EK, Mwangi A, Patel K, Mwogi T, Kiptoo R, et al. (2021) Mental disorders among health care workers at the early phase of COVID-19 pandemic in Kenya; findings of an online descriptive survey. Front Psychiatry 12: 665611.
- 40. Castillo EG, Ijadi Maghsoodi R, Shadravan S, Moore E, Mensah MO, et al. (2019). Community interventions to promote mental health and social equity. Curr Psychiatry Rep 21(5): 35.
- 41. Gruber J, Prinstein MJ, Clark LA, Rottenberg J, Abramowitz JS, et al. (2021) Mental health and clinical psychological science in the time of COVID-19: Challenges, opportunities, and a call to action. Am Psychol 76(3): 409-426.
- 42. Chirico F, Ferrari G (2021) Role of the workplace in implementing mental health interventions for high-risk groups among the working age population after the COVID-19 pandemic. J Health Soc Sci 6(2): 145-150.

- 43. Kontoangelos K, Economou M, Papageorgiou C (2020) Mental health effects of COVID-19 pandemia: a review of clinical and psychological traits. Psychiatry investig 17(6): 491-505.
- 44. Yan Xie, Evan Xu, Ziyad Al Aly (2022) Risks of mental health outcomes in people with covid-19: cohort study. BMJ, 376.
- 45. Hannemann J, Abdalrahman A, Erim Y, Morawa E, Jerg Bretzke L, et al. (2022) The impact of the COVID-19 pandemic on the mental health of medical staff considering the interplay of pandemic burden and psychosocial resources-A rapid systematic review. PLoS One 17(2): e0264290.
- 46. Angwenyi V, Kabue M, Chongwo E, Mabrouk A, Too EK, et al. (2021) Mental health during COVID-19 pandemic among caregivers of young children in Kenya's urban informal settlements. A cross-sectional telephone survey. Int J Environ Res Public Health 18(19): 10092.
- 47. Colizzi M, Lasalvia A, Ruggeri M (2020) Prevention and early intervention in youth mental health: is it time for a multidisciplinary and transdiagnostic model for care? Int J Ment Health Syst 14(1): 23.
- 48. Greenberg N, Docherty M, Gnanapragasam S, Wessely S (2020) Managing mental health challenges faced by healthcare workers during covid-19 pandemic. BMJ 368: m1211.
- 49. Inchausti F, MacBeth A, Hasson Ohayon I, Dimaggio G (2020) Psychological intervention and COVID-19: what we know so far and what we can do. J Contemp Psychother 50(4): 243-250.
- Jung SJ, Jun JY (2020) Mental health and psychological intervention amid COVID-19 outbreak: perspectives from South Korea. Yonsei Med J 61(4): 271-272.