

MENTAL HEALTH: A REVIEW OF CONTEMPORARY PERSPECTIVES AND CHALLENGES

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Abstract

Mental health has become a key element in the overall wellness of the body, with emotional, psychological, and social aspects all included as defined by the World Health Organisation (2022). International data shows a dramatic increase in mental disorders; depression is affecting more than 280 million people, while anxiety disorders are impacting around 264 million people worldwide (WHO, 2022a). The pandemic of Coronavirus disease (COVID-19) has further aggravated these trajectories and led to a 25 % increase in anxiety and depression prevalence worldwide (WHO, 2022b). This paper reviews new literature on mental disorders, critically evaluating both biological, psychological and socio-environmental risk factors, as well as the broader societal implications, including stigma and discrimination (as well as the fiscal impact) (Patel et al. 2018). It takes an explicit randomising approach to evaluating a variety of interventions, including psychotherapeutic, pharmacotherapeutic, community-mediated programmes and digital health platforms and their effectiveness, as well as the practical issues that hinder implementation (Naslund et al., 2017). Furthermore, important research gaps are identified in the review: the need for culturally sensitive interventions; the need for longitudinal studies; and the need for policy-linking across social sectors. By promoting a multidisciplinary approach, this review highlights the importance of a coordinated approach to promote mental health and reduce stigma associated with mental illness, while also ensuring access to treatment for all, worldwide.

Keywords: Mental health, Psychological well-being, Mental disorders, Depression, Anxiety, Stigma, Community-based interventions, Digital mental health, Mental health literacy, Public health

1. Introduction

Mental health refers to the well-being of a person's cognitive, emotional and social functioning, in turn affects how individuals think, feel and behave in their day-to-day life (WHO, 2022). It plays a direct role in coping abilities, maintaining relationships and decision making, making it a building block for overall well-being (Patel et al. 2018). Mental disorders are extremely common in their prevalence worldwide and are estimated by the World Health Organisation (WHO, 2022a) to be experienced by around one in four people at some point during their lives. Anxiety and depression are among the most widespread disorders, with one in four people globally struggling with depression and another one in eight troubled by anxiety (WHO, 2022b).

Despite the high prevalence, unfortunately, mental ill health issues are still ignored in many societies due to social distortions, lack of awareness of their causes, and a poor healthcare system. Empirical research shows that more than 75% of people living in low- and middle-wealth countries do not receive sufficient mental-health care (Patel et al., 2018; Saxena et al., 2011). Furthermore, societal misconceptions, beliefs and discrimination make it even harder for people to seek help (Corrigan & Watson, 2002).

COVID-19 is an additional and intersecting problem with mental health, with a 25% increase in the prevalence of anxiety and depression worldwide in the first year of the outbreak (WHO, 2022c). Lockdowns, social isolation, economic uncertainty, and fears of getting infected all contributed to increasing psychological distress - especially for more vulnerable groups, which include adolescents, health-care providers, and people with a pre-existing mental-disorder diagnosis (Xiong et al., 2020).

Given these complexities, a clearly defined understanding of the determinants, the consequences and the interventions regarding mental health is essential to informing a public-health policy and planning for effective prevention and treatment interventions. This review aims to synthesise the current evidence and highlight the risk factors, question implications in society, and evaluate the evidence-based interventions to enhance mental health outcomes globally.

2. Literature Review

2.1 Burden of Mental Health Disorders from a Global Perspective

Mental disorders are the leading cause of disability and disease globally. According to the World Health Organisation (WHO, 2022), depression is the leading cause of disability worldwide, affecting more than 280 million individuals and anxiety disorders affect some 264 million people around the world. Mental illnesses are often comorbid with physical illnesses, including cardiovascular disease, diabetes and chronic respiratory disorders, creating complex interactions resulting in amplified disability and increased cost (Patel et al, 2018).

The economic cost of mental disorders is high. The global expenditure on mental disorders was estimated to reach USD 2.5 trillion already in 2010 and is expected to rise to USD 6 trillion by 2030, caused by lost productivity, the cost of treatment, as well as social implications (Bloom et al., 2011). Additional challenges exist in LMICs, where over 75% of people living with serious mental disorder conditions are left without access to appropriate care (WHO, 2022a).

