

# Mental Healthcare System

## A Dynamic Continuum

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### Abstract

Mental healthcare in the United States is a considerable component within the healthcare sector, which costs the United States millions of dollars each year, yet mental health within the U.S. is still not up to par with many other developed nations. One of the main reasons for this in regards to the ineffectiveness of mental healthcare are: the costs associated with it, the incompleteness of determined treatment by a mental healthcare professional, and attitudinal ideologies that individuals have. There are many ways to improve mental health services, and some of those ways are via education, addressing mental health barriers, addressing attitudes of the general public/therapists and finally using collaborative care models (CCM's), which essentially integrate mental health services within primary care settings. Establishing mental healthcare within primary care settings would require that physicians collaborate with mental healthcare professionals on a regular basis, as both these services would be interconnected, in order to produce a better diagnosis and treatment for each patient. Thus, models such as the CCM model would be beneficial in the future of both physical and mental health, as the human body needs to maintain the balance of physical and mental health in order to be healthy and perform daily functions.

## Introduction

In order for an individual to function thoroughly, it is important to be both physically and mentally healthy. The balance of mental and physical health is vital because it implies a natural equilibrium that is working to constantly keep the body and mind in synch. But albeit the stability of this equilibrium, changes can occur that can hinder and cause harm not only physically, but mentally as well. While physical damage heals overtime, the mental changes, if left untreated, can potentially become very severe. According to the World Health Organization, “Mental Health is defined as a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community.” Mental health conditions are common and affect a great deal of individuals in the world. For example, in the United States alone, about 25% of the population is affected by one or more of the many mental health conditions at any one time (Goodrich et al., 2013). Albeit the fact that there are many resources in place for individuals in need of mental health support, i.e. psychologists, psychiatrists, etc. there are various reasons that individuals do not use those resources; one of the common reason being the stigma associated with being diagnosed with a mental disorder. For instance, surveys performed in the United States have found that public attitudes towards individuals with mental health problems or disorders are negative (Stuber et al., 2014). This explains as to why many individuals even refuse to acknowledge that they suffer from mental problems, let alone seek help. Therefore, in order to overcome the stigma associated with mental health problems, they should be integrated in the school system, such that students are able to develop the foundations for mental health conditions and potentially prevent mental health problems (Weare & Nind, 2011). But along with teaching students, implementations of collaborative care models (CCM’s) should be integrated within the healthcare setting, such that integrated mental health and medical care for persons with mental health conditions can be provided in primary care settings (Goodrich et al., 2013). Thus, in order for patients to receive thorough mental healthcare, the collaborative care models should be applied, as they analyze a patient as a whole while taking into account an individual’s balance of physical as well as mental health.

## Mental Health Promotion and Intervention in Schools

Students, from a very young age, spend a good amount of time in schools than in any other formal institutional structure. As such, the time spent in school builds upon their peer relationships, social interaction, cognitive process, emotional control, behavioral expectations, and physical and moral development (Fazel, et al., 2014). All these areas described, play a vital role in their mental health development. There are many different areas that can trigger a mental health problem early on in a student’s life. For example, a survey conducted in the United Kingdom showed that 46% of school-aged children had been bullied (Fazel et al., 2014). Childhood bullying can increase the odds of suicidal ideation, and the odds of suicide attempts are more than doubled in young people who report peer victimization. The effects of bullying in students who were victimized also indicate an increase in prevalence of anxiety, depression and self harm (Fazel et al., 2014). Another area that can trigger an onset of mental problems is usually the stress of academic attainment, where stress can take its toll, and in turn cause mental health problems if left untreated. Mental health problems cause a severe effect on young,

