



Mental Illness and Its Consequences in Primary Care

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DESCRIPTION

In the disciplines of public health and mental health services research there is growing acknowledgment that providing clinical care to individuals is not a sustainable way to satisfying a population's mental health requirements. Despite widespread support for population-based mental health methods precise guidance on what they involve is evidence of their effectiveness has not been integrated. These approaches cover three areas (a) social, economic and environmental policy interventions that legislators and public agency directors can implement (b) public health practice interventions that public health department officials can implement and (c) health care system interventions that hospital and health care system leaders can implement.

Mental illness is the leading hazard to young people's health safety and future outlook all around the world. There are signs that the sensitivity and need for care is raising a tendency that has been accelerated by the COVID19 pandemic. It constitutes a global public health that necessitates not just an understanding of potential preventative targets but also immediate reform and investment in developmental appropriate clinical care. Children, teens and emerging adults have the poorest access to timely and high-quality mental health care despite having the highest need and opportunity to benefit. These range from digital platforms to new primary healthcare models to new services for those with potentially severe mental illnesses all of which must be to the public products workforce, cultural variables and health-financing patterns. The emergence of broad-spectrum integrated primary youth mental care services is the main foundation of this success. The progress made so far in effectively implementing youth mental health care has shown that these services are being used by young people who have genuine and significant health care needs that they are benefiting from them

and that both these young people and their families are very happy with the services they receive. These primary care platforms must be expanded out globally with preventive digital platforms and most importantly, more treatment services for severe and persistent disorders suited to this transitory age group (from approximately 12 to 25 years). The mental illness among young people around the world necessitates that this issue be prioritized as a high priority in global health.

The health-care system is set up to satisfy the requirements of those who are sick which implies that younger adults and children are prioritized. With little vision, rationality or equity, mental health care. Early diagnosis necessitates quick and easy access to care, highlighting the importance of a high-volume primary care. The World Health Organization has known for a long time that the global mental health treatment needed to move to and focus on primary care. The general practice and routine primary care were not perceived by young people as a place to seek help for mental illness and related anxiety. A majority of these people do not seek or receive mental health care when they need it due to challenges in accessing adequate care or to interact with inappropriate treatments in mental illness and its consequences. Intellectual, psychological and economic well-being is all part of mental health. It has an impact on the brain's thinking, perceptions and behavior. Intrinsic well-being apparent self-efficacy, autonomy, competence, intergenerational reliance and self-actualization of one's mental and moral potential are just a few of the factors that go into mental health. Mental health may involve an individual's ability to enjoy life and build a balance among activities and efforts to achieve psychological activities according to positive psychology or communitarianism perspectives. Cultural differences, subjective evaluations and conflicting professional ideas all influence how "mental health" is defined.

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Received: 03-Jun-2022, Manuscript No. HCCR-22-17222; **Editor assigned:** 06-Jun-2022, Pre QC No. HCCR-22-17222 (PQ); **Reviewed:** 20-Jun-2022, QC No. HCCR-22-17222; **Revised:** 27-Jun-2022, Manuscript No. HCCR-22-17222 (R); **Published:** 04-Jul-2022, DOI: 10.35248/2375-4273.22.10.298.

Citation: Jing X (2022) Mental Illness and Its Consequences in Primary Care. Health Care Curr Rev. 10:298.

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