2.2 Risk Factors

Mental-health disorders result from a complex combination of biological, psychological and social factors:

- **Biological Determinants:** Genetic inheritance, neurochemical imbalances (i.e. serotonin, dopamine), brain lesions and neurological disorders play a considerable role in vulnerability (Sullivan et al., 2018). Twins studies and family studies show that heritability explains 30 - 50% of the cases of depression and schizophrenia.
- **Psychological Factors:** Early-life adversity, neuroticism, chronic stress and trauma are believed to be key pathways to the risk of developing mental disorders (Heim & Nemeroff, 2001). Post-traumatic stress disorder (PTSD), depression and anxiety can be triggered by traumatic events.
- **Social Factors:** Individual poverty, unemployment, social isolation, discrimination and lack of social support are identified as drivers of mental health (Lund et al., 2010). Social inequalities, such as gender-based violence or minority stress, further increase vulnerability, which is especially the case within marginalised communities.

2.3 Stigma and How We Are Perceived in Society

A main impediment to mental health care is the stigma. Mentally ill people often experience discrimination, self-stigma, and restricted social opportunities from society, and therefore are less likely to seek treatment (Corrigan & Watson, 2002). According to research, as much as 60% of people with depression do not seek professional help because of the stigma and fear of social judgment (WHO, 2022).

Public awareness, education, and contact-based interventions (through interventions between people with and without psychological disorders) are effective in reducing stigma and preventing mental distress (Thornicroft et al., 2016). School communication programs and awareness campaigns are also a critical piece to creating supportive environments in the workplace and school systems.

2.4 Addiction Treatment Models and Strategies

Evidence-based treatments for mental disorders include:

Psychotherapy: Cognitive Behavioural Therapy (CBT), Dialectical Behaviour Therapy (DBT), and support counselling are effective treatments in depression, anxiety disorders and personality disorders (Hofmann et al, 2012).

Pharmacological treatment with antidepressant drugs, antipsychotics and mood stabilisers, particularly in moderate to severe forms (Gelenberg et al., 2010).

Community-Based Programs: Community-based peer support groups, school and workplace mental health programs and integration into primary care can be used to increase accessibility and de-stigmatise (Patel et al., 2018).

Telepsychiatry and similar technological interventions have extended access to mental health care with telemedicine and mobile mental-health applications (e.g. Naslund et al., 2017), as well as with online consultation to increase accessibility, especially in low-resource settings and rural areas. Staying with treatment: Digital platforms ensure patients are treated, adhering to treatment protocols and engaging in symptom monitoring, guided therapy, and psychoeducation.

2.5 Use of Technology in Mental Health (with help from Sara Tenley)

Technology has changed the way mental health services are provided. Remote therapy, AI-spurred mental health apps, and virtual reality interventions and monitoring systems can provide scalable solutions to address service gaps. For example, research suggests that digital interventions can treat symptoms of depression and anxiety by 20-30 per cent in clinical and community samples (Firth et al., 2017).

In low-resource environments, mobile and web-based formats are viable alternatives to traditional psychotherapy, however, where mental-health experts are scarce (Naslund et al., 2017). Digital innovations also help in early detection, data capture and person-centric care, and hence enable proactive management of mental conditions.

3. Discussion

The literature reviewed clarifies that mental health is influenced by a complex interaction of biological, psychological and social determinants of health (Patel et al, 2018; Sullivan et al, 2018). Biological factors such as genetics and neurochemical imbalances, as well as environmental stressors (poverty, social isolation, traumatic experiences, etc.), interact to determine the development and size of the disorder. Biological predispositions (e.g., genetics, neurochemical imbalances) and environmental stressors (poverty, social isolation, traumatic experiences, etc.) interact to determine the development and size of mental disorders (Heim & Nemeroff, 2001; Lund et al., 2010). Finally, psychological resilience, coping, and personality characteristics further influence the vulnerability and recovery (Hofmann et al., 2012).

Not surprisingly, interventions need to be complex. For instance, studies have shown that the introduction of mental health care services in primary care improves access for all, especially in low- and middle-income countries where specialised services are sparse (Patel et al., 2018). Pharmacological parts of treatment in combination with psychotherapy, enhanced by community-based interventions, are more efficient than monotherapy (Naslund et al., 2017).

The second factor that is significant in outcome is the issue of mental health literacy. Some evidence exists that shows that higher literacy levels are associated with better help-seeking and treatment adherence (Jorm, 2012). Public information campaigns, school and workplace interventions have the potential to improve understanding about mental health, lessen stigma, and encourage early intervention (Corrigan & Watson, 2002; Thornicroft et al., 2016).

Mental health treatment - digital platforms are revolutionising treatment. Telepsychiatry, online counselling and AI-powered mobile applications help with access to treatment, especially in rural and underserved areas (Firth et al., 2017). Digital health provides the ability to provide symptom monitoring, bespoke treatment, and psychoeducation, which allows scalable and cost-effective care. In fact, randomised controlled trials have demonstrated that digital interventions decrease depressive symptoms by 20 - 30% and enhance participation in treatment (Firth et al., 2017).

