



COMMUNITY MENTAL HEALTH FROM PUBLIC HEALTH PERSPECTIVE

HALK SAĞLIĞI BAKIŞ AÇISIYLA TOPLUM RUH SAĞLIĞI

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Abstract

Mental health and physical health are integral parts of general health. In the past, mental health lagged behind and overshadowed by physical health. Today, the importance of mental health is beginning to be recognised, although it is not yet fully understood. What an individual thinks, how (s)he feels, and how (s)he acts is related to mental health. While there are more than two hundred types of mental health issues, the leading mental health issues are anxiety and depression. Mental health issues are problems that maintain their importance at every stage of life. In 2019, it was reported that approximately 970 million people worldwide had a mental health problem. The prevalence of anxiety is 4% and depression is 3.8% globally. 4.9% of the disease burden in the world in 2019 is because of mental health issues. WHO reported a 26% increase in anxiety and a 28% increase in depression worldwide in the first year of the COVID-19 pandemic. Since the promotion and prevention of mental health is not the sole responsibility of the health sector, the necessary intersectoral cooperation should be achieved.

Keywords: Anxiety, Depression, Public health, Mental health.

Özet

Ruh sağlığı ve fiziksel sağlık genel sağlığın birbirini tamamlayan parçalarıdır. Geçmişte ruh sağlığı fiziksel sağlığın gerisinde ve gölgesinde kalmıştır. Günümüzde ise, halen tam olmamakla birlikte, ruh sağlığının önemi ortaya çıkmaya başlamıştır. Bireyin ne düşündüğü, nasıl hissettiği ve ne şekilde davrandığı ruh sağlığıyla ilişkilidir. İki yüzden fazla türde ruh sağlığı sorunu bulunmakla birlikte önde gelen ruh sağlığı sorunları anksiyete ve depresyondur. Ruh sağlığı sorunları yaşamın her evresinde önemini koruyan konulardır. 2019 yılında dünya genelinde yaklaşık olarak 970 milyon kişide herhangi bir ruh sağlığı sorunu bulunduğu belirtilmiştir. Küresel olarak anksiyete yaygınlığı %4 ve depresyon yaygınlığı %3,8'dir. Dünyada 2019 yılında hastalık yükünün %4,9'u ruh sağlığı sorunlarına bağlıdır. DSÖ COVID-19 pandemisinin ilk yılında dünya genelinde anksiyetede %26 ve depresyonda %28 oranında artış görüldüğünü bildirmiştir. Ruh sağlığının geliştirilmesi ve korunması yalnız sağlık sektörünün etki alanında olmadığından, bu alanda ihtiyaç duyulan sektörler arası işbirlikleri hayata geçirilmelidir.

Anahtar Kelimeler: Anksiyete, Depresyon, Halk sağlığı, Ruh sağlığı.

OVERVIEW / GENEL BAKIŞ

1. Introduction

In 1948, the World Health Organization (WHO) defined health not only as the absence of disease and disability but also as a state of complete physical, mental, and social well-being. Mental health was included in the WHO's classic definition of health (1). The mental component of health has also been mentioned in the health definitions of Last, Starfield, Card, and Leonardi (2-5). Mental



health, which is a state of well-being in which people can cope with the stresses of life, work productively and efficiently, contribute to social life and develop themselves through the realisation of their abilities, and physical health are complementary and interacting parts of general health. Mental health issues may increase the risk of non-communicable diseases and non-communicable diseases may increase the risk of mental health issues (6-8). In both the WHO definition and later definitions, it is seen beyond doubt that mental health is an inevitable part of general health. In the definition of mental health, it is remarkable how much mental health is a part of daily life.

Historically, mental health has lagged behind and been overshadowed by physical health. In fact, mental health was perceived as a field outside of modern medicine and mental health issues were perceived as non-existent / faked / fabricated conditions. Today, although still not fully recognized, mental health is approaching the recognition it deserves.

The aim of this review is to address the important aspects of community mental health from a public health perspective, to highlight the current dimensions of the problem, and to propose solutions with a correct approach.

