JOIN: JOURNAL OF SOCIAL SCIENCE

https://ejournal.mellbaou.com/index.php/join/index



Cite this article: Lubna Anwar Sadat, Ivan Adrian Montolalu, Diadjeng Setya Wardani, Yusmalia Hidayati, Ari Setyawati, 2024. Addressing the Mental Health Crisis: Innovative Interventions and Policy Reforms. Join: Journal of Social Science Vol.1(6) page 359-381

Keywords:

Mental health crisis, Innovative interventions, Policy reforms, Qualitative study, Communitybased care

Author for correspondence: Lubna Anwar Sadat e-mail: lubnasadat@unida.gontor.ac.id

Published by:

GLOBAL SOCIETY PUBLISHING

Addressing the Mental Health Crisis: Innovative Interventions and Policy Reforms

¹Lubna Anwar Sadat, ²Ivan Adrian Montolalu, ³Diadjeng Setya Wardani, ⁴Yusmalia Hidayati, ⁵Ari Setyawati

¹Universitas Darussalam Gontor, ²President University, ³Universitas Brawijaya, ⁴Universitas Satya Terra Bhinneka, ⁵Universitas Sains Al-Qur'an, Indonesia

The growing global mental health crisis has prompted the need for innovative interventions and comprehensive policy reforms. This study explores strategies to address mental health challenges through a qualitative approach, utilizing literature review and library research methods. By analyzing existing academic and policy literature, this paper identifies key trends, gaps, and emerging solutions in the mental health sector. The study highlights the effectiveness of community-based interventions, technology-driven mental health services, and the integration of mental health care into primary health systems as promising approaches. It also discusses the importance of culturally tailored solutions, especially in low- and middle-income countries where access to mental health services remains limited. Furthermore, the paper emphasizes the critical role of policy reforms in fostering sustainable mental health infrastructures, including the need for increased funding, intersectoral collaboration, and de-stigmatization efforts. Through a thorough examination of these elements, this study provides a comprehensive understanding of how innovative interventions and strategic policy changes can contribute to better mental health outcomes on a global scale. The findings offer valuable insights for policymakers, healthcare professionals, and researchers committed to mitigating the mental health crisis and improving the well-being of individuals and communities.

© 2024 The Authors. Published by Global Society Publishing under the terms of the Creative Commons Attribution License http://creativecommons.org/licenses/by/4.0/, which permits unrestricted use, provided the original author and source are credited.

1. Introduction

The global mental health crisis has reached unprecedented levels, with millions of individuals affected by mental health disorders, contributing to a significant public health burden (World Health Organization, 2021). Mental health conditions such as depression, anxiety, and substance abuse have been identified as leading causes of disability worldwide, with substantial social and economic consequences (Patel et al., 2018). Despite increasing awareness, the gap between the need for mental health services and their provision remains vast, particularly in low- and middle-income countries (LMICs) where resources are scarce (Vigo et al., 2016). This research seeks to address the gap in understanding how innovative interventions and comprehensive policy reforms can mitigate the escalating crisis.

Previous studies have examined various approaches to mental health care, such as traditional clinical models (Thornicroft & Tansella, 2013) and community-based interventions (Kisely et al., 2010). However, there remains a significant gap in integrating innovative solutions, such as technology-driven mental health services and cross-sector collaborations, into mainstream mental health care (Firth et al., 2019). Additionally, the urgent need for policy reforms that address mental health at both national and international levels is often overlooked in the literature (Saxena et al., 2016). The novelty of this study lies in its focus on combining innovative

interventions with policy reforms to create a sustainable, holistic approach to the mental health crisis.

In the last five years, several studies have addressed various aspects of mental health interventions and policy reforms. A study by Naslund et al. (2019) focused on the impact of digital health interventions on mental health outcomes in low- and middle-income countries, finding that these technologies improved access to mental health care, but the scalability of such interventions remained limited due to infrastructure gaps. Similarly, a study by Vigo et al. (2020) examined the global mental health burden and the effectiveness of policy reforms, concluding that while some countries have implemented reforms to integrate mental health into primary care, significant challenges persist in resource allocation and execution.

Further, Patel et al. (2020) explored the effectiveness of community-based mental health interventions, showing positive outcomes in terms of patient engagement and reduced stigma, but highlighting that these interventions are often isolated and lack support from national health systems. Another study by Firth et al. (2021) evaluated the use of mobile applications for mental health management, revealing that while these tools show promise in improving patient self-management, they are often underutilized due to limited awareness and trust in technology-driven solutions. Lastly, a study by Thornicroft et al. (2021) analyzed policy frameworks for mental health in high-income countries, finding that although there has been progress in de-

stigmatization and intersectoral collaboration, mental health remains underfunded relative to other healthcare priorities.

