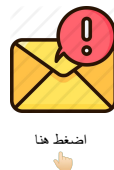# Mental health

objective:

• Definition & etiology of Mental Health
 • The global magnitude of mental illnesses
 • Stigma & its consequences • Principles of preventing mental illnesses
 • Public health importance of mental health in KSA
• National mental health care services & programs

Color index:

- Main text
- Males slides
- Females slides
- Doctors notes 442
- Doctor notes
- Golden notes
- Important
- Extra

اضغط هنا

DEFINITIONS & ETIOLOGY

- According to the WHO, Mental health is defined as "a state of mental well-being that enables people to cope with the stresses of life, realize their abilities, learn well and work well, and contribute to their community".

- An essential component of health and well-being that determines how we handle stress, relate to others, and make healthy choices.

- Thus, mental health is a basic human right and not merely the absence of mental disorders/illnesses.

- Mental illness/disorder: as defined by (ICD-11) & WHO is a "clinically significant disturbance in an individual's cognition (thinking), emotional regulation (mood), or behavior. These disturbances are usually associated with personal distress and/or impairment in important areas of functioning(family, social, educational and occupational) ".

World mental health report
Transforming mental health for all
https://www.who.int/publications/i/item/9789240049338

• "a dynamic state of internal equilibrium which enables individuals to use their abilities in harmony with universal values of society. Basic cognitive and social skills; ability to recognize, express and modulate one's own emotions, as well as empathize with others; flexibility and ability to cope with adverse life events and function in social roles; and harmonious relationship between body and mind represent important components of mental health which contribute, to varying degrees, to the state of internal equilibrium" (Galderisi et al,2015) 3

Determinants of mental health: 4-5

- Individual & psychological

- Factors Family & Community

- Structural & Environmental Factors
  "Bio-psycho-social"
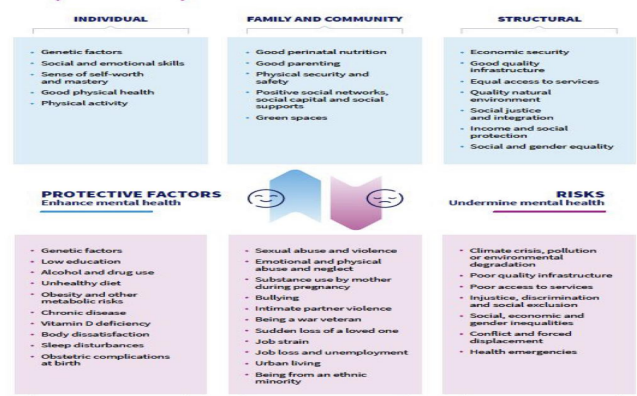
1- You are capable of having poor mental health but that doesn't mean that you are at risk of developing mental illness
2- mental health is a way of living
3- I would like you to read this article, it's about variations of mental definitions between every individual and how much this topic has stigma
4- it's like a spectrum or a balance you may shift to protective or risk side based on these determinants..
5- childhood period is the most important time for mental health disorders to appear.

Someone who is born into poverty more likely to develop mental health disorders because of the his environment, why's it vicious cycle? Because of growing u in low economic lifestyle lead to having mental health disorders which in turn lead to losing jobs.

The vicious cycle between poverty and mental ill-health exacerbates mental health conditions

Mental health disorders [1]

The spectrum that encompass mental health disorders includes:

• Common mental health problems such as anxiety, depressive disorders, depressive episodes, phobias and panic disorders.

• Severe and enduring mental health problems such as schizophrenia, schizotypal and other delusional disorders, manic episodes, bipolar affective disorder and other affective disorders with psychotic symptoms.

1- I am not going to ask you about the details of each diseases but it is good to know what is the most common,severe? Just general idea

THE GLOBAL BURDEN OF MENTAL HEALTH DISORDERS

13% of the world population
people suffer from mental illness
both in the developed and
developing worlds.

