

Mental health

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The evidence: mild to moderate mental health problems

Common mental disorders are highly prevalent, often co-morbid with other mental disorders and/or long term physical illness and demanding on primary care services.

Evidence for:

- time-limited psychological interventions
- guided self-help approaches for common mental health problems
- mechanisms to link people to non-medical sources of support
- possible to deliver evidence based psychological interventions through nontraditional roles or formats:
 - self-help workers, lifestyle coaches, primary care mental health workers and lay/peer support
 - the new Link Worker roles currently being evaluated in Scotland (see http://links.alliancescotland.org.uk/) show promise of impacting on patient outcomes and providing additional capacity and capability to support primary care
 - Computerised CBT (guided)
 - Social support, social referral/social prescribing

Improvement potential

- A range of different types of support delivered in a variety of settings.
 - A local needs assessment could help to determine the structure and distribution of services
 - primary, community, secondary and social care services work together in developing local care pathways for different types of support
 - encouraging or supporting new types of support/service delivery
 - a degree of permanency to community based supports
- 'Building healthy communities' approach with other public and voluntary agencies