Managing mental health during COVID-19

Updated June 5, 2020

During a crisis such as the COVID-19 pandemic, it is common for everyone to experience increased levels of distress and anxiety, particularly as a result of social isolation. Physicians and other frontline health care professionals are particularly vulnerable to negative mental health effects as they strive to balance the duty of caring for patients with concerns about their own well-being and that of their family and friends.

Use the strategies and resources on this page to manage your own mental well-being while also caring for patients during the pandemic or any other crisis.

Take care of yourself

Airline safety briefings remind us to put on our own oxygen mask before helping others in the event of an emergency. Attending to your mental health and psychosocial well-being while caring for patients is as important as managing your physical health. Headspace, an AMA preferred provider of meditation and mindfulness, is offering any US-based healthcare professional with a National Provider Identifier (NPI) a free subscription to Headspace Plus through December 31, 2020. AMA members can get a 2-year subscription for free through AMA Member Benefits PLUS.

1. Feel free to feel your feelings

You and your colleagues are likely to feel immense pressure given the potential surge in care demands, risk of infection and equipment shortages, among other stressors. Experiencing stress and the feelings associated with it are by no means a sign of weakness or a reflection on your ability to do your job.¹

2. Intentionally employ coping strategies


Copyright 1995 - 2021 American Medical Association. All rights reserved.
Put into practice strategies that have worked for you in the past during times of stress. These can include getting enough rest and finding respite time during work or between shifts, eating meals (ideally, healthy food, on a schedule), engaging in physical activity and staying in contact (with appropriate social distancing) with family and friends.  

3. Perform regular check-ins with yourself

Monitor yourself for symptoms of depression/stress disorder such as prolonged sadness, difficulty sleeping, intrusive memories and/or feelings of hopelessness. Talk to a trusted colleague or supervisor. Be open to seeking professional help if symptoms persist or worsen over time.

4. Take breaks from the news and social media

Make a regular habit of stepping away from your computer and smart phone from time to time. When returning online, focus on information from reputable sources, not just sources in your social media feed. You don’t have to take in everything produced by a 24/7 news cycle.

5. Be fortified by remembering the importance and meaning of your work

Remind yourself that despite the current challenges and frustrations, yours is a noble calling – taking care of those in need in a time of great uncertainty. Make sure to take time to recognize the efforts and sacrifices made by your colleagues. Together, we are all stronger.

Take care of your staff

Leadership should strive to maintain critical infrastructure and have other support in place for staff during this time, knowing that this may require modifications to existing strategies, tactics and/or roles. Practices will want to protect, to the degree possible, staff from chronic stress and poor mental health, so that they are able to support patients and because it’s the right thing to do.

1. Adjust staffing procedures and schedules (where possible)

When able and within applicable legal limits, rotate workers from higher-stress to lower-stress functions. Partner inexperienced workers with more experienced colleagues, who can provide support, monitor stress and reinforce safety practices. Implement flexible schedules for workers who are directly impacted or have a family member impacted by the outbreak.
2. Offer access to psychosocial support

Provide staff responding to the outbreak with access to sources of psychosocial support, making this as much of a priority as ensuring their physical safety.\(^7\)

3. Monitor and review staff member well-being

Regularly and supportively monitor wellbeing and psychosocial status of staff to identify risks, emerging issues and adaptively respond to their needs.\(^8\)

4. Create an environment of open communication

Encourage staff to speak openly about their concerns. Provide brief, regular forums to update staff on the status of the practice and how management is addressing challenges. Provide mechanisms for staff to express their concerns, ask questions and encourage peer-support amongst colleagues.\(^9\) For individual concerns related to one’s mental health and well-being, encourage communication with trusted colleagues in addition to accessing your employee assistance program.

Take care of your patients

Mental health and psychosocial considerations should be integrated into all response activities.

1. Establish a system to identify and provide care for mental health conditions

Ideally, every health care practice already has or can put in place a system (along with at least one staff member trained) to identify and provide care for patients with common and severe mental health conditions during this time.\(^10\) This is particularly important since the stigma associated with mental health may cause patients to be reluctant in seeking support for both COVID-19 and any mental health condition(s).\(^11\) Also, previously stable individuals may become less stable. Employ telemedicine to deliver care where possible, particularly given the recent relaxation of requirements by CMS and SAMHSA, among others.\(^12\) Reach out to your state medical association/society for more detailed information and resources on licensure, coverage and payment policies.

2. Facilitate additional training for frontline staff
As time and resources permit, frontline workers should have training on basic psychosocial care principles and psychological first aid. Online training may be used if it is not possible to train staff in person due to remote or distributed work, limited time and/or concern about the risk of infection.13

3. Verify referral pathways

Confirm the status of established referral pathways for patients with mental health conditions and that all staff responding to the outbreak are aware of and use such system(s) if/when needed.14 If no such pathways exist, reach out to local organizations such as state departments of health and medical societies for guidance and recommendations for resources.

4. Provide clear understandable communication to patients

Use “plain English” in messages with patients, particularly those with intellectual, cognitive and psychosocial disabilities and employ approaches to communication that do not rely solely on written information where possible.15

5. Incorporate guidance about stress into general care practices

Emotional distress and anxiety are common during pandemics such as the COVID-19 outbreak. It is important to help patients acknowledge that stress exists and help normalize it. Basic strategies can be used to teach them how to recognize signs of distress (such as worry, fear, insomnia, etc.) and when discussing ways to reduce them (e.g., healthy diet, exercise, talking to loved ones, meditation, etc.).16 Additional forms of treatment, such as cognitive behavioral therapy, can also be effective.17

Appendix of mental and behavioral health resources for COVID-19

The AMA and the RAND Corporation conducted a study on behavioral health integration (BHI) and physician practices to determine factors that influence implementation of BHI to inform solutions for this persistent disparity in mental health care. In “Factors influencing physician practices’ adoption of behavioral health integration in the United States: A qualitative study,” researchers looked at the motivators, facilitators and barriers to BHI from the perspectives of 30 physician practices with firsthand experience.

