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Commentary

Interventions to Improve Social Circumstances of People with Mental Health Conditions in Primary Care

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DESCRIPTION

There is growing recognition in the fields of public health and mental health services research that meeting a population's need for mental health through individual clinical care is not a viable solution. Population based mental health approaches are widely supported, but there is little clear guidance on evidence of their efficacy. With the aid of research and scholarly work from a variety of fields, it provides a clear definition of population-based approaches to mental health, places these strategies within their historical context in the United States, and describes the nature of these approaches and their supporting data. These methods address three topics there are three types of public health practice interventions social, economic and environmental policy interventions that legislators and public agency directors.

The healthcare system is designed to meet the needs of the sick, indicating that children and younger adults are given priority. The provision of mental health treatment has been improved into this system without much vision, reason or equality. The pediatric model of care is ineffective for mental health. Even for those who do receive healthcare, a smooth transition from child and adolescent mental health services to adult treatment is frequently challenging. This is because the vast majority of young people do not receive healthcare at all or only after large delays. The biggest threat to young people's health, security and view on the future is mental illness. There are indications that care is becoming more important and the COVID-19 pandemic has hastened this trend. It is a global public health calamity that demands prompt change and investment in clinical care that is developmentally appropriate, as well as a complete potential prevention approaches.

Despite having the greatest need and potential for benefiting from timely and high-quality mental health care, children, teens

and emerging adults have the weakest access to it. The World Health Organization (WHO) has long understood that primary care must become the focal point of global mental health treatment. Using this as an entry portal has many advantages, including reduced stigma, greater capacity and actual feasibility in terms of cost and resource across the majority of health care contexts, including low and moderate resource settings. We quickly learned however that general practice and regular primary care were not seen by young people as a location to seek treatment for mental illness and accompanying anxiety in high-resource countries like Australia. Mental health includes all aspects of intellectual, psychological and economic well-being. It affects how the brain thinks, perceives and behaves.

A few of the elements that contribute to mental health include intrinsic well-being, apparent self-efficacy, autonomy, competence, intergenerational dependence and self-actualization of one's intellectual and moral potential. According to viewpoints from positive psychology or a person's ability to enjoy life and strike a balance between their interests and efforts to develop psychological resilience may be a sign of their mental health. The definition of "mental health" is influenced by a variety of factors, including cultural variations, subjective assessments and divergent professional opinions. A number of issues, including the history and traditions of these care systems, inadequate financial management and the forced nature of the transformation, contribute to the low rates of programmer access and engagement among young people. When they are not prepared and at their weakest, young people and their families are forced to navigate a new, frequently highly different system. Due to difficulties getting appropriate care or an unwillingness to engage with improper therapies, the majority of these individuals do not seek or receive mental health care when they are in need.

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