



Providing Mental Health Care and Services in Different Countries: A Systematic Review

Samaneh Siah¹, Kusar Aliabdy¹, Pegah Golafshan¹, Nayeb Fadaei Dehcheshmeh^{2*}

¹Student Research Committee, Shoushtar Faculty of Medical Sciences, Shoushtar, Iran

²Department of Public Health, Shoushtar Faculty of Medical Sciences, Shoushtar, Iran

OPEN ACCESS

*Corresponding Author:

Dept. of Public Health,
Shoushtar Faculty of Medical
Sciences, Shoushtar, Iran

ABSTRACT

Introduction: Attention to individuals' mental health is essential and is among the basic healthcare measures. This study aimed to examine the status of mental health service delivery in different countries.

Search Strategy: The present systematic review adhered to the PRISMA writing guidelines. Studies published in English from 2010 to date in databases such as PubMed, Scopus, and Google Scholar were systematically searched. The searched keywords included "healthcare services", "medical care", and "mental health". Boolean operators (AND, OR) and MeSH terms were used to combine search terms. Inclusion criteria entailed studies focusing on healthcare services delivery and mental health, excluding other studies. Two independent individuals performed data extraction and quality assessment. Any discrepancies were resolved through discussion or consultation with a third expert researcher. Quality assessment was carried out using the JBI tool. Data extraction included study details (author, year, and location) and mental healthcare services provision status.

Results: A total of 72 articles had entry criteria. These studies examined mental health services and care in Brazil, France, Italy, Japan, New Zealand, and Singapore. Most countries had a defined mental health policy, but the types of policies differed. Mental health services in New Zealand were considered part of primary care. In Japan, only depression, dementia, and other common illnesses were provided through primary care, while in other countries, primary care did not play a role in providing mental health care. In Brazil, individuals who receive continuous inpatient care for over two years were eligible for one year of cash assistance. In Japan, payment was made through universal health insurance. In Italy, mental health care was provided by the National Health Service with public funding. In France, the payment was fully covered by VHI.

Conclusion and Discussion: By identifying and addressing the existing challenges, innovative policies, increased investment in mental health-related programs, raising public awareness, and strengthening community-based interventions, we can take steps towards providing universal, effective, and accessible services tailored to individuals' needs.

Citation:

Siah S, Aliabdy K, Golafshan P, Dehcheshmeh N. Providing Mental Health Care and Services in Different Countries: A Systematic Review. *Iranian biomedical journal* 2024; 28(7): 217.

Keywords: Mental health, Systematic review

