



2nd Special meeting on the psychosocial consequences of the Coronavirus pandemic outbreak

Standing Committee on Crisis, Disaster and Trauma Psychology

European Federation of Psychologists' Associations

29th of June

A brief report from the different European countries

Albania – Elona Mustafaraj

Since May 23, Albania is no longer in a state of emergency. However, the opening of activities led to an increase in cases of coronavirus infection. According to the data of the Ministry of Health and Social Welfare dated 29.06.2020 infected are 2466 persons, inactive condition 1438 and dead 58 (from 31 reported at the meeting of 15 May). Schools have closed after the school year was called online, and universities are conducting exams for graduate students. Interurban transport resumed. The population perceives fear and insecurity for the second wave of infections in September. A new total closure would bring many economic and social problems to Albanians.

Cyprus – Anthi Loutsiou

The excellent epidemiological picture of COVID cases in Cyprus has allowed the government to move towards a stepwise lessening of the restrictions since May 2020 allowing for normalization to people's daily lives and a gradual boost to the economy. Cyprus has already started welcoming flights and incoming travelers from countries with a similar epidemiological picture.

In terms of the psychosocial impact at this time, the following are noteworthy

- **General public** - The COVID pandemic is no longer a primary topic in the media and people's attention appears to have shifted greatly to other domains of life. Few prevention behaviors for COVID appear to be maintained in the public, work, and private arenas. Some restrictions on public gatherings remain in effect, with a negative impact on cultural traditions (such as summer festivals) and private life events (such as graduations, weddings, funerals, etc).
- **Educational arena** – Schools welcomed students back, voluntarily, before the end of the school year (with restrictions remaining in effect). This allowed for a healthy reconnection of students with peers, normalization of the learning process, and a diffusion of the stressful situation created at home for many families during the curfew period that lasted for two months. The Ministry of Education had initially banned students in special education from returning to their schools despite unfounded justification. The Cyprus Psychologists Association joined groups of organized parents and other associations and successfully advocated for the return of students in special education. High school seniors were most stressed by the pandemic due to the disruption/cancellation of their university placement exams.
- **Workplace arena** - Industry and commerce in most sectors of the economy have commenced. All workers, except for those identified as belonging in high risk/vulnerable groups, have returned to the workplace. Protective measures remain in effect in certain sections of the industry however behavioral compliance is notably low. The return to the workplace was a stressful transition for many employers, managers, and workers; most organizations were greatly unprepared to manage the psychosocial impact on their employees at various stages of the pandemic.
- **First responders and medical personnel** - Most have returned to their normal duties. The high risk season for wildfires started prematurely this year in Cyprus; the Fire and Rescue personnel has shifted attention to fighting wildfires. Paramedics are now back to the regular shift schedule. The designated hospital for COVID cases continues to be open but with minimal COVID admissions. The health care system continues to be overburdened with the backlash of surgeries and medical procedures that was created during the acute phase of the pandemic. As a result, many doctors and nurses continue to be overworked. The Armed Forces of Cyprus have introduced many innovations to safely welcome the new cohort of high school graduates (males) who will join the military in July to serve their one year duty of service.
- **Training of psychologists** – Trainees, and especially foreign nationals, were particularly stressed during the interruption of their practical training. They required a lot of psychosocial support from training programs. The impact on practical training of psychologists was successfully mitigated in most cases with alternative training plans developed by the training programs for a timely graduation and licensure.
- **Psychologists** – The Cyprus Psychologists' Association continued to provide a lot of support and guidance to psychologists to implement the step-down restrictions imposed by the government at different stages. Psychologists in the private sector were affected the most negatively financially as a result of the prolonged lockdown and they benefited from guidance regarding various ethical matters, especially relating to telehealth services. Most psychologists have gradually returned to face-to-face services noting that teleservices were neither equitable nor sustainable. Psychologists have continued to contribute positively with new media presence and open access psychoeducational resources