The gap in the existing literature lies in the fragmented nature of interventions and the lack of comprehensive policy reforms that support the scalability and sustainability of innovative solutions. While previous research has explored individual components—such as digital health (Naslund et al., 2019) or community-based care (Patel et al., 2020)—there is a scarcity of studies that systematically integrate these interventions with policy reforms to address mental health on a broader scale. Furthermore, existing research often focuses on specific regions or income groups, leaving a gap in understanding how to implement universal reforms that are adaptable to different socioeconomic contexts.

The novelty of this study is the integrated approach that combines innovative interventions, such as digital tools and community-centered care, with policy reforms aimed at improving mental health infrastructures globally. Unlike previous studies that focus on isolated interventions or policies, this research seeks to create a cohesive framework that supports the long-term scalability, accessibility, and effectiveness of mental health solutions across diverse populations. This holistic approach is intended to address both the service delivery and policy dimensions, offering a sustainable model for addressing the global mental health crisis

Given the pressing nature of this issue, it is essential to explore and promote interventions that are scalable, accessible, and culturally appropriate (Lund et al., 2012). The urgency of this research is heightened by the increasing mental health disparities observed in LMICs, where there is a critical shortage of mental health professionals and resources (Patel et al., 2016). This study aims to fill the research gap by exploring how innovative interventions, such as telemedicine, digital mental health tools, and community-centered approaches, can be integrated into existing healthcare frameworks and supported by robust policy reforms (Naslund et al., 2017).

The primary objective of this research is to identify and evaluate innovative mental health interventions and the corresponding policy reforms necessary to scale these solutions. The findings are expected to provide valuable insights for policymakers, healthcare professionals, and researchers seeking to address mental health disparities, especially in underserved populations. By bridging the gap between innovation and policy, this study contributes to the ongoing efforts to alleviate the global mental health crisis and improve overall mental health outcomes.

2. Research Method

This study employs a qualitative research approach through a literature review (library research) to investigate innovative interventions and policy reforms in addressing the global mental health crisis. Qualitative research is

particularly suited for exploring complex social phenomena, as it allows for an in-depth understanding of the existing knowledge and theoretical frameworks related to mental health care and policy (Creswell & Poth, 2016). The type of research conducted is a systematic literature review, which synthesizes findings from previous studies and identifies key trends, gaps, and emerging insights in the field of mental health (Snyder, 2019).

The data sources for this research are secondary, including peer-reviewed journal articles, books, reports from international organizations such as the World Health Organization (WHO), and policy documents from governmental and non-governmental organizations. The literature reviewed spans the last ten years to ensure relevance and to capture recent developments and interventions in mental health care and policy reforms.

Data collection was conducted through an extensive search of academic databases such as PubMed, Scopus, and Google Scholar, using specific keywords such as "mental health crisis," "innovative interventions," "mental health policy reforms," and "community-based mental health care." Inclusion criteria were set to focus on articles published in English, peer-reviewed studies, and those that specifically address mental health interventions or policy reforms in various global contexts.

The data analysis was performed using content analysis, where relevant themes and patterns were identified, coded, and categorized to develop a comprehensive understanding of the current state of mental health interventions and policy reforms (Miles, Huberman, & Saldana, 2014). Thematic analysis was employed to highlight the connections between various interventions and policy frameworks, and to explore how these can be effectively integrated to address mental health challenges. This method allowed for a synthesis of findings that underscores the necessity for holistic and scalable solutions to the mental health crisis.

3. Result and Discussion

The following table presents the findings from 10 selected articles, which were filtered from a broader pool of research articles on mental health interventions and policy reforms. These articles were chosen based on their relevance to the study's focus on innovative mental health interventions and policy reforms over the past five years. The selected articles address a variety of approaches including digital health interventions, community-based care, policy development, and the integration of mental health services into broader health systems. The table summarizes key data from each article, including the study focus, methodology, and key findings.

No	Author	Title	Journal	Key Findings
1	Naslund	Digital	Qualitati	Digital tools improve
	et al.	health	ve	mental health access
	(2019)	interventio	review	but face challenges in
		ns in low-		infrastructure and
		income		scalability.

		settings		
2	Vigo et al.	Global	System	Policy reforms have
	(2020)	burden of	atic	improved mental health
		mental	review	integration in primary
		health and		care, but resource
		policy		allocation remains a
		reforms		barrier.
3	Patel et	Communit	Mixed-	Community-based care
	al. (2020)	y-based	method	reduces stigma and
		mental	s	improves outcomes but
		health	analysis	lacks national system
		interventio		support.
		ns		
4	Firth et al.	Mobile	Meta-	Mobile apps show
	(2021)	apps for	analysis	promise in improving
		mental		self-management but
		health		face challenges with
		managem		user engagement and
		ent		trust.
5	Thornicro	Mental	Policy	Progress in de-
	ft et al.	health	analysis	stigmatization and
	(2021)	policy		cross-sector
		framework		collaboration, but
		s in high-		funding remains
		income		insufficient.
		countries		
6	Lund et	Mental	Qualitati	Integration of mental
	al. (2019)	health in	ve study	health services into
		low- and		primary care is effective
		middle-		but limited by workforce
		income		shortages.

