Mental Health in **primary care**

Brief introduction

Mental, neurological and substance use conditions account for 14% of the burden of disease. Between 75-90% of people with these conditions do not receive the treatment they need even though effective treatment is available; this represents the existing mental health gap. **Common mental health problems can be managed in primary care.**

The Mental Health Gap Action Programme (mhGAP) aims to address the unmet needs of people with mental, neurological and substance use conditions in non-specialized health services.

The strategy for integrating mental health into primary health care is committed to a new model of comprehensive and integrated mental health, accessible and of quality, from a health services network approach, facilitated by coordination and referral, monitoring and support from the specialized level.

The primary care approach to mental health is based on a community approach that emphasizes promotion, prevention, social participation, health services organization and liaison with other services as well as the recovery of people in their environment. It proposes a transition from the seclusion of people with mental problems in psychiatric hospitals to dignified and quality care in the community. This is referred to as the process of **deinstitutionalization.**

Recovery-oriented care emphasizes empowering people to manage their own lives. It involves supporting people to find hope, build self-esteem and resilience, establish healthy relationships, regain independence, and live a life that is meaningful to them.

Cross-cutting principles for the integration of mental health into primary care

Universal health coverage
Promoting that all people have access to the full range of quality health services they need, when and where they need them, without financial hardship

Human rights
To promote the rights and defend the dignity of people with mental health problems

Evidence-based practices

Life course and people-centered approach

Multi-sectoral approach
In alliance between health, education, protection, justice, and private sectors, among others

Empowerment
of people with mental conditions and psychosocial disabilities through their inclusion in decision-making about care and services

Essential requirements

The creation of mental health care services in primary care requires:

- **Political commitment** to decentralized planning, expansion of health services, strengthening of existing human resources, and redistribution and increase of economic investment.

- An **integrated and comprehensive health services network model** that ensures the availability and coordination of mental health services and resources throughout the different levels of the service network.

- Assigning **responsibilities to health personnel in non-specialized settings** for mental health care

- **Capacity building** programs for human resources in health.

- Regulations to ensure the **continuous availability of essential psychotropic drugs** at the first level of care.

- Ensure a **minimum of key indicators with data from the first level of care** as part of the health information system to monitor progress.

Success indicators

- Increase in the number of primary care facilities providing a package of essential mental health interventions.

- Increase in the number of persons diagnosed in primary care services with mental, neurological and substance use conditions .

- Increase in the percentage of persons with mental, neurological and substance use conditions attended by trained non-specialized health care providers who report decreased symptoms.

ROAD MAP

PLANNING

- Creation of an mhGAP operational team with key actors.
- Situational analysis of the prevalence and burden of mental health problems, the capacity of services and available personnel, and the treatment gap.
- Development of an operational plan that includes all actions to be carried out, with responsible persons and allocated funding.

PREPARATION

- Adaptation of the different components of the mhGAP package to the local sociocultural context.
- Development of a training plan for health care providers that includes materials, people to be trained, logistics and modality.
- Clinical supervision plan that includes modality and tools.
- Creation of a monitoring system with indicators, tools, responsible persons, and frequency.
- Strengthening of referral and counter-referral systems between different health care levels and sectors.
- Ensuring access and continuous availability of psychopharmacological treatment and psychological interventions.
- Establishing mechanisms for the availability of time during mental health care consultations.

PROVISION

- Provision of mental health services in primary care facilities, in a coordinated and complementary manner with specialized mental health care levels.
- Integration of mental health promotion and prevention actions.
- Awareness-raising actions on mental health for health personnel, decision-makers and communities.
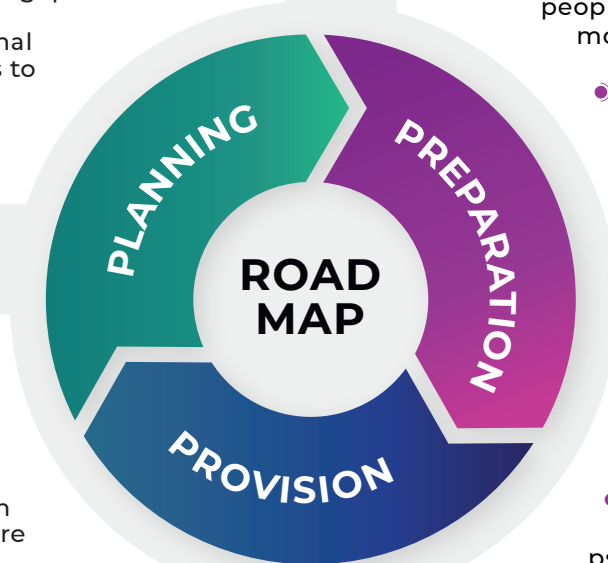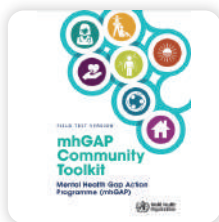
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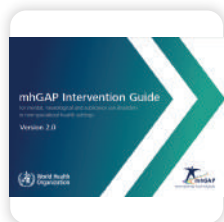
mhGAP-Intervention Guide (mhGAP-IG)

mhGAP Humanitarian Intervention Guide

mhGAP community toolkit

Problem management plus (PM+)

Group Problem Management Plus (Group PM+)

Thinking Healthy

Group interpersonal therapy (IPT) for depression

COURSES

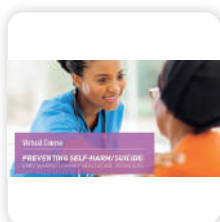Additionally, other mentored courses are regularly organized for countries.

mhGAP Humanitarian virtual course

Supervision (in Spanish)

Stigma (in Spanish)

Preventing Self-harm/suicide: Empowering Primary Health Care providers

OTHER RESOURCES

mhGAP operations manual

More information
https://www.paho.org/en/topics/mental-health-primary-care