2. Scope of mental health

Mental health, which is classified under the title of mental health/mental hygiene as a scientific term, is also used as "sanity" and "psychological health" in general use (9). Mental health includes the emotional, psychological, and social well-being of the individual. How an individual thinks, feels, and behaves is closely related to mental health (6). Although there are more than two hundred types of mental health issues, the leading mental health issues are as follows: Anxiety, depression, bipolar disorder, post-traumatic stress disorder, schizophrenia, eating disorders, behavioral disorders, addictions, suicide, and other neurodevelopmental disorders (6, 10, 11). In summary, the scope of mental health basically starts from daily life, but it can appear as very different issues.

3. Epidemiology of mental health issues

Mental health and mental health issues are important at every stage of life. Children, adolescents, adults, and elderly are affected by mental health issues (6, 11). According to the World Health Organization, 1 in 8 people worldwide had a mental health issue in 2019. This equates to around 970 million people struggling with mental health issues. The most common mental health issues are anxiety and depression. 301 million people, including 58 million children and adolescents, live with anxiety, and 280 million people, including 23 million children and adolescents, live with depression (11, 12). The global prevalence of anxiety is 4%, 4.8% among adults, and 4.6% among people over 60 years of age. The prevalence of depression is 3.8%, 5% among adults, and 5.7% among people over 60 years of age. Globally, 4.9% of the burden of disease/DALY (Disability Adjusted Life Years) for 2019 is related to mental health issues, with 1.8% due to depressive disorders and



1.1% due to anxiety (12). Depression ranked 12th among the top 20 causes of DALYs worldwide in 2019, with a prevalence of 601 per 100 thousand people. DALYs due to depression may vary between WHO regions and World Bank income groups (Table 1) (13). In addition, 40 million people live with bipolar disorder, 24 million with schizophrenia, and 14 million with eating disorders including 3 million children and adolescents (11, 12).

Table 1. DALYs due to depression by WHO regions and World Bank income groups (13).

WHO regions	DALYs due to depression (per 100 thousand people)	Ranking	World Bank income groups	DALYs due to depression (per 100 thousand people)	Ranking
Africa	591	19th	Low	631	16th
America	684	11th	Lower middle	596	13th
South-East Asia	585	12th	Upper middle	559	11th
Europe	706	9th	High	698	10th
Eastern Mediterranean	710	9th			
Western Pacific	501	12th			

Mental health studies with community representation are limited in Turkey (14). According to the Turkey Mental Health Profile Survey, the results of which were published in 1998, 18% of the population experienced at least 1 mental health issue during their lifetime (15). Turkey Mental Health Profile Survey-2 is planned and a promotional meeting was organized for the survey in 2019 (16). According to the Turkey Health Survey 2022, the prevalence of depression in the distribution of illnesses experienced in the last 12 months by individuals over the age of 15 is 6.9% and this rate is 4.5% in men and 9.2% in women (17).

Considering the epidemiology of mental health issues, women are more affected by mental health issues compared to men. Men seek support for mental health issues less often than women (14, 18).

Mental health is widespread to a considerable extent both worldwide and in Turkey. Statistics clearly show that mental health issues significantly affect individuals of all ages and genders. Anxiety and depression, although not the only ones, are leading mental health issues.

4. COVID-19 and mental health

Pandemics that have occurred from time to time throughout human history have had effects on mental health in addition to physical health. WHO reported a 26% increase in anxiety and a 28% increase in depression worldwide during the first year of the COVID-19 pandemic. In addition, pandemic conditions have led to severe disruptions in mental health services and an increase in the



number of people who need treatment but are unable to receive it (11). A review of 15 studies evaluating mental health during the COVID-19 pandemic found that mental health was negatively affected in the general population, healthcare professionals, and patients who had COVID-19 and that they experienced mental health issues such as anxiety, depression, stress, insomnia, worry about various issues, phobias, and somatic symptoms. It was also stated that individuals who already had mental health issues were negatively affected by pandemic conditions (19). The COVID-19 pandemic is neither the first pandemic that humanity has seen, nor it will be the last pandemic. Therefore, attention to the mental health consequences of pandemics is a necessary component of pandemic preparedness.

