

## **HKU-USC-IPPA Conference on Public Policy**

### **Paper Abstract**

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#### **Panel**

T02P03 - Public Health Policy: “World Wellness” Framework For Preventing Illness and Improving Population Health

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#### **Title**

Health Policy for Improving Population Mental Health in Contemporary Rural China

#### **Abstract**

Background: Many patients with mental illness remain untreated in China, especially rural areas. How to develop hospital-based and community-based mental health service is still unknown. Moreover, it is also unclear about the impact of rapid social development (e.g., health and social welfare policy, economic, urbanization) on mental illness (e.g., schizophrenia, mood disorders, substance abuse, dementia, etc.) and mental health services in contemporary China.

Objective: 1) To explore the impact of social development (e.g., health and social welfare policy, economic, urbanization) on mental illness and mental health services in rural China, and 2) To provide suggestions for development of mental health policies.

Method: Chengdu Mental Health Project (CMHP), a unique longitudinal mental health project, was launched in 1994. The 1st wave of mental health survey was conducted to explore the mental illness (e.g., schizophrenia, mood disorders, substance abuse, dementia, etc.) and mental health services among 149,231 people in 6 townships of Xinjin County, Chengdu, China. The 10-year (1994-2004), the 14-year (1994-2008) and the 21-year (1994-2015) follow-up were conducted to explore the long-term outcome of patients with schizophrenia. In 2015, the 2nd wave of mental health survey was conducted to explore the impact of social development (e.g., health and social welfare policy, economic, urbanization) on mental illness and mental health services in the same townships of Xinjin County, Chengdu, China.

Results: The results showed that there were 30.6%, 25.0% and 20.4% of patients with schizophrenia who received no antipsychotic medication in 1994, 2004 and 2008

respectively. Compared with treated patients, those who were never treated in 2008 were significantly older, had significantly fewer family members, had higher rates of homelessness, death from other causes, being unmarried, living alone, being without a caregiver and poor family attitudes. There were 90.3% and 93.9% of patients with schizophrenia were living with their family caregivers in 2004 and 2008. Individuals without family caregiver in 1994 had significantly higher rate of homelessness (23.8%) and lower rate of survival (47.5%) in 2008 than those with family caregivers (5.1% and 70.9%). Compared with mental illness in 1994, there were significantly higher prevalence of alcoholism, substance abuse, and dementia in 2015.

Discussion: Many patients with mental illness still do not receive antipsychotic medication in rural areas of China. Outcomes for the untreated patients with mental illness are worse than treated patients. Community-based mental health care, health insurance, professionals training and reducing the stigma associated with mental illness are crucial for earlier diagnosis, treatment and recovery of mental illness in the community of contemporary China. Families and caregivers should be empowered to support patients with mental illness. The critical role of family caregiving should be incorporated in the planning and delivering of mental health policies and community-based mental health services. Moreover, the spectrum of mental illness will change with the social and economic development. The change of mental illness spectrum should be monitored during the period of social and economic development, and mental health policy and service resources delivering should be adjusted accordingly.

### **Reference**

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### **Keyword**

Health policy, Social development, Mental illness, China