The global prevalence of mental disorders in 2019
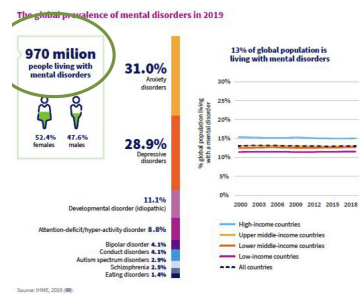
Mental health conditions are widespread, undertreated and under-resourced

Mental health conditions costs
the global economy US$ 1
trillion each year.

Mental disorders (depression & anxiety) are considered in
the top 10 contributors to the global burden of disease .
People with severe mental health conditions die10 to 20 years
ahead of the general population "premature mortality" , most
often through unrecognized and untreated physical health
conditions.

FIG. 3.5
The global burden of mental disorders
in disability-adjusted life years (DALYs),
2019
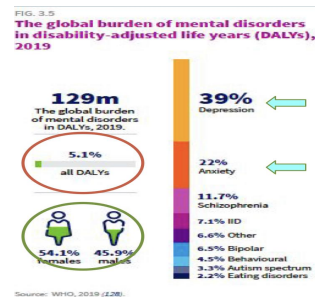
Proportion of all-cause years lived with disability (YLDs) attributable to mental disorders, across the life-course, 2019
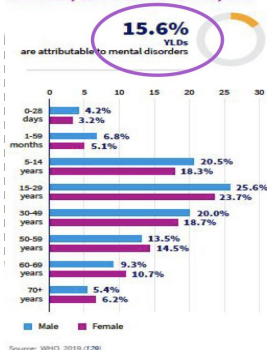
Top ten leading causes of global years lived with disability (YLDs), 2019
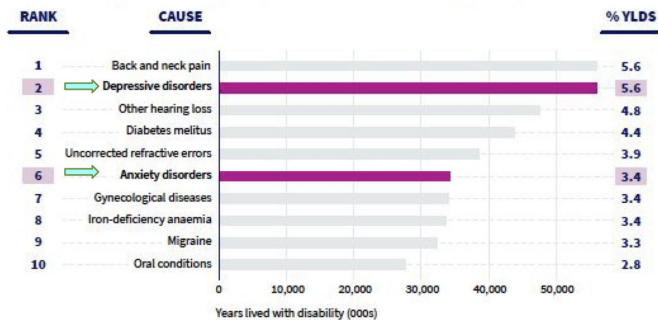
Mental disorders
account for 1 in 6
years lived
with disability (15.6%
YLDs).

THE MENTAL STRESS OF COVID-19

• The COVID-19 pandemic has created several short- or long-term stressors for mental health:

1. Stress from the potential health impacts of the virus
2.   Stress from public health and social measures.
3.   Stress from unemployment and financial insecurity.
4. Stress from false information and uncertainty

● The COVID-19 pandemic has amplified existing inequalities and steepened the social gradient of mental health in many countries.

● **One in three adults were living with anxiety** disorder during the COVID-19 pandemic worldwide.

● Globally, a **25%** rise in the prevalence of depression and anxiety in the first year of the pandemic with a greater increase in prevalence among **females** than among males, a greater change in prevalence among **younger age groups** than older ones (WHO,2022).

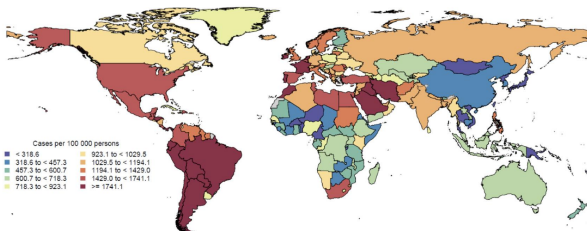Figure S6: Prevalence of anxiety disorders per 100 000 persons due to the COVID-19 pandemic, 2020

Cases per 100 000 persons
< 316.6	923.1 to < 1029.5
316.6 to < 457.3	1029.5 to < 1194.1
457.3 to < 600.7	1194.1 to < 1429.0
600.7 to < 718.3	1429.0 to < 1741.1
718.3 to < 923.1	>= 1741.1

Figure S5: Prevalence of major depressive disorder per 100 000 persons due to the COVID-19 pandemic, 2020

Cases per 100 000 persons
< 183.2	581.1 to < 704.3
183.2 to < 284.1	704.3 to < 852.1
284.1 to < 410.6	852.1 to < 987.7
410.6 to < 485.3	987.7 to < 1210.5
485.3 to < 581.1	>= 1210.5

Mental health during COVID-19 pandemic in saudi

• An estimated 40% of the general Saudi population reported different ranges of distress as a result of COVID-19.