5. Risk factors for mental health issues

Not all people are at the same risk for mental health issues. There are some factors that increase the risk. These factors include negative life experiences such as being sexually harassed, experiencing violence, witnessing violence, abuse in early life periods; suffering from chronic diseases such as cancer and diabetes mellitus; alcohol/drug abuse; biological factors and chemical imbalances in the brain; exposure to poverty and inequality; disability; genetic predisposition; loneliness and feeling isolated. As a result of all these factors, changes occur in the structure/function of the brain and mental health issues may occur (6, 11). Mental health may change over time depending on many factors. When the demands placed on an individual exceed his/her resources and ability to cope, negative effects on mental health can occur. Long working hours, caring for a loved one, and economic hardship are shown among these demands (6). There are many identified risk factors for mental health issues and mental health can be affected by many different situations at any time and can change over time.

6. Mental health literacy

Health literacy has been defined by WHO as the ability to reach the level of knowledge, skills, and confidence required to improve individual and community health levels by changing lifestyles and living conditions (20). According to another definition, it is the ability to find, understand, and use the information and services required for individuals to make health-related decisions for themselves and others (21).

The definition of mental health literacy, which is a continuation and part of health literacy, was first made by Jorm et al. in 1997. According to this definition, mental health literacy is defined as knowledge and beliefs that help to recognize, manage, and prevent mental health issues (22). Mental health literacy has six components. These are recognition of mental health issues, knowledge, and beliefs about the risk factors and causes of mental health issues, knowledge about self-help, knowledge about seeking professional help, attitudes that facilitate receiving help, and knowledge of how to access information about mental health (23). Reducing stigmatization related to mental health



issues should be added to these six components (24-26). In addition to scales and standardized forms specifically designed for diseases to assess mental health literacy, there are also scales and standardized forms that assess general mental health literacy (25).

In a study conducted with university students in the UK, it was determined that mental health literacy was at low levels, and women, postgraduate students, and those with mental health issues showed higher mental health literacy (27). Three studies conducted periodically with adults in Australia using the same questionnaire found a positive increase in mental health literacy over time (28). Mental health literacy, which is an important part of health literacy, needs to be taken into consideration, especially today when mental health issues are increasing. Studies show that the level of mental health literacy is not at the desired level.

7. Social determinants of mental health

Mental health, just like physical health, is influenced by social determinants. Studies have identified low socioeconomic status, low educational level, loneliness, lack of social support, unemployment, economic challenges, perceived discrimination, inequalities, neighborhood socioeconomic status, and constructed environment have been shown as social determinants of mental health (29, 30). As health literacy is recognized as one of the social determinants of health, mental health literacy can be considered as one of the social determinants of mental health (31). Incorporating interventions for social determinants that have been determined to affect mental health in plans and practices to be made for the protection of mental health may increase the success of the plans and practices.

8. Promotion and prevention of mental health

The actions needed to promote and prevent mental health are not only within the health sector but also require a multisectoral approach. The support of cognitive, emotional, and physical development in early childhood, the prevention of violence against women, the support of the elderly for mental health issues that worsen in old age due to loss of role, social exclusion, and chronic diseases, and the prevention of suicide are the main areas of action for the promotion and prevention of mental health. The Ministry of Health recommends that preventive mental health interventions be integrated into primary health care services (32).

Interventions for the promotion and prevention of mental health can be planned both at the community level and specific to at-risk groups. Not only the Ministry of Health, but also the Ministries of Family and Social Services, Labour and Social Security, Youth and Sports, and National Education should be involved in this planning and a system from central to local should be established. Mental health promotion and prevention methods include increasing mental health literacy, providing follow-up, monitoring and support as needed for at-risk populations, screening with scales for mental health



issues, changing the structure of community through legislation and national/international mental health action plans, a comprehensive mental health service network in the form of services in physical space, online services and telephone support, and mental health professionals incorporating not only treatment but also promotion/prevention into their daily practice (32, 33). As in many areas of health, preventive services and interventions should be the focus of attention in mental health. Today, however, preventive services lag behind therapeutic and rehabilitative practices. This situation must be reversed.

