IUPSYS EMERGENCY RESPONSE SURVEY RESULTS: UNITED STATES OF AMERICA (USA)

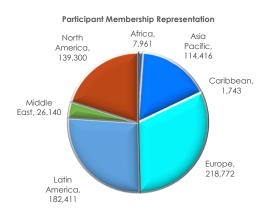
Thank you for taking the time to participate in the IUPsyS survey on psychology's response to the global public health emergency caused by the novel Coronavirus (COVID-19) in your country.

Participants

IUPsyS National Members, Affiliates and other organisations were contacted by email, inviting them to participate in the survey. Survey responses were received from 79 organisations in **72 countries**. Close to 6300 people work for the participating organisations and they represent more than **690,000 individuals** as part of their membership.



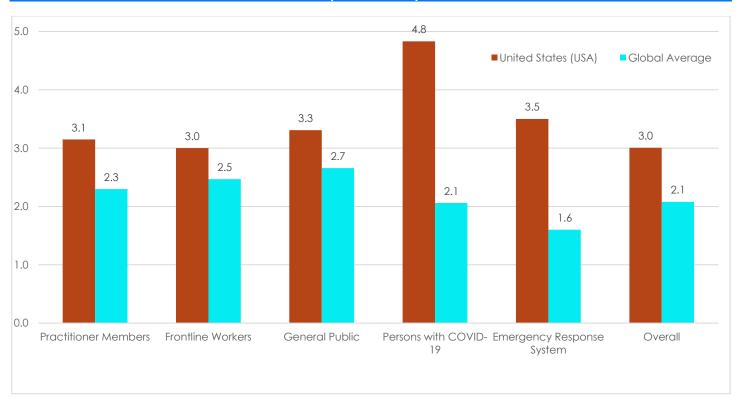
Only the United States of America (USA) submitted data from the North America region.



Overview of COVID-19 Emergency Response Actions Taken

The survey covered psychological support for practitioner members, the general public, frontline workers, persons with COVID-19 and their families, and the emergency response system. Where no action was taken to support practitioner members, frontline workers, the general public, persons with COVID-19 and their families, or the emergency response system, a rating of 0 applies. The remainder of the scale is from 1 for Limited action taken, to 5 for Numerous actions taken.

Based on your submission, the USA was ranked joint 14th out of the 72 participating countries, in terms of actions taken in response to the pandemic.



Breakdown of COVID-19 Emergency Response Actions Taken

Action	Level of Action Taken (Out of 5)	
Support for Practitioner Members		
Online webinars/webcasts	5.0	2.8
Online short courses	1.7	1.6
Online facilitation/classes/group work for professional qualifications	2.3	1.7
Technology proficiency skills training	2.3	1.5
Psychological research/information (e.g. on the organisation's website, emailed to practitioners or on social media)	3.7	3.1
Strategies for self-care for psychology practitioners	3.3	2.8
Technical practice standards, guidelines and/or protocols and support materials for psychology practitioners (e.g. for telepsychology, working in hospitals with patients, posters, manuals)	3.3	2.8
Ethical guidance and advice to psychology practitioners	3.3	2.6
Supervision of psychology researchers, psychology practitioners and psychology practitioners in training	3.3	1.7
Support for Frontline Workers		
Strategies for self-care for frontline workers	3.7	2.7
Psychological information and support for frontline workers and their families	4.0	2.7
Monitoring of psychological risks and emerging issues amongst frontline workers	3.0	1.7
Training for frontline workers on essential psychological care principles	3.0	1.7
Support for those returning to work or education/training institutions	1.3	1.5
Support for the General Public		
Information about psychological well-being provided on the organisation's website, by email or using social media	4.3	3.9
Information about psychological well-being presented on radio, television or print media	3.3	3.7
Online webinars/webcasts about psychological well-being for the general public	4.7	2.1
Information about psychological well-being delivered to specific populations	4.7	3.1
Addressing rumours and myths amongst the general public	3.3	2.3
Activity toolkits that parents, teachers and families can use with their children in isolation	0.0	1.9
Processing complaints against psychology professionals for unethical conduct	1.7	1.1
Information about how to seek healthcare support, including referral to local psychological services	3.7	3.0
Help to deal with fear, anxiety and stress, and strategies for coping with the pandemic Help to deal with domestic, interpersonal and/or gender-based violence during isolation	4.3 3.0	3.7 2.5
Strategies for dealing with physical and social distancing, and lockdown	3.7	3.3
Psychological self-assessment and self-help technology-based tools	3.0	1.3
Psychological services (i.e. teletherapy/counselling)	3.3	3.0
Advocating for the rights of vulnerable persons (e.g. persons with disabilities, the elderly, children)	3.3	2.6
Support for persons with COVID-19 and their Families		
	2.2	1.7
Psychological services for persons with COVID-19 Support for persons with COVID-19 in quarantine or ICU care	3.3	1.7
Support for family members/significant others of persons with COVID-19 in quarantine or ICU care	3.3	1.5
Psychological information for family members/significant others of persons with COVID-19	3.3	1.9
Bereavement support for family members/significant others of persons with COVID-19 that die	3.0	1.3
Dealing with domestic/gender-based/interpersonal violence	3.3	1.6
Support for the Emergency Response System		
Psychological services during emergency response activities (including treatment and isolation/quarantine sites)	3.3	1.6
Psychological services to government departments (e.g. health, military, police, social welfare/development)	3.3	1.8
Private psychological services, including through health insurers	3.3	1.9
Systems to identify, refer and care for people with psychological conditions and substance abuse disorders	3.3	1.3
Community-based psychological services	3.3	1.6
Advice on data collection and reporting by government and government departments Advicing government and government departments on addressing psychological affects of COVID 19	1.3 2.0	1.2 2.3
Advising government and government departments on addressing psychological effects of COVID-19 Retired and other inactive psychology practitioners returned to service	0.0	0.6
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Participation of underrepresented groups in the psychological services workforce	1.7	117