• The prevalence of depression and anxiety among healthcare providers in Saudi Arabia were (55.2% and 51.4%, respectively).

MENTAL HEALTH STIGMA & ITS CONSEQUENCES

- **Stigma** was initially described by Erving Goffman in 1963 as "any characteristic or attribute by which a person was devalued, tainted, or considered shameful or discredited"

- **Stigma** in Mental Health can be defined as " a set of negative attitudes and beliefs that causes the public to fear , reject , avoid and discriminate someone based on distinguishing characteristic such as individuals with a mental health problem"

Types of mental health-related stigma :

Public-stigma: the general public's discriminatory response to people with mental illnesses

Professional-stigma: healthcare professionals hold stigmatizing attitudes toward their patients 1

Institutional-stigma: an organization's policies or culture of negative attitudes and beliefs toward stigmatized individuals with mental health problems 2

Self-stigma: to internalize shame, negative messages and stereotypes and apply them to themselves

Impact of stigma :

- Concealment or denial of symptoms
- Reluctance to seek out treatment which can worsen their condition and symptoms
- Prevents adherence to treatment
- Social rejection, avoidance, and isolation
- Poor understanding among friends and family
- Harassment, violence, or bullying
- Poor quality of life, disability, and increased socioeconomic burden , lack of work opportunities
- Increased feelings of shame , self-doubt and low self-esteem
- It negatively affects the attitudes of health care providers and limits access to quality healthcare 3

1- another example: someone in another healthcare professional looks down upon those who decided to go to the psychiatric field.
2- in terms of discrimination in having jobs, work opportunities and promotion.
3- so they need to address the stigma first before any treatment or management.

MENTAL HEALTH STIGMA & ITS CONSEQUENCES

Suiside

According to the WHO:
• Suicide is a serious public health problem and a global phenomenon in all regions of the world , specially amongst vulnerable groups who experience discrimination.
• The majority of suicides worldwide are related to mental health disorders.
• In numbers, more than 700 000 people die due to suicide every year !
• Suicide is the fourth leading cause of death among 15–29-year-olds.
• In Saudi Arabia, the suicide rate in 2019 was six individuals per 100,000 people with male suicide rates being higher than female[1].

Suiside prevention

• Measures that can be taken at a population, sub-population and individual levels to
prevent suicide and suicide attempts include:
 "LIVE LIFE" WHO's approach:
1. limit access to the means of suicide (e.g. pesticides, firearms, certain medications)
 2. interact with the media for responsible reporting of suicide
 3. foster socio-emotional life skills in adolescents
 4. early identification, assessment, management and follow up

1- females are lower because they developed the mental health illness after suffering for so long and more likely to despose it, as for males they never ask for help.

PRINCIPLES OF PREVENTION

- reduce the incidence, prevalence, and recurrence of mental disorders
- reduce the time spent with symptoms and decreasing the impact of illness on the affected person, their families and the society
- build **resilience** at individual, social and structural levels

Levels of prevention	Primary/Universal	which operates on a community basis by shifting the risk profile of whole populations and reshaping their determinants of mental health thus promoting the social, emotional and physical well-being of all people → onset and incidence.
	Secondary/Selective	consists of early diagnosis of mental illness and of social and emotional disturbances through screening programs and provision of treatment facilities and effective community resources → prevalence.
	Tertiary/Indicated	which seeks to reduce the duration of mental illness and to prevent further break-down and disruption → improve quality of life.

Primary prevention

WHO's " World mental health report: transforming mental health for all" and the "Comprehensive mental health action plan 2013-2030" provides all countries with guidelines on strategic leadership, evidence, tools and technical support to strengthen a collective response to mental health.