impressionable minds, triggering changes in the brain functionality that can possibly cause future issues. Succumbing to a mental condition is based upon many factors such as: genetics, environmental factors etc., but educating students from an early age about many of these issues can be a way to alleviate future harm. In a paper published in *Lancet Psychiatry*, mental health interventions and mental health promotions is a major part of educating the younger generation. Mental health intervention uses the tiered approach, which includes: universal strategies for all students, followed by interventions to assist selected students who face particular risks, and finally a tier with treatment interventions for those with the greatest needs (Fazel et al., 2014). These strategies are very helpful, in that they can be applied to each case individually, and can essentially support students with varying degree of needs. Whereas mental health promotion programs focus on constructs such as social and emotional skills, positive behaviors, social inclusion, effective problem solving and good citizenry (Fazel et al., 2014). Mental Health services when integrated within the educational system can promote physical health, mental health and successful educational attainment. All in all, mental health education is not only beneficial to students, but it can promote awareness about ongoing mental problems that many individuals succumb to. Providing mental health services in schools is an integrative way of promoting well-being mentally. An important way that mental health services can be improved is via better collaboration between education and health sectors that would be enhanced by mutual contributions to basic professional training. For instance, training teachers in mental health promotion skills might not only assist with identification and referral for students who need it, but would also help the teachers feel less overwhelmed when dealing with emotional and behavioral challenges in their classrooms (Fazel et al., 2014). Thus, schools should educate and provide mental health services, such that students from a young age become aware of mental health problems and seek help, so as to avoid future problems and are better able to cope with various upheavals in their lives.

## Barriers that affect the Mental Healthcare System

Mental disorders are very common and widespread, and inflict considerable morbidity and impairment. Despite effectiveness of treatment, a high proportion of individuals with mental disorders do not receive adequate care, or else drop-out of treatment (Andrade et al., 2014). Many patients who come in to receive treatment sometimes have instances of comorbidity. For example, major depression and substance disorder comorbidity is common in individuals with mental disorders and has significant social and clinical implications (Chen et al., 2013). Individuals who suffer from mental illnesses usually have varying views as to why they are not seeking adequate help and treatment. One of the common treatment barrier was financial, i.e. not being able to afford the treatment costs; second leading group of treatment barrier was attitudinal barrier, specifically the belief that the problem could be handled without a professional's help (Chen et al., 2013). Another important treatment barrier can be self-stigma or stigma individuals around them. For example, many individuals with mental problems are afraid of what their family members, colleagues, friends etc., might think if they learn about potential mental condition, thus they forgo treatment in order to keep their diagnosis to themselves.

While individuals with mental disorders seek help less often, individuals who suffer from comorbid disorders are more likely to seek mental health services (Chen et al., 2013). It is interesting to note that even though individuals with comorbid mental disorder seek more treatment they still have a high prevalence of perceived unmet need among individuals with

comorbid major depressive episodes and substance dependence. This leads to the question of how effective is the mental health services system after all. The profiles of barriers to mental healthcare were remarkably similar between individuals with and without substance comorbidity, with financial reasons being the most common type of barriers reported (Chen et al., 2013). Mental Health services are expanding within the United States as more and more individuals seek diagnosis and treatment, but there is still an unmet need within for existing mental health patients. This causes a question to rise: Is the current mental health system sufficient in attending to the varying needs of millions of Americans that suffer from mental conditions everyday? The answer to this question is complex because mental health treatment is an option and thus an individual can choose treatment. Therefore, the best way to deal with mental health conditions is to try and eliminate the barriers and then implement strategies so that mental health services can be integrated in priority health platforms, and collaborative care models for a faster and accurate diagnosis and treatment.

## Attitudes of the General Public and Mental Health Professionals

One of the common reasons individuals with mental illness try to cope rather than seek treatment is because of the negative attitudes and view of the general public. These negative views discredit and undervalue individuals with mental health problems, and the ramifications are that individuals with mental disorders are subjected to prejudice and discrimination in many sectors of the economy such as: employment, housing and medical care (Stuber et al., 2014). Due to the negative attitude of the public, it is rather easy to imagine that mental health professionals, to some extent, must also carry negative attitudes. The attitudes of the mental health professionals is an under-researched area, but according to *Conceptions of Mental Illness: Attitudes of Mental Health Professionals and the General Public*, "...mental health professionals' conception about mental illness were substantially more positive than the general public's." This paper also stated that, "having personal experiences with mental illness, certain job titles, and more years of tenure in mental health setting were predictors of more positive conceptions of mental illness" (Stuber et al., 2014). Therefore, this study essentially proves that overtime, as the mental health professionals gained more experience in their field they were more sympathetic towards those who had mental conditions and were more accepting of those. Thus, it can be predicted that overtime, as the general public becomes more aware of mental health conditions, and starts to understand that seeking help is not a sign of weakness, their attitudes might change towards those with mental problems. All in all, mental health professionals appear to hold more positive attitudes about mental illness than the general public, but overtime as people become more exposed to mental health problems, their perceptions may evolve.

