

Mental Health Research Role in Global World

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Abstract: The role of mental health research is very important to support health programs. Health programs should be developed and evaluated based on scientific evidence. Not all research results could be used for health planning and policy. Many studies stop until the report finished or only in the form of articles published. There is one more step that is translating the results of the research into a policy brief therefore it could be used as a reference for developing the program. To formulate the policy, the research should have a good quality, in line with priority topics and using good research principles.

1 INTRODUCTION

Research is a systematic, rigorous investigation of a situation or problem in order to generate new knowledge or validate existing knowledge. Health program is any activities to improve, maintain, and restore health. Mental health research is any research within the field of mental health. The role of research is very important in the current development both at global and national level.

The health programs should be based on scientific evidence, as well as the evaluation of a program should be implemented through a research. Not only that, the evaluation of the economic aspect has also become an integral part of research. Programs should have a good clinical effectiveness and economically affordable. Currently the research results are developed to be cost effectiveness, cost utility, cost benefit and budget impact analysis studies.

In developed countries which have a sufficient research budget, research has become a necessity. Contrary in developing countries, research is often not a priority therefore there is no adequate budget for research. Even in developed countries though, mental health research budget is much smaller than the research budget for other diseases (Ahmed and Mari, 2014).

In mental health field, the approach is different from other diseases such infectious diseases. Mental disorder and mental health problems have not direct impact on mortality, but have impact on the burden of disease and decrease productivity including

disability. Based on burden of disease analysis, neuropsychiatric disease and substance abuse provided a considerable burden. The depression disorder occupied the sixth rank of contributor to the disease burden caused by the disease calculated by the years live with disability (YLDs) (IHME, 2016). Another problem is the quality of researches is not sufficient therefore it can't be translated into the health policy. The following will be discussed about the research points in the global (international) and national situation.

2 CURRENT SITUATION

Determinants of mental health are not only individual attributes but also social, culture, political, economic, environmental factors such as national policies, social protection, working standards, living condition etc. Besides the determinants there are vulnerable groups such as people living in poverty, people with chronic health condition, infants and children exposed to neglect, adolescent exposed to substance use, indigenous group, minority group, older people, people experiencing discrimination and human right violation, prisoners, people exposed to conflict or natural disaster, gay, bisexual, etc (WHO, 2013).

People with mental disorder have 40-60% greater chance of premature death. They also have more risk to get Human Immunodeficiency Virus (HIV) infection, non-communicable disease such as cardiovascular disease, diabetes, cancer etc. Mental

disorder leads people or their family into poverty and their civil and political right is often ignored (WHO,2013).

Treatment gap for severe mental disorder is around 76-85 % in high income countries (HIC) and around 35-50% in low middle-income countries (LMIC) (Kohn et al., 2004). Annual spending for mental health is less than 2 USD in HIC and less than 0, 25 USD in LMIC. These spending are 67% for mental hospital. Towards the spending will be better directed to community, general health care setting, maternal mental health, and promotion, prevention, rehabilitation program.

Specialist health workers or general health worker dealing with mental health are insufficient in LMIC. The ratio population to mental health doctor and facility is scarce and mental health legislation has not reached most people with mental disorder. Countries with mental health law or legislation are only limited. Non-government institution, community participatory including groups on promotion, prevention movement have same condition as well (WHO, 2017a).

In 2015 dementia affected almost 5% of the world's elderly population that is predicted to increase to 75 million in 2030 and 132 million in 2050. Recent reviews estimated that globally 9.9 million people develop dementia each year. Almost 60% of people with dementia currently live in LMICs and most new cases (71%) are predicted happened in those countries (WHO, 2017b).

Essentials medicine for mental disorder is very limited compared to medicines of communicable diseases. In Indonesia there are various psychotropic medicines in the essential medicine list, but the availability of that medicine in health service is a problem. In primary health care centres (PHCs) those medicines are often not available (WHO,2010).

3 GLOBAL STRATEGY

A good research should have a high quality. The high quality characterised by existence of expert review, efficient, effective, accessible, monitoring and evaluation. Global issues including Sustainable Development Goals (SDGs), ASEAN Economic Community (AEC) could be included to show how important it is to do. Inclusiveness i.e. partnership, multisectoral approach, community and civil society participation during the research process will improve the quality of research.

4 NATIONAL STRATEGY

The important points to consider in developing proposal or research such as national strategic plan 2015-2019 (*Rencana Pembangunan Jangka Menengah Nasional* = RPJMN) and some Ministerial decree (*Peraturan Menteri Kesehatan* or *Permenkes*). In RPJMN was stated that government should reach the 50% target of Health Service Facility Recipient Institution (IPWL= *Institusi Penerima Wajib Laport*) of active narcotics addicted people in 2019, number of districts or cities developing mental health strategy in PHCs should be 280 in 2019 and referral regional general hospital implementing mental health service or psychiatric service should be 60% in 2019.

Ministerial decree number 5 in 2014 explains four psychiatric disorders should be treated thoroughly in PHC level by medical doctor; the disorders are insomnia, mixed anxiety depression disorder, psychosis and dementia. Ministerial decree number 43 in 2016 regulates health minimum standard or *standar pelayanan minimum* (SPM) therefore local government should allocate budget for mental health in their region. In 2016, the Ministry of Health launched Indonesian Healthy Indonesian Program with family approach or *Program Indonesia Sehat dengan Pendekatan Keluarga* (PIS-PK). There are 12 indicators in PIS-PK and the eighth indicator is about mental health. PIS-PK was regulated in Ministerial decree number 36 in 2016. Other Ministerial decree such as number 75 in 2015 about PHC and number 57 in 2017 about physical restraint in people with mental disorder. Besides those above, there are several situations influencing health research such as implementation of universal health coverage in 2014, Law No 18 in 2014 about mental health etc.

5 MENTAL HEALTH RESEARCH

Mental health research is developed with general principles for research i.e. quality, impact and inclusiveness. For that purpose, research culture in research institution should be strengthened. The capacity of research institution and human resources should be strengthened as well (WHO, 2012). The research itself should have a focusing topic and in priority setting (Sharan et al., 2014). The research procedure uses standards, guideline or norms i.e. good clinical practices, (GCP) good clinical laboratory practices (GCLP), applying ethical principles etc. The results of research then are

published in high index journal, and another important thing it should be translated into health policies (WHO, 2013).

Mental health research or research in general can be classified by disease approach i.e. epidemiology, risk factor, aetiology, pathogenesis, therapy, and prognosis. By system approach is classified as health policy, health management, health financing, health service, health empowerment, human resources, medical devices and drug, health economic, and social determinant of health. Implementation and evaluation research are as a part of one of those approaches.

Another thing is that when conducting research, researchers must obey the applicable regulations in the country where the research is conducted. For research collaborative with foreign parties, researchers are asked to carry out the procedures set by the government through the Ministry of Research and Technology and Higher Education.

6 CONCLUSIONS

Mental health researches and health researches are an essential in global world. The research priorities should be directed to support mental health programs and policies. A major effort is needed to ensure all countries and institutions use their resources on a priority setting. The research program should involve scientific participatory and conduct transparently.

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