defining and Operationalizing Key Themes of High-quality Psychosocial Support Using the Concept Mapping Method:

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Introduction: International psychosocial support guidelines reflect consensus on support principles and interventions. However, no consensus exists on what recipients consider important elements of service delivery. Within two contexts – after a potentially traumatic event (PTE) and people with Spinal Muscular Atrophy (SMA) – the aims were to contribute to (1) understanding which psychosocial support aspects are considered important by recipients and relevant stakeholders; (2) developing instruments to test and integrate those aspects in practice, in order to evaluate the quality of psychosocial support from the recipient’s perspective.

Method: Concept mapping was used to achieve consensus on key themes of psychosocial support. These were operationalized in surveys and pilot-tested, conforming to the Consumer Quality Index. This determines the importance and needs for improvement.

Results: Concept mapping resulted in eight key themes within the PTE context and six in the SMA context. PTE survey (N=132) results showed key themes “an approach that incorporates all aspects of a human being” and “a respectful approach and awareness of personal boundaries” as most important. The perceived need for improvement of the key theme “availability and accessibility of quality information” was ranked the highest.

Conclusion: The similarities between both contexts support the notion that there are universal aspects of psychosocial support. Simultaneously, the context-specific idiosyncrasies found underscore the necessity to adapt to context. The surveys have the potential to contribute to a growing toolbox of quality evaluation instruments.

Mental Health and Psychosocial Support Interventions to Mitigate COVID-19 Related Mental Health Problems: A Systematic Review of Reviews

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Introduction: The COVID-19 pandemic and the measures taken to contain it, have had a substantial effect on mental health of populations worldwide. Uncertainties about the future and one’s own health, as well as restrictive measures drastically altered people’s lives. To anticipate and mitigate the probable mental health impact, mental health and psychosocial support (MHPSS) interventions have been recommended and implemented. The objective of this systematic review is to provide an overview of different types of MHPSS interventions and the quality of the scientific evidence in the context of a pandemic.

Method: A systematic search of interventions for reducing mental health problems or risks due to the COVID-19 pandemic was performed in November 2021 and repeated for new records in August 2022. APA PsycInfo, Embase, Ovid MEDLINE(R) ALL, EBM Reviews and Web of Science databases were systematically searched for relevant articles. The methodological quality of selected articles was assessed using the NHLBI Quality Assessment Tool for Systematic Reviews and Meta-Analyses.

Results: A summary of the content and quality of MHPSS interventions during the COVID-19 pandemic is provided. The interventions could be clustered predominantly into existing MHPSS categories of “Basic aid”, “Information”, “Emotional and social support”, “Practical support” and “Healthcare”. Nevertheless, the evidence supporting the applicability and the effectiveness of such measures is limited when it comes to the mitigation of mental health problems.

Conclusion: The clustered overview of different COVID-19 interventions points at strong similarities with interventions in general evidence-based MHPSS guidelines. However, there
is a need to integrate more systematic monitoring, evaluation and research to appraise the applicability and effectiveness of MHPSS measures in future pandemics and other crises.

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Determining the Impact of Hurricane Dorian & the Covid-19 Pandemic on Moral Distress in Emergency Medical Providers at the Rand Memorial Hospital

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Introduction: Cumulative disasters have been shown to influence mental and physical health in both responders and victims, with studies showing associations in rates of depression and Post Traumatic Stress Disorder. Systemic problems that impact patient care such as limited resources, overcrowding of emergency rooms, and staffing shortages can be morally challenging for healthcare workers. Andrew Jameton, in 1984 defined Moral Distress (MD) as the inability of a moral agent to act according to his or her core values and perceived obligations due to internal and external constraints. Unresolved MD can create significant long-term debilitating physical and mental damage. Emergency medical providers on the island of Grand Bahama had the unique experience of responding to both the aftermath of Hurricane Dorian and the Covid-19 Pandemic. The aim of this study is to determine the prevalence of Moral Distress (MD) in Accident & Emergency (A&E) Physicians, Nurses, and Emergency Medical Service (EMS) staff at the Rand Memorial Hospital (RMH) in the Bahamas.

Method: This is a descriptive, qualitative, prospective cross-sectional study, utilizing a three-part survey sent to participants. Sociodemographic information, Hurricane Dorian & Covid-19 experiences, and responses to a validated modified Moral Distress Scale will be collected and uploaded to a secure, encrypted data management program. The data will be analyzed using the most current IBM SPSS statistical analysis package. Descriptive and Inferential statistics will be used to determine the impact of Hurricane Dorian & Covid-19 on MD and its associated sociodemographic factors.

Results: Data collection and analysis are planned for completion by March 1, 2023.

Conclusion: Addressing the causes of Moral Distress early can help improve healthcare systems’ resiliency by ensuring a healthy and supported workforce equipped with the resources to respond to future disasters.

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Evidence-informed Mental Health and Psychosocial Support (MHPSS) Guidelines: Are They Any Good and Where Do They Lead Us When Disaster Strikes?

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Introduction: Disasters and humanitarian crises can have a tremendous impact on the mental health and psychosocial well-being of affected populations. Reliable and practical evidence-informed mental health and psychosocial support (MHPSS) guidelines are indispensable for policy and practice to address the mental health impact. Our objective was to review the quality of available guidelines and to explore similarities and differences in content.

Method: The review was conducted in two steps. Firstly, MHPSS guidelines, frameworks, manuals and toolkits were selected via a systematic literature review as well as a search in the grey literature. A total of 13 MHPSS guidelines were assessed independently by 3-5 raters using the Appraisal of Guidelines for Research and Evaluation—Health Systems (AGREE-HS) instrument. Secondly, we analyzed the content of the highest-ranking guidelines.

Results: Guideline quality scores varied substantially, ranging between 21.3 and 67.6 (range 0-100, M= 45.4), with four guidelines scoring above midpoint (50). Overall, guidelines scored highest (on a 1-7 scale) on topic (M = 5.3) and recommendations (M = 4.2), while implementability (M = 2.7) is arguably the area where most of the progress is to be made. The four guidelines proved largely similar, overlapping or at least complementary in their MHPSS definitions, stated purpose of the guidelines, user and target groups, terminology, and models used. Many recommended MHPSS measures and interventions were found in all of the guidelines and could be categorized. The guidelines stress the importance of monitoring needs and problems, evaluating the effect of service delivery, deliberate implementation and preparation, and investments in proper conditions and effective coordination across professions, agencies, and sectors.

Conclusion: The MHPSS knowledge base embedded in guidelines is rich and contains invaluable content for disaster risk reduction. Although application contexts differ