- **Crisis Lines** - Major Hotlines for psychosocial support during COVID continue to be staffed but continue to be underutilized
- **Research on psychosocial impact from Cyprus**
 1. “Psychological impact of protective measures towards COVID-19” Research of the Center for Applied Neuroscience of the University of Cyprus” [In English]
<https://www.cancyprus.org/%CF%88%CF%85%CF%87%CE%BF%CE%BB%CE%BF%CE%B3%CE%B9%CE%BA%CE%B7-%CE%B5%CF%80%CE%B9%CE%B4%CF%81%CE%B1%CF%83%CE%B7-%CF%84%CF%89%CE%BD-%CE%BC%CE%B5%CF%84%CF%81%CF%89%CE%BD-%CF%80%CF%81%CE%BF%CF%83/>
 2. An investigation of the experience of home restriction due to pandemic restrictions and its consequences on children and adolescents ages 5-18 years old [In Greek]
<https://paideia-news.com/panepistimio-kyproy/2020/07/02/diereynisi-tis-empeirias-toy-egkleismoy-logo-pandimias-kai-pithanon-synepeion-toy-se-paidia/>

Czech Republic – Stepan Vymetal

Czech Republic has 13,001 confirmed cases (from 588,910 tests) with 352 deaths. There was a quick response of the government (state of emergency from March 12th to May 17th 2020, early and strict measures (limiting of social contact, movement restriction, closing schools, shops, services - longterm lockdown, the general obligation of face masks, etc.) The epidemic was slowed down – we got time to equip ourselves technically (PPE, devices).

Timing of crisis: Urgent phase: 4 weeks, Posturgent phase: 2 weeks, Release phase: from May 1st till now (but also long term impact/needs on population!).

There is a gradual release of measures now. The fears of the Czechs declined, vigilance decreased, more social contact - the number of infected began to grow from July 18th (local outbreaks)

We expect 3 scenarios: (1) The epidemic will gradually end + the population gave immunological resistance; (2) Larger wave from imports from foreign outbreaks; (3) Partial import from foreign outbreaks.

We are preparing for the second wave now, we are wary of local occurrences, smart quarantine is used, tracing patients. Psychosocial support is based on the Integrated Rescue System of the Czech Republic + Health care system.

CZ good practice in psychosocial support:

- Online/virtual assistance center: One central system consists of (1) Mobile application „Koronavirus COVID-19 in the Czech Republic“ & (2) Central info web & 3) System of crisis and info hotlines. (incl. psychosocial services/contacts) Important: To have all the important, valid, and verified information & contacts in time in one place!

- Crisis communication strategy (psychology in crisis management - psychologists as a part of Central Crisis Staff of CZ government).
- Research on the impact on the population => recommendation.

Government Council Working Group on the Impacts of Coronavirus SARS-CoV-2 on Mental Health (impact analysis => recommendation): (1) National study of the effects of coronavirus on mental health (non-clinical adult population) (2) Research on people placed in institutions; (3) Research of crisis lines and online services; (4) Mapping the needs of children and adolescents; (5) International study „The COVID-19 HEROES“ (mapping of the impact on health professionals). We prepare recommendations for the government now.

Denmark – Anders Korsgaard

The Danish Psychological Association has established an Expert Corona Board. It offers advice to media and official agencies. The board has published written material with recommendations to colleagues and the public.

The members of the board are all experienced psychologists with qualifications in the field of psychological trauma.

Psychologists in Denmark have been giving consultations to individuals, groups, and organizations. And established debriefings for health care workers.

At present, the COVID-19 situation is under control. Very few people contaminated or hospitalized.

The Netherlands – Magda Rooze

The first reported infection was on the 27th of February. In total 6.090 persons died, all tested positive on the virus, actual numbers are probably higher based on excess mortality of 8600. 49.658 persons infected of which 17.000 work in the care sector. The main group of infected persons between 55-59 years, those deceased mainly between 80-89 years.

At the moment of this report, measures are being relaxed, schools already started, bars, restaurants are re-opening. Still 1,5 meter distancing. The government wants to arrange this in an emergency law. More and more groups of citizens protest against the measures. These demonstrations are forbidden because of health issues.