## Integrating Mental Health within Healthcare Sectors

Mental health conditions are common and are a leading cause of disability worldwide, but despite the fact that many individuals suffer from mental conditions daily, very few come forward for diagnosis and treatment. One way to narrow the distance between mental health services and patients is to effectively use collaborative care models (CCM's), in which general primary care is integrated with mental health care as well. This would help patients with both acute and chronic mental health conditions. According to, *Mental Health Collaborative Care and Its Role in Primary Care Settings*, "CCM's are team-based, multicomponent intervention to

enact care delivery redesign by systematically improving coordination of patient care through organizational leadership support, evidence-based provider decision-making, and clinical information systems as well as engaging patients in their care through self-management support and linkages to community resources” (Goodrich et al., 2013). This indicates that through collaborating, CCM’s can provide cost-efficient strategy for primary care practices in order to better improve mental and physical outcomes for a large range of mental health conditions across a diverse range of populations and primary care settings. There are still limitations to CCM’s, for example, simply co-locating a mental health professional into primary care settings is relatively insufficient to improve mental health outcomes. But CCM’s based on the Wagner’s Chronic Care Model, which recognizes that medical care prioritizes the treatment of acute symptoms over the need to properly managing individuals with chronic conditions (Goodrich et al., 2013). CCM’s. Overtime, as CCM’s become more common and become integrated into the mental health system they can become more efficient. Healthcare reform efforts in the United States have drawn considerable attention towards CCM’s for mental healthcare in primary care settings because this strategy has the potential to become effective in the long run. The rationale for integrating mental health care into other healthcare platform, like CCM’s, includes improving access to mental health care; providing patient-centered care; avoiding fragmentation of health services and optimizing both mental and physical health outcomes and overall health care system strengthening (Patel et al.). All in all, the best way to detect mental health conditions is when diagnosis is performed in a primary healthcare setting because this gives patients better access to adequate medical care, while at the same time meeting both mental and physical needs of an individual.

## Conclusion and Future Study

Overall, mental health problems cause a big commotion in an individual’s life overtime. Therefore, being able to see a mental healthcare professional in order to seek diagnosis and treatment is a very useful. Mental health problems can cause considerable damage if left untreated because along with affecting the individuals lives, they also affect the lives of the people who are around that individual. Early knowledge about mental health conditions and prevention programs is a way of teaching students about potential problems and how to essentially cope with them, as early detection is a key to success in mental healthcare system. Albeit the training that students receive there are still barriers that people face, some of them being financial, while others are attitudinal ideas in regards to receiving mental health treatment. These attitudinal ideologies can also be seen within the general public, where having a mental health condition is stigmatized. The current option to better help individuals with mental health problems is to integrate mental healthcare within the primary care settings where physicians will be able to collaborate with mental healthcare professionals for better care for their patients. Further research is needed in order to evaluable centralized electronic health technologies in order to create shared efficiencies through networked practices (Goodrich et al., 2013). Research also needs to be conducted for implementing costs of practicing CCM’s within a primary healthcare setting, understanding financial arrangements and performance standards that guide reimbursement for achieving quality and cost savings. All in all, there is still a considerable amount of research which needs to be conducted in order to better integrate CCM’s, but once implemented, CCM’s would make diagnosis for mental health conditions easier and much more efficient.

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## Biography

My name is Jaskanwaljeet Kaur and I am a senior at UCM. I am majoring in Cell and Molecular Biology with a minor in Psychology. My interests lie towards going to medical school in the near future in order to become a surgeon. My interest in psychology started as a result of taking psychology courses and thinking about those courses in terms of how they could apply to and potentially help with improving medicine in the future. Besides my aspiration to become a doctor, I like conducting research in fields outside of medicine as well, such as human sexuality, and abnormal psychology.