Examples on primary prevention at the government/community levels:

• Provide proper health and social services to the underserved, try to control poverty and social disadvantage at the public level (a bit challenging)
• Spread education and awareness about mental health and its stigma in the community

Secondary prevention

Collaboration with other sectors for support and integration:

• Health: WHO's suggested method for effective secondary prevention of mental illness is "integrating mental health services to primary care (PC) services and community- based services"

• Education1
• Employment & Housing
• Social development/affairs
• Criminal code

1-.schools should accommodate for all types of special needs and not discriminate the child against his peers because of his mental disorders.

- Affordable and cost effective
- ⭐ Training of PC workers in screening for mental disorders (practice the proper bio-psycho-social approach in care) and access of PC physicians to essential psychotropic medications
- Addressing MH in PC increase access to care (closer to home; long-term follow)
- Reduces stigma and discrimination; reduce human rights violation
- Reduces the burden of mental disorders on the healthcare system
- Referral & collaboration with other government non-health sectors, nongovernmental organizations, community health workers, and volunteers

MENTAL HEALTH IN SAUDI ARABIA
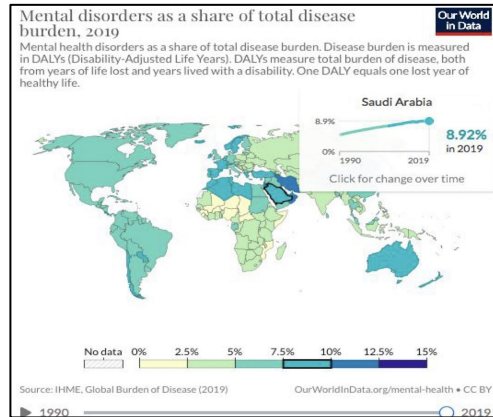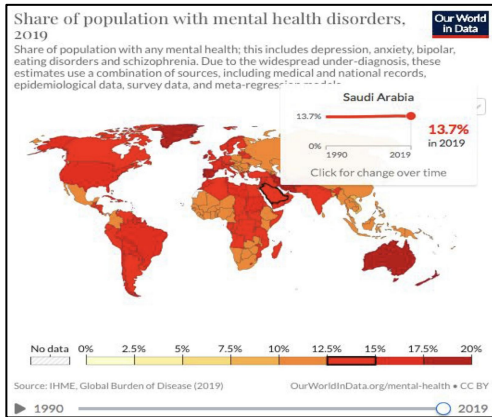
It's not that high but it's not that low and it's pre covid19
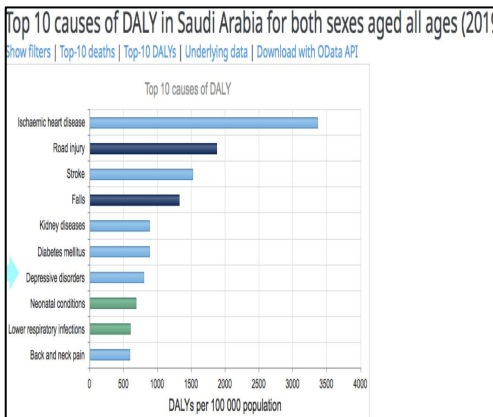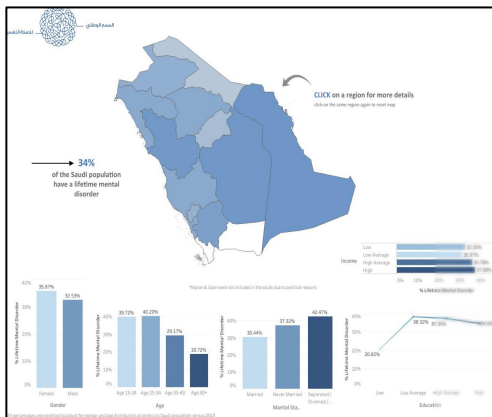
Divorced women are the most depressed in saudi