After 4 months it is not so much a health crisis anymore, but more an enforcement crisis, and from a honeymoon phase we find ourselves now into a controversial phase.

Norway – Heidi Wittrup Djup

As of July 15th 2020, there are 9001 confirmed cases of Corona in Norway. Five people are currently hospitalized and 253 have died.

After the lockdown was declared on the 12th of March, the government stated that the situation was under control on the 6th of April. Since then, the measures that were undertaken have gradually been released.

The unemployment rate is higher than it ever has been since World War II, and the psychosocial effects are yet to be discovered.

Due to the lockdown, the availability of a range of health services was reduced. Many places, health personnel was relocated or had to start using technological platforms or digital solutions to meet the clients' needs.

Psychologists have been very active both at a local and national level in terms of providing information about how to communicate with children about the situation, how to organize and implement psychosocial support, and how to care for vulnerable groups. Children, refugees, minorities, the elderly, and people with disabilities and special needs have been among the groups that have received the most attention. Also, there has been a huge concern about a possible increase in domestic violence, mental health problems, isolation, and suicide.

Advice regarding sleep, how to handle quarantine, self-help techniques, and how to support others, have been spread by professionals through regular media, social media, and a variety of websites. The information has been available in different languages. Also, how to support health personnel and organizations under pressure, has been highlighted.

There is a concern that there will be new waves of infections in the time that follows. Local lockdown is a likely scenario, maybe also at a national level. The economic impact is expected to last over time. This will affect many people and families and is a social and mental health risk factor in itself.

How to reach vulnerable groups, and how to motivate the public to adhere to rules and guidelines over time, will thus be an important focus in the time to come. How to reduce negative mental health outcomes and how to prevent and manage the psychosocial consequences, will be important tasks for psychologists.

Many studies have been undertaken already, and a lot of experience has been collected. And even though this period has been very challenging, it also shows how people manage to cope, stand together, and find new ways of appreciation, support, and togetherness. These positive experiences will be valuable to build upon in the future.

Serbia - Boris Kordic

For the first meeting, 15 May:

The Coronavirus Pandemic (COVID-19) and the introduction of measures by the Government of the Republic of Serbia to prevent the spread of the pandemic initiated the DPS Crisis Intervention Committee, which decided to take swift action to provide psychosocial support to the Serbian population, especially given the situation of social isolation and fear of unknown diseases. The activities took place on several fronts. An invitation was sent to DPS members to apply as volunteers to provide

psychosocial support. The DPS website continuously publishes articles by our and foreign psychologists with links to important documents related to the activities of psychologists in a pandemic situation. Some of the documents were translated into Serbian thanks to our volunteers (e.g. COVID 19: How to successfully overcome house isolation and quarantine). In addition to recommendations to psychologists, the topics of the psychological impact of quarantine, psychological recommendations to journalists, psychological recommendations for working with children, the elderly, people in isolation, and the like stand out. Previously established cooperation with the Red Cross intensified and the DPS offered volunteers for psychosocial support to Red Cross volunteers working in the field, as well as to the citizens of Serbia who need that help. The Red Cross initiated the implementation of the mobile application "Let's Talk" for psychosocial support to citizens and Red Cross volunteers.

The Crisis Intervention Committee of DPS also provides supervisory support to volunteers. A simple way of notating conversations as a database of our activities has also been developed. The telephone numbers of 81 volunteers for the citizens of Serbia are available on the DPS website. Besides, Section of Preschool Psychologists gathered volunteers who offer psychological support to parents of preschool children.

The specificity of the behaviour of the governing structures of the state is the constant addressing of the president and the crisis staff, which does not have a psychologist in the team, in such a way as to provoke very negative reactions in part of the population. Many people sought psychotherapeutic help because of fears that were triggered by the president's speech when he predicted a huge number of deaths and insufficient space in the cemetery for their burial. Among other measures, the measures banning the movement of people over the age of 65, curfew and restricted movement for pets had a very negative impact.

