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Letter to the Editor

Homeless mentally ill people and COVID-19 pandemic: The two-way sword for LMICs



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To the Editor

Homelessness is a big challenge in low-and middle-income countries (LMICs) during the public health emergencies viz epidemics and pandemics. A significant number of homeless patients have some sort of mental illness and among the homeless mentally ill people (MHIP), considerable number have one or more medical co-morbidities. Majority of the homeless patients with mental illness have severe mental illnesses (Patten, 2017).

Currently, most of the countries across the globe are affected by a highly contagious novel coronavirus which was started from the Wuhan city of China and within months took the shape of pandemic (Lipsitch et al., 2020). This article was aimed to draw attention regarding how MHIP affect the spreading the pandemic and how current pandemic affects them.

1. How MHIP affect the COVID-19?

- 1 Easily get infected: As they are homeless, they pose the highest threat to be affected within the shortest possible time. Moreover, they also poor personal care as well as protective measure resulting in having the infection.
- 2 Spread the infection: as they roam most of the time to and from, they can be a potential spreader of the highly infectious viruses like COVID-19.
- 3 Difficult to identify and quarantine: If a homeless mentally ill person acquires COVID-19 infection, it is unlikely to catch public attention. As the identity (name, address) of these persons are mostly not known and they keep on roaming in the streets, roadside and may disappear, they are not easily traceable. Moreover, the LMICs usually lack of such specialized set up, attention and promise to isolate this group of people.

2. How MHIP are affected by COVID-19?

- 1 Medical and psychiatric morbidities: The COVID-19 infection possibility is higher among persons with medical co-morbidities (Jiang et al., 2020).
- 2 Immune compromised state: Homeless persons are often malnourished and have co-morbidities that compromises their immune

- function and makes them more vulnerable for COVID-19 (Jiang et al., 2020).
- 3 Poor hygiene: Homeless patients often live in very unhygienic state which increases the propensity to contract COVID-19 infection.
- 4 Lack of health awareness: Mentally ill homeless patients, who are marginalized from the main stream of society, are deprived from their basic rights and have no access to health-related information. This may result in non-adoption of personal protective measures to prevent acquiring the COVID-19 infection.
- 5 Poor help-seeking behaviour: Help-seeking behaviour for health conditions are poor among patients with mental illness (Gururaj et al., 2016) and it is likely to becomes further worse if the mentally ill person is homeless.
- 6 Increased Case Fatality Rate (CFR): Even without COVID-19 co-infection, the psychiatric patients suffered from premature death. In the countries with most accessible mental health healthcare system such as Australia and the Scandinavian, the mortality gaps accounted to 15–20 years compared to the normal population (Thornicroft, 2013). The comorbidity between mental disorder and COVID-19 among MHIP leads to tremendous challenge in LMICs.

There is a need to look into the health of this marginalized population for the possible spread of COVID-19 infection in the community. The government and other responsible stakeholders should take a lead to screen the health condition of these homeless mentally ill persons in the LMICs, which may be beneficial in reducing the community spread of COVID-19 infection. At the same time there is potential role of mental health professionals to address the mental health issues of these patients as they are often untreated (Banerjee, 2020). As there is paucity of manpower in mental healthcare in developing countries, the mental health issues of homeless mentally ill can be addressed through online consultation liaising with general medical practitioners (Yao et al., 2020). Early and adequate treatment of mental illnesses in these patients is likely to improve their general physical health and degree of adherence to the precautionary measures required during this COVID-19 pandemic.

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Declaration of Competing Interest

The authors declare that they have no known competing interest.

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