Saudi National Mental Health Survey - Technical Report
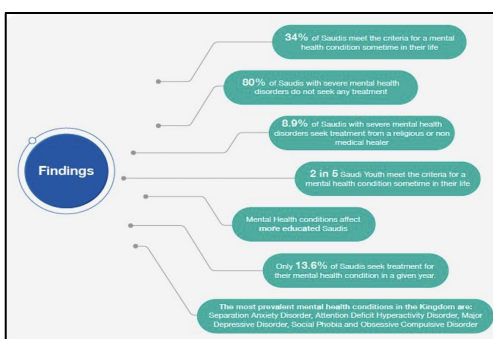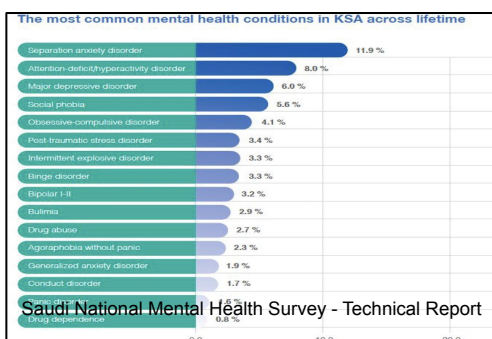
- The prevalence of any mental disorder in Riyadh City was 29.2%.
- The most common disorders were anxiety disorders (18%) and mood disorders (11%)
- Female, young, and previously married respondents were at higher risk for developing mental disorders.
- Only 2.9% of those with any mental disorder sought mental health treatments.

- Stigma and cultural beliefs about mental health in KSA act as barriers to accessing services.

- 80% of Saudis with severe mental health disorders do not seek any treatment, 9% of the population consult religious or non-medical healers.

"The voice of mental health service users in KSA remains largely unheard "

- KSA allocate 4% of healthcare budget to mental illnesses
78% is directed to mental hospitals (19.4 mental health professionals per 100,000 citizens)
- "Comprehensive Guidance Clinic", previously known as "Primary Psychological Clinic" in primary Health care centers (PHCs).[1]
- National Committee for Mental Health Promotion (NCMH)-Psychological Consultation Center-920033360
- Comprehensive Health Counseling Initiative (Primary Mental Care Program)
- Preventive Guide for Mental and Social Health', by the Saudi Center for Disease Prevention and Control
- The Saudi National Mental Health Survey

1-they change the name because No one went to the clinic because of its name.

http://www.healthandstress.org.sa

Mental Health Services

- 99 Public Mental Health Clinics
- 27 Public Mental Health Hospitals
- 38 Rehabilitation Centers for patients with intellectual and physical disabilities, under the Ministry of Social Affairs
- 69 Day Care Units for people with mild & moderate intellectual disability having behavioral problems
- 5 Active Consumer Organizations & NGOs
- 5 Community-Based Psychiatric Inpatient Units for a total of 0.41 beds per 100,000 population

Tha saudi national mental health survey

- This is the first population-based survey to collect data on mental health on all regions in KSA that was launched in 2010
- Uses the WHO Composite International Diagnostic Interview (CIDI)
- In 2016, the SNMHS successfully completed interviews with a sample of 4,004 male and female Saudis, between the ages of 15 to 65, who represented the Saudi population.

⭐ Phone Applications:

1. "**Qareboon**" App aims to offer mental text counseling supervised by a specialized staff. It also features an integrated library that contains countless information on mental health, with the latest modern methods, such as text materials, infographics, and visual (video) content

National Committee For Mental Health (NCMH)

2. **Labayh** لبيه (National Center for Mental Health)
https://labayh.net

3. **Watheer** وثير
www.watheer.med.sa

4. **Psyter** سيطر
https://www.psyter.com

Mental health act

The Mental Health Act (1983) is the main piece of legislation that covers the assessment, treatment and rights of people with a mental health disorder.

In 2014, Saudi Arabia established a mental health law. Patients and their relatives receive information on how their rights will undergo maintenance throughout the treatment process.