For the second meeting, 29 June:

After the relaxation of the government's severe measures, parliamentary elections were held. The consequence is a strong second wave of coronavirus and a large number of patients. Hospitals that have returned to normal operation are now COVID hospitals again. The organizations that brought the workers back to work in the company started working online again. Schools have finished working online, and universities hold exams in very controlled conditions concerning the rules of wearing masks and gloves and social distancing. It is interesting that after the measures were relaxed, the need for psychosocial support suddenly decreased. Regardless of that, we expect that the consequences of the current traumatic situation will occur after getting out of that situation when people relax. Therefore, we plan to launch marketing activities to make the application for psychosocial support more visible.

Turkey – Banu Yilmaz

The normalization process started by the beginning of June; weekend lockdowns ended, malls, restaurants, pubs, and hotels were opened, travel between cities is allowed. The number of new cases per day was below 1000 in the last few days of May and the beginning of June, but the figures went up since the first day of normalization. The number of cases has increased 19,7 % since the first day of the normalization process. Besides, the number of cases in the intensive care units increased 53 %.

The last official figures show that the total number of cases in Turkey is 197,200 (out of almost 3.5 million tested), and the death toll is 5097 as of today.

Also, more than 170.000 people with Covid-19 diagnose have recovered.

These figures make people think that the priority of the government is to save the economy, which is another important problem considering the psychological wellbeing of people.

Turkish Psychological Association Activities:

In our first meeting, I have mentioned the online mental health program of the Ministry of Health. The Association was one of the stakeholders of this program. It is over now. Most other activities, for example, online trainings and volunteer support for the affected groups finished as well.

We also prepared a few more brochures, especially about the effects of distance education for children and adolescents, and a Psychosocial Support Guide was written by a group of colleagues from the İzmir branch of the Association.

There is no scientific data yet, about the psychosocial consequences. But it seems that there will be quite a several research because the Scientific and Technological Council made a call for projects, and as far as I know, quite several proposals were approved.

United Kingdom – Noreen Tehrani

The UK has 311,151 confirmed cases with 43,550 deaths this is the highest number of deaths in Europe. The highest number of cases is in London although other areas are now having increasing numbers.

Problems with unlocking lockdown gradually as some people are meeting in large groups at the seaside or for street parties.

There has been a resurgence of COVID 19 in some areas and the lockdown was re-instated in Leicester. Most of the affected areas have high levels of social need and are in areas with large black and Asian communities.

The furloughing of employees unable to work will end in October, we are anticipating a large increase in unemployment.

British Psychological Society's Activities: Lots of webinars and guidance See BPS website – I am involved in two co-ordinating groups and joint working group with the Society of Occupational Medicine

My projects Taking Trauma Home
 Upskilling disadvantaged and disabled
 Anxiety at returning to work
 Homeworking employees facing domestic violence

EFPA – Koen Lowet

Normally, EFPA would have had 2 EC – meetings and a PC – meeting during the COVID – 19 period. They have been replaced by several online meetings, however, in all, the meeting time for the EC was significantly reduced and therefore also progress on its action points.

The main focus was given on the evolution and the future of Europsy. What will be the next steps? Ideas on the inclusion of Continuous Professional Development and ongoing discussions on the field of practice and other specialisations.

A lot of effort went into the revision of the different work plans. This EC has started a new process to get the different groups more aligned on the needs of the member associations and EFPA's general policy. EC – member Anna Leybina is the project manager on this.

Concerning COVID -19 EFPA launched a special COVID -19 hub from where it tries to collect all relevant materials sent in by the groups and EFPA's MA's. EFPA also organised 6 well – attend webinars. We keep on encouraging groups to share their expertise through the hub and to signal gaps that need to be filled in.

Finally, a lot of energy of our MA's lie in the professional regulation of psychologists in Europe. There is a need for a conceptual framework on legal regulation of the profession as a kind of the third pillar next to Europsy and our ethical code. This will be further looked into.

Belgium update

Belgium is coming out of the lockdown. Our main hospital systems have done very well. Our ICU – capacity was never endangered due to our high number of hospitals and our flexibility in quickly upscale residential capacity if need be. Nevertheless, our death toll is very high (more than 9.000 casualties) but this is also due to the fact that we also count presumable COVID-19 deaths as our test – capacity was insufficient.