Source: Annals of Internal Medicine

Mental health and psychosocial considerations during COVID-19 outbreak (PDF)
This resource summarizes mental health considerations for health care workers (#7-11) and leaders/managers of health facilities (#12-17) to support mental and psychosocial well-being.
during the COVID-19 outbreak.

Source: World Health Organization

Briefing note on addressing mental health and psychosocial aspects of COVID-19 outbreak (PDF)

This briefing note summarizes key mental health and psychosocial support considerations in relation to the COVID-19 outbreak. Included are key implementation activities (pg. 10) and specific messaging that can be used by health care leaders and frontline workers responding to the COVID-19 outbreak (pg. 15-16).

Source: Inter-Agency Standing Committee Reference Group for Mental Health and Psychological Support in Emergency Settings

Supporting families of health care workers exposed to COVID-19

This resource details several strategies to help families of healthcare workers cope with increasing distress and concerns related to COVID-19.

Source: Center for the Study of Traumatic Stress

For providers and community leaders: Helping people manage stress associated with the COVID-19 virus outbreak (PDF)

This resource details five key principles for health care providers (and others) concerned with the psychological welfare of the public to follow when providing help in situations like the COVID-19 outbreak. It also lists concrete steps health care providers can take to maximize public trust, foster social connections, support community and individual well-being, and promote adaptive behavior change.

Source: U.S. Department of Veterans Affairs

Coronavirus and mental health: Taking care of ourselves during infectious disease outbreak

This resource provides recommendations on how health care workers, whose patients are affected by the outbreak, can help take care of themselves. Additionally, it outlines meaningful steps patients and their families can take to protect themselves during an infectious disease outbreak like COVID-19.

Source: American Psychiatric Association

Sustaining the well-being of healthcare personnel during coronavirus and other infectious disease outbreaks

This resource provides guidance to health care workers on how to take care of themselves and encourage others to practice self-care in order to sustain the ability to care for those in need during the COVID-19 pandemic.

Source: Center for the Study of Traumatic Stress

Fight COVID-19 with better sleep health: A guide for hospital workers

This resource provides steps hospital workers can take during the COVID-19 pandemic to use sleep as a tool to help fight potential infections and maintain their overall health and performance.

Source: Center for the Study of Traumatic Stress

Caring for patients’ mental well-being during coronavirus and other emerging infectious diseases: A guide for clinicians


Copyright 1995 - 2021 American Medical Association. All rights reserved.
This resource provides guidance to clinicians on how to promote patients’ mental well-being during the COVID-19 outbreak.

*Source:* Center for the Study of Traumatic Stress

Psychological effects of quarantine during the coronavirus outbreak: What healthcare providers need to know (PDF)

This resource details the psychological effects of quarantine, as well as strategies for how health care providers can care for their patients’ and their own mental well-being during periods of quarantine.

*Source:* Center for the Study of Traumatic Stress

Notifying families after a COVID-19 death

This resource outlines actions that can help facilitate the healing process for family members dealing with the difficult process of death notification under the very complicated circumstances surrounding COVID-19.

*Source:* Center for the Study of Traumatic Stress

For additional resources for physicians and health care workers on the frontlines, please view AMA’s Caring for our caregivers during COVID-19 guide.

---

**Disclaimer:** The information and guidance provided in this document is believed to be current and accurate at the time of posting, but it is not intended as, and should not be construed to be, legal, financial, medical, or consulting advice. Physicians and other qualified health care practitioners should exercise their professional judgment in connection with the provision of services and should seek legal advice regarding any legal questions. References and links to third parties do not constitute an endorsement or warranty by the AMA and AMA hereby disclaims all express and implied warranties of any kind.

---

1: World Health Organization; Center for the Study of Traumatic Stress

2: World Health Organization; Center for the Study of Traumatic Stress

3: Center for the Study of Traumatic Stress

4: Center for the Study of Traumatic Stress


Copyright 1995 - 2021 American Medical Association. All rights reserved.
5: Center for the Study of Traumatic Stress

6: World Health Organization

7: Inter-Agency Standing Committee Reference Group for Mental Health and Psychological Support in Emergency Settings

8: Inter-Agency Standing Committee Reference Group for Mental Health and Psychological Support in Emergency Settings

9: Inter-Agency Standing Committee Reference Group for Mental Health and Psychological Support in Emergency Settings

10: Inter-Agency Standing Committee Reference Group for Mental Health and Psychological Support in Emergency Settings

11: World Health Organization

12: Centers for Medicare & Medicaid Services; Substance Abuse and Mental Health Services Administration

13: Inter-Agency Standing Committee Reference Group for Mental Health and Psychological Support in Emergency Settings

14: Inter-Agency Standing Committee Reference Group for Mental Health and Psychological Support in Emergency Settings; Substance Abuse and Mental Health Services Administration

15: World Health Organization; Center for the Study of Traumatic Stress

16: Center for the Study of Traumatic Stress

17: American Psychological Association

Copyright 1995 - 2021 American Medical Association. All rights reserved.