Current Situation and Thinking of Community Mental Health Service

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Abstract: With the rapid development of society, people's work and life pressure are increasing, as well as mental health problems. Community mental health work is an important part of community health service and mental health work. Community mental health service is of great significance to improve residents' knowledge and cognition level of mental health, also about early detection and treatment of mental disorders. However, due to the late start of community mental health work, there are some problems, such as strong sense of social discrimination of mental disorders, unstable team of community mental health workers, slow progress of community rehabilitation services, and lacking of integration of mental health service resources. In this paper, I analyze and consider the current situation of community mental health services and summarize the outstanding problems existing in community mental health services, and put forward targeted suggestions.

1. Introduction

With the rapid development of economy and society, people's life and work pressure are increasing. Mental health problem is not only a major public health problem, but also an important social and livelihood problem. An epidemiological survey in 2005 showed that the total prevalence rate of mental disorders among adult population in China was 17.5%, and the prevalence rate of serious mental disorders was 1%. In 2010, WHO research results showed that the disease burden of neuropsychiatric disorders accounted for 10.4% of the total disease burden, while mental disorders accounted for 7.4% of the total burden. In 2019, Yueqin Huang, professor of the Sixth Affiliated Hospital of Peking University, published the first epidemiological survey of mental disorders in China in "Lancet psychiatry": the prevalence rate of anxiety disorder is about 4.98%, the prevalence of mood disorder is about 4.06%, the prevalence rate of mental disorder caused by alcohol drugs is 1.94%, the lifetime prevalence rate of schizophrenia and other psychotic disorders is 0.61%[1]. In recent years, more and more patients with severe mental disorders have been brought into community management.

Community mental health is the first line of defense for mental health work. The development of community mental health service plays a very important role in the whole community medical and health system. Through the formation of a sound community mental health system, it can provide help to community residents and indeed improve their mental
level. Through the development of community mental health service, it can help people better cope with potential mental problems to achieve people's physical and mental health. Strengthening the community mental health work, doing well in the prevention and control of mental illness, preventing and reducing the occurrence of various kinds of unhealthy psychological behavior problems, these methods not only related to the people's physical and mental health and social harmony and stability, but also is of great significance to ensure the comprehensive, coordinated and sustainable economic and social development.

2. Development of community mental health service

Overseas community mental health work started earlier. In the 1960s, the United States took the lead in launching the “deinstitutionalization” movement of psychiatry. In order to transfer more patients from mental hospitals to the community, many patients returned to the community after hospitalization. Through community rehabilitation training, their social functions gradually recovered, so as to adapt to later life and work. The development of community mental health services had brought positive effects to the treatment and rehabilitation of patients. Since then, countries have begun to explore and develop community mental health services. In the mid-1980s, Australia began the reform of mental health services, closed all large psychiatric hospitals, and changed the mode from hospital-based to community-based. Then the patients’ in-hospital time was reduced, with a large number of follow-up services and treatment completed in the community. Meanwhile community service teams provide support and treatment and psychological and social intervention for patients. Such as the United Kingdom has repeatedly encouraged community-based mental health services; Thailand's community health services are characterized by a large number of temples and monks participating in community care, visiting and rehabilitation activities of mental patients; Japan has advocated the idea of community-based mental health services. The current community mental health service model has gradually matured, which has certain significance for the development of community mental health service in China.

Community mental health service in China started late. In the 1960s and 1970s, China began to develop community mental health service. However, due to the impact of hospital reform in 80 years, community mental health service gradually shrank. At the end of 1990s, it began to explore community-based public mental health service mode that adapted to China's national conditions. In 2003, SARS caused great attention to the construction of public health service system. So in 2004, the “central government subsidized local severe mental illness management and treatment project” was officially launched, abbreviated as “686 project”. The project mainly explored the hospital community integrated service, and provided early detection, continuous follow-up and rehabilitation services for patients in the community. In 2009, the management of severe mental illness was incorporated into the national basic public health service system. Since then, community mental health service has been gradually launched in China. In 2015, we took the lead in carrying out 50 projects of comprehensive management of mental health in China, and actively explored the multi-sectoral integrated management model of community mental health. In 2018, another 40 social psychological service pilot projects were launched nationwide to actively promote social psychological service.

3. Current situation of community mental health service

It has been more than 60 years since the first National Conference on the prevention and treatment of mental disorders was held in 1958, but the progress was slow. Since the
implementation of the “686 project” in 2004, all localities have actively established a mental
disease prevention and control network, covering the six levels of the state, province,-city,
county, township and village. In addition to the management and treatment of patients with
severe mental disorders in the community, public mental health services are also a part of the
community mental health services, including mental health knowledge, health education,
science popularization, early psychological counseling and referral, etc. With the increase of
the local funds subsidized by the central government, as well as the attention of the
government and the introduction of a large number of documents, the community mental
health work is gradually on the right track, with obvious effect. However, due to the delay and
large demand of community mental health work, it is still relatively weak in the aspects of
mental health talent reserve, community rehabilitation system construction, multi-department
resource integration, improvement of treatment and assistance for patients, and society care,
which lag behind the western developed countries\[5\].