COVID -19 really exposed our weaknesses in the system and those lie mainly in the lack of command. Belgian has 9 ministers of health due to its complex state structure and this has proved totally inefficient. Our health system is literally split up with some sectors on the federal level and others on the state level.

The government only recently started to take into account advice from psychology on sustainable behaviour change, but far too late to have a structured exit. By consequence, people interpret “the rules” pretty much as they want which explains why we keep on having a stable but relatively high level of new contaminations mostly among young people.

During the COVID-19 pandemic, an interesting collaboration has started between different stakeholders who joined forces. Psychologists, psychiatrists, hospital employer organisations worked together on organising and providing psychosocial support for more than 360.000 people in the health and well – being labor force.

EFPSA – Kristina Mozuraityte

During the last few months, EFPSA has been actively working on several projects, the aim is primarily to contribute to helping young people to adjust to the COVID-19 crises.

Online Campaigns & Trainings:

EFPSA's Social Impact Initiative team has been working on several mental health prevention-related online campaigns. The focus has been on informing students about potential psychological related stressors & coping strategies in combating social isolation during the voluntary/involuntary quarantine.

Besides, EFPSA has been spotlighting evidence-based recommendations for taking care of your mental wellbeing and improving psychological resilience. Our initial aim has been maintained throughout the Pandemics offering psychoeducation to young people regarding stress and mental health-related conditions (e.g. PTSD, anxiety, depression).

EFPSA's Training Office has begun delivering free online training sessions/ workshops for students. Their aim is to help young people to develop and further foster skill for improving their psychological wellbeing and encourage them to take care of their mental health. Topics included are as followed: meditation, mindfulness, stress management techniques, time management, motivation, etc.

EFPSA Research Summer School:

EFPSA is currently contributing to an academic level. For this year's annual *EFPSA Research Program* the topic was chosen as "*Occupational & Health Psychology: Fostering a Healthier Workplace in and out of the Pandemic*". The topic aims to encourage psychology students to start discussions on the effectiveness and impact of various prevention, intervention instruments as well as developing new ideas and concepts that could be used in the field when working with future patients/clients.

Participants List

1.	Kristina Mozuraityte – EFPSA - Lithuania	Present
2.	Heidi Wittrup Djup – Norway	Present
3.	Stepan Vymetal – Czech Republic	Present
4.	Sandra Pitzl – Austria	Present
5.	Marc Stein – Luxembourg	Present
6.	Noreen Tehrani – United Kingdom	Present
7.	Nathalie Garcia Manitz – observer - Andorra	Present
8.	Banu Yilmaz – Turkey	Present
9.	Elona Mustafaray – Albania	Present
10.	Anders Korsgaard - Denmark	Present
11.	Magda Rooze – convenor – Netherlands	Present
12.	Koen Lowet – liaison - Belgium	Present
13.	Anthi Loutsiou - Cyprus	Present
14.	Boris Kordic - Serbia	Present

Useful resources shared by members during the meeting

From Mark, Luxemburg

- <https://www.worldometers.info/coronavirus/>
- WHO's Data and Resources on Mental Health and COVID-19
<https://www.euro.who.int/en/health-topics/noncommunicable-diseases/mental-health/data-and-resources/mental-health-and-covid-19>

From Sandra, Austria

- Pieh, Christoph and Budimir, Sanja and Probst, Thomas, Mental Health during COVID-19 Lockdown: A Comparison of Austria and the UK (May 4, 2020). Available at SSRN: <https://ssrn.com/abstract=3592372> or <http://dx.doi.org/10.2139/ssrn.3592372>

From Anthi, Cyprus

- WHO's Factsheet – Vulnerable populations during COVID-19 response (May 2020)
<https://www.euro.who.int/en/health-topics/noncommunicable-diseases/mental-health/publications/2020/factsheet-vulnerable-populations-during-covid-19-response-may-2020>