9. Mental health awareness and programs

Since 1992, WHO has organized World Mental Health Day on 10 October each year. The day aims to draw attention to mental health issues and raise awareness of mental health in the community, and different mental health themes are chosen each year. Some examples of selected themes are as follows: 2017-Mental health in the workplace, 2018-Young people and mental health in a changing world, 2019-Focus on suicide prevention, 2020-Move for mental health: let's invest, 2021-Mental health care for all: let's make it a reality, 2022-Make mental health and well-being for all a global priority, and 2023-Mental health is a universal human right (34). WHO's Comprehensive Mental Health Action Plan 2013-2030, which aims to promote well-being in all 194 Member States, prevent mental health issues, provide treatment/care to people in need, accelerate healing/recovery, support human rights, and reduce morbidity and mortality among people with mental health disorders, is being implemented (7). The United Nations Sustainable Development Goals include goals related to mental health. These goals are to support/improve mental health and well-being and to strengthen the prevention and treatment of substance/alcohol abuse by 2030 (35).

Within the central organizational structure of the Ministry of Health, there is a Department of Mental Health under the General Directorate of Public Health. The functions of the Department of Mental Health can be summarized as the development of mental health programs, research, education, and awareness-raising activities. There are eleven certified mental health training courses organized by the Department of Mental Health (36, 37). In Turkey, the National Mental Health Action Plan 2021-2023 is being implemented and the objectives of the plan are to improve mental health, strengthen preventive/treatment/rehabilitative mental health services, strengthen community mental health services, and develop forensic psychiatric units (32). Mental health is also included in the Multisectoral Health Responsibility Development Programme 2013-2023 (38).

In Turkey, mental health services are provided by family health centers, hospitals, healthy life centers, community mental health centers, and private psychologists/psychiatrists. Social-behavioral assessment, autism spectrum disorder assessment, HEADSSS (Home, Education/Employment, Eating, Activities, Drugs, Sexuality, Suicide/Depression, Safety) assessment in the developmental monitoring step of routine follow-up of infants, children, and adolescents, and Edinburgh Postpartum Depression Scale application in routine postpartum pregnancy follow-up (39, 40). Although there are



defined goals, plans, and programs in practice related to mental health both in the world and in Turkey, statistics show that mental health in the world and Turkey is not at the desired level. Therefore, it is necessary to review these goals, plans, and programs and identify problem areas.

10. The economic burden of mental health issues

The global economy loses US\$ 1 trillion each year because of lost productivity associated with anxiety and depression. The loss due to all mental health issues is nearly \$2.5 trillion annually. In addition to the direct costs of mental health issues affecting the individual, there are also indirect costs affecting family and community. It has been estimated that every \$1 spent on the treatment of anxiety and depression returns \$4 in terms of well-being and productivity (41, 42). Mental health issues have consequences that closely concern not only individual but also family, community and economy. Investing in mental health should not be avoided in order to ensure economic growth and development and to maintain productivity.

SUMMARY / SONUÇ

Mental health is an important public health priority that is protectable, preventable, and treatable. Mental health issues are the cause of significant disease burden and economic loss both in the world and in Turkey. Increasing mental health awareness, identifying risk factors for mental health and following up with individuals, increasing mental health literacy, fighting against social determinants known to affect mental health, and ensuring that individuals receive treatment for mental health issues are just some of the steps that can be taken in the field of mental health. As this review shows, the scope of mental health can cover different points in a very broad spectrum, and there is a need for multisectoral approaches in the fight against mental health issues.

Acknowledgements / Teşekkürler

Funding: None

Conflict of interest: None

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