4. Problems and Countermeasures of community mental health service

(1) Mental illness has a strong social sense of discrimination. In recent years, people's work
and life pressure is increasing, as well as the phenomena like anxiety and depression, so the
public began to pay great attention to mental health. However the social awareness of mental
health is insufficient, lacking of understanding of mental illness patients, and even
discrimination and prejudice on the patient. The main reason is that the publicity and
popularization of mental health knowledge is not enough, especially in economically
underdeveloped areas. The public's prejudice against mental illness is obvious, which leads to
high stigma of mental illness and low treatment rate. In view of the above, we should actively
provide the publicity of mental health science, guide the public to correctly understand mental
illness, eliminate the stigma of mental illness patients and their families, make good use of the
major festivals such as “World Mental Health Day” to achieve science popularization, and
create a good social atmosphere of caring for patients. In the early period of prevention and
identification of diseases, science popularization and training should be carried out to help
patients and their families to diagnose and treat early, and provide the right way for the
patients.

(2) The team of mental health personnel needs to be strengthened. In total: at the end of
2011, there were 20500 psychiatrists and 35300 registered psychiatric nurses in China\[6\]. At
the end of 2015, there were 31000 psychiatrists and 75700 registered nurses in China\[7\]. At the
end of 2018, there were 36000 psychiatrists in China\[8\]. Although the human resources of
mental health in our country have made great progress compared with the past, more than
60000 psychiatrists are still needed to meet the demands of the public. With the increasing
demand for mental health services, the existing human resources of mental health are far from
enough. Moreover, as the economic differences, the distribution of mental health human
resources is unbalanced, and the difference is obvious in China. In terms of quality: besides
the participation of psychiatrists and nurses, the community mental health service team also
needs the psychotherapists, social workers, rehabilitation professionals and other personnel.
Due to the lacking of professional ability, such as in community mental health services,
management and treatment of severe mental disorders, identification and intervention of
mental and psychological problems, and rehabilitation training of patients, so first of all, the
number should be increased to strengthen the construction of mental health personnel team,
then to enrich the setting of mental health specialty in Colleges and universities, in order to
train and export a large number of undergraduate, master and doctor of psychiatry. Besides, to
do a good job in the training and transfer training of psychiatrists, attracting other excellent doctors in the industry to transfer to psychiatry, to introduce the preferential policy of professional title promotion of psychiatry to improve the personnel income, preventing the teams drain, are all needed. Secondly, we should vigorously carry out training and supervision, increasing professional training and guidance of community mental health teams, continuing medical education, and strengthening the assessment and supervision of professional ability of community mental health teams.

(3) Community rehabilitation service needs to be strengthened. Mental rehabilitation can improve the social function of patients. It is an important link to help patients return to family and society. It includes hospital rehabilitation and community rehabilitation. Community rehabilitation is undertaken by community rehabilitation institutions (such as day-rehabilitation centers, halfway houses, professional rehabilitation institutions, etc.) to carry out rehabilitation training on medication, life skills, social skills and other aspects for patients at home. Community rehabilitation service is an important way for mental disorder patients to recover their self-care ability and social adaptability, and finally to get rid of diseases and return to society. It is a multi-disciplinary integration development of social services. In 2017, the Ministry of civil affairs and the Ministry of Finance issued the opinions on accelerating the development of community rehabilitation services for mental disorders[9], aiming to promote the development of community rehabilitation services and help patients return to society as soon as possible. Yet at present, the progress is not uniform, the community rehabilitation system is not perfect, the number of community rehabilitation institutions is insufficient, the community rehabilitation professionals are insufficient, and the content of community rehabilitation service is not rich enough. Therefore, we should pay more attention to the establishment and improvement of diversified fund input mechanism, such as multi-department coordination mechanism, the introduction of supporting measures of policies and documents. And the establishment of different types of service institutions is also important, such as day center, halfway house, comprehensive mental rehabilitation service center, Rehabilitation Club and sunny home etc.. Around the needs of mental disorder patients to improve their self-caring ability, social adaptability and professional ability, we provide various types of rehabilitation services, and constantly enrich the medication training, life skills training, social skills training, professional ability training, home rehabilitation guidance and other projects. It is necessary to increase publicity to improve the rehabilitation awareness of patients. So they can actively go to rehabilitation institutions for training with making their own value and finally integrate into the society.

(4) Mental health resources need to be integrated. Severe mental disorder is a chronic disease. Patients need to take medicine for a long time. There are many cases of poverty or return to poverty caused by illness. As some patients are unable to work, they have low income and insurance coverage. There is no guarantee of long-term medication and therefore no guarantee of therapeutic effectiveness. Mental health work is a multi-department management work, which needs the participation of civil affairs, Disabled persons' Federation, social security, health and public security, as well as attracting social forces and encouraging caring people to participate, to improve the funding guarantee, multi-departments interconnection, and getting through the medical insurance in different places. The health department, together with the medical insurance, civil affairs, disabled persons' Federation and other departments, has established a sound medical reimbursement guarantee process for patients: medical insurance reporting first, Disabled persons' Federation subsidizing, civil affairs assistance and charity paying for the final bill. The health department, together with finance departments, introduced a free medication policy to ensure that more poor patients can

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have medicines. The health department, in conjunction with the public security department and other departments, has issued a policy of rewarding guardianship to ensure that people with mental disorders have guardians to look after and take care of them. The civil affairs department should strengthen the construction of community rehabilitation institutions and the training of rehabilitation personnel to ensure that patients in the community can participate in rehabilitation training after returning to community management, and help patients recover their social functions as soon as possible.

5. Summary

With the rapid development of society, the public demands for mental health services have also increased. Community mental health work is the first line of defense and plays a positive role. In recent years, with the nation's attention to mental health, the development of mental health services had improved greatly. Although there are many short boards exposed in community mental health services, with the government's attention and the introduction of policies, it will be gradually improved, and create an atmosphere for the whole society to care for patients with mental disorders and help them return to society as soon as possible.

References