1. Daylio Journal App
2. Mindshift CBT App

د. فاطمة البريكان: عيادة الصحة النفسية للطلاب

د. صالح البنيان & د. مرام الطويرقي: مرشد/ة طلاب وطالبات سنة ثالثة

EVERY MIND MATTERS
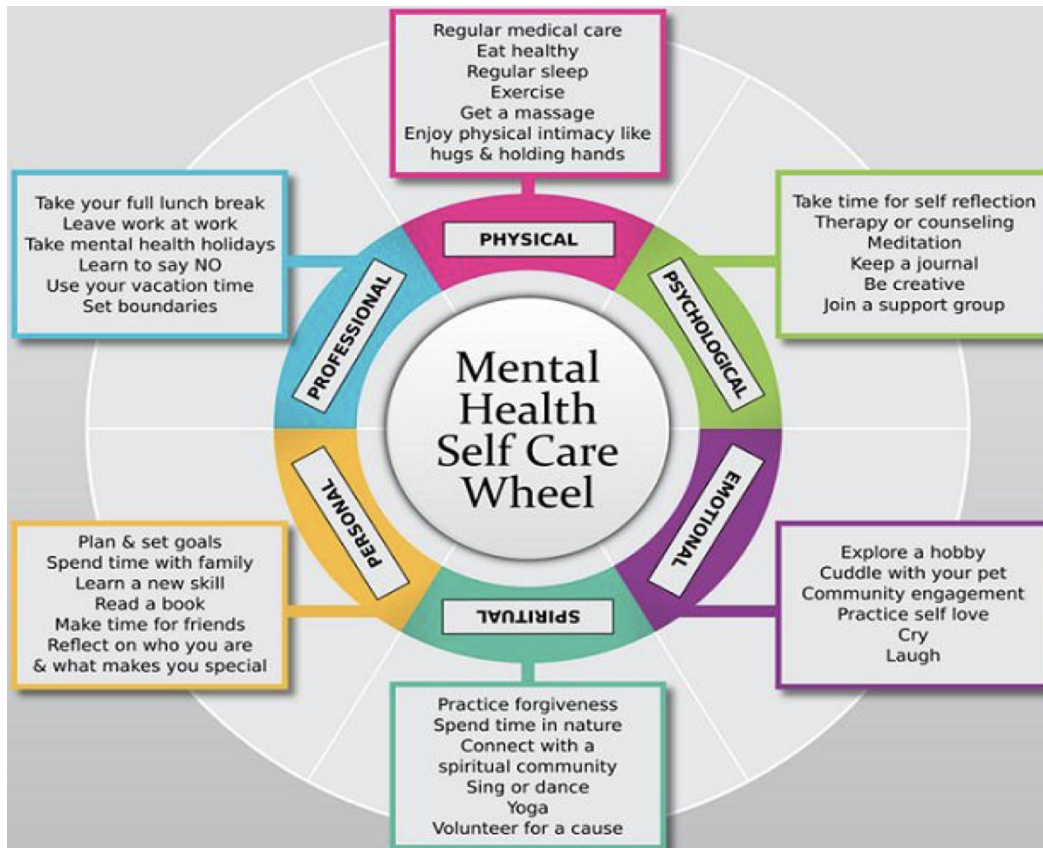
THANK YOU !

Practice Questions

Q1: A preventive medicine program aims to provide targeted help and support groups for those at high risk for mental health problems, such as people who experienced psychological trauma or abuse, WHich level of prevention is going to be used?

A. Primordial	B. Primary	C. Secondary	D. Tertiary

Q2: There is a mental health program. What age should the program focus on?

A. 15-24	B. 25-34	C. 35-44	D.45-54

Q3: You are treating a patient with schizophrenia and would like to refer him to rehabilitation service to help him live with his mental health problems and stay healthy. WHich service in saudi Arabia would you refer him to?

A. Ashanak	B. Seha	C. Qareebon	D. Ajwad

Q4: you are designing a mental health prevention and promotion program based on the prevalence of mental health conditions in KSA across lifetime. Which of the following conditions will be a priority for you to choose'? (Seminars)

A. Major depressive disorder	B. Post traumatic disorder	C. Obsessive compulsive disorder	D. Separation anxiety disorder

Answer   1- b   2- a   3- d   4- d?

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nora bin hammad
Mayssam Aljaloud
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