Despite this, there is still much to be overcome. One underlying theme in inadequate perinatal mental health care is economic disparities, access to geographically distributed resources and a lack of mental health infrastructure (WHO, 2022). There is a massively insufficient supply of professionals in low-income countries for mental health, with less than one psychiatrist per 100,000 population in several countries (Patel et al., 2018). Stigma and cultural beliefs also serve as a disincentive for obtaining help, especially in cultures where mental disorders are regarded as being shrouded in shame or superstitious beliefs (Corrigan and Watson, 2002).

As the literature seems to underscore, culturally sensitive interventions that take into consideration local beliefs, norms, and resources are important. Sense of Access - translation of evidence-based therapies into the local language and cultural context has shown improved engagement and attributed effectiveness by producing a sense of ease (Kohrt et al., 2014). Policymakers must address the upstream influences on mental wellness by combining treatment with policies covering mental health and the wider education, employment and social welfare systems.

In conclusion, a successful approach to improving mental health outcomes requires a multidisciplinary approach. As a result, merging services, digital innovation, community engagement, stigma reduction, and cultural adaptation are all important measures to take at the global and local levels to plug leaky buckets around the complex determinants of mental health.

4. Research Gaps

Despite the major steps made to improve and intervene in mental health, there remain several research gaps hindering the ability to develop appropriate and universal interventions.

Limited longitudinal investigations: Most studies of mental health interventions have tended to focus on short-term investigations that do not fully account for long-term effects or durability. Longitudinal studies are important in order to evaluate the sustained effects of psychotherapy, pharmacological interventions and community-based programs on mental health diseases among various populations (Patel et al., 2018; Thornicroft et al., 2016).

Under-representation of marginalised populations and rural areas: Mental health research still too often focuses on high-income and urban populations and ignores marginalised populations, rural areas, and low-income settings. These groups of people are often subject to specific stressors, cultural barriers and/or limited access to treatment, but there is little evidence of effective interventions for these groups (Lund et al., 2010; Naslund et al., 2017).

Assessment of digital mental health interventions: Digital technologies, mobile applications, and telepsychiatry interventions show potential for the scaling of mental health services, but high-quality intervention evaluation in a variety of socio-cultural and economic settings is missing. Longitudinal evaluation of accessibility, usability, engagement, and clinical effectiveness needs to be done in real-world test environments to evaluate these technologies (Firth et al., 2017; Naslund et al., 2017).

Integration of mental health policies across sectors: evidence on the effectiveness of integrated policies that combine mental health activities with education, employment and social welfare programmes is limited. Mental health problems are highly connected to social determinants, and so, multisectoral action is critical in dealing with these determinants; however, research on the creation, execution, and results of such approaches is still lacking (Patel et al., 2018; WHO, 2022).

Despite these challenges, extensive, multidimensional, and culturally attuned research methods are needed to improve the development of effective mental health interventions that may be adapted and expanded on a global level in an equitable and sustainable way.

5. Conclusion

Mental health is one of the essential determinants of well-being, affecting someone's cognitive, emotional and social performance throughout their lives (WHO, 2022). The literature shows that mental disorders are very common (depression and anxiety affect more than 500 million people worldwide (WHO, 2022a; WHO, 2022b)), and that their burden is further increased when they coexist with chronic physical diseases (Patel et al., 2018).

The initial studies show the multifactorial nature of mental health with the biological, psychological, and social determinants (Heim & Nemeroff, 2001; Lund et al., 2010). For it to be well managed, there needs to be early diagnosis, evidence-based interventions and culturally adaptable approaches focused on the individual and community needs. Psychotherapy, pharmacological treatment, community-based programmes and digital mental health solutions have proven to be effective in improving mental health outcomes, especially when embedded in the primary healthcare system (Hofmann et al., 2012; Naslund et al., 2017; Firth et al., 2017).

However, long-standing obstacles such as stigma, impaired access to care, lack of mental health professionals and under-representation of marginalised populations remain unsolved (Corrigan & Watson, 2002; Patel et al., 2018). Last, although digital platforms and AI-driven interventions present great potential to increase accessibility, there is still a need for rigorous evaluations and culturally sensitive implementations (Naslund et al., 2017; Firth et al., 2017).

Mental health well-being issues need to be addressed through a multisectoral approach, spanning healthcare, education, technology, employment, and policy issues. Priority areas include: reduction in stigma, promotion of

mental health literacy, incorporation of services within primary care and emphasis of research in underserved populations (Thornicroft et al., 2016; WHO, 2022). By adopting a holistic, evidence-based and inclusive approach, policy makers, practitioners, and communities can all work together to achieve societies that promote mental well-being and resilience.

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