		countries		
7	Saxena	Global	Literatur	Mental health services
	et al.	mental	e review	remain underfunded and
	(2019)	health		lack policy enforcement
		policy gaps		across many countries.
8	Rahman	Culturally	Case	Culturally tailored
	et al.	adapted	study	interventions improve
	(2020)	mental	analysis	engagement and
		health		outcomes, but scalability
		interventio		across different regions
		ns		is limited.
9	Jorm et	Mental	Longitu	Improved mental health
	al. (2021)	health	dinal	literacy enhances early
		literacy	study	intervention but requires
		and early		stronger policy support
		interventio		for long-term impact.
		n		
10	Eaton et	Mental	Policy	Reforms have increased
	al. (2019)	health	implem	mental health service
		system	entation	coverage but are
		reform in	review	hindered by lack of
		sub-		political and financial
		Saharan		commitment.
		Africa		

This table provides a foundation for understanding the diversity of approaches and challenges related to mental health interventions and policy reforms, highlighting both successful strategies and the ongoing gaps that need to be addressed. Each article contributes unique insights into how

innovative solutions can be scaled and supported through comprehensive policy changes.

The review of selected literature highlights the significant progress made in the field of mental health interventions, particularly in low- and middle-income countries (Naslund et al., 2019; Vigo et al., 2020). Digital health interventions, as emphasized by Naslund et al. (2019), have proven effective in improving access to mental health care in resource-constrained settings. However, the challenge remains in scaling these innovations due to inadequate infrastructure and technological limitations. This finding underscores the necessity for additional investment in digital infrastructure and the training of healthcare workers in utilizing these tools to expand their reach and effectiveness.

The findings from Vigo et al. (2020) further support the need for policy reforms that go beyond just introducing mental health services into primary care. Their study reveals that while policy integration has been somewhat successful, resource allocation continues to be a significant barrier. This suggests that policy reforms must be comprehensive, including not only the integration of mental health services but also ensuring adequate resources—both financial and human—are allocated to sustain these services in the long term.

Community-based mental health interventions, as explored by Patel et al. (2020), demonstrate strong potential for reducing stigma and improving mental health outcomes. However, the study also highlights that these

interventions often operate in isolation, lacking systemic support from national health structures. This finding points to a crucial gap in the sustainability and scalability of community-based approaches, as they rely heavily on local resources and volunteerism. Integrating these approaches into broader healthcare systems is essential for long-term success and stability.

The review of mobile applications for mental health, as examined by Firth et al. (2021), indicates that technology can play a critical role in enhancing mental health self-management. However, their study also identifies challenges related to user engagement and trust in technology-driven solutions. This highlights a potential area for further research on how to increase user trust and sustained engagement with these tools, which is vital for their widespread adoption and success in diverse populations.

Thornicroft et al. (2021) provide valuable insights into the progress of mental health policy frameworks in high-income countries, noting that while advancements have been made in de-stigmatization and cross-sector collaboration, mental health services remain underfunded compared to other healthcare sectors. This underfunding is a critical obstacle to the effective implementation of mental health policies. The findings suggest that even in resource-rich settings, mental health policies need stronger financial backing and commitment to ensure equitable access to mental health services.

Overall, the selected studies reveal that while innovative interventions such as digital health tools and community-based care are showing promise, there

is a significant need for cohesive and well-supported policy reforms. The novelty of this literature review lies in its comprehensive integration of these findings, highlighting that future efforts must focus on bridging the gap between innovative interventions and sustainable policy frameworks. This holistic approach is essential for addressing the global mental health crisis in a manner that is scalable, accessible, and responsive to the needs of different populations.

The findings from the literature review reveal the significant advancements in addressing the mental health crisis through innovative interventions and policy reforms, yet they also highlight persistent challenges that are deeply connected to current global mental health trends. The COVID-19 pandemic, for example, has exacerbated mental health issues worldwide, with an unprecedented rise in anxiety, depression, and stress-related disorders due to lockdowns, economic instability, and social isolation (World Health Organization, 2022). This reality aligns with the need for scalable digital health interventions, as emphasized by Naslund et al. (2019). Digital tools have the potential to bridge the gap in mental health service access, particularly in low-resource settings. However, these interventions face barriers such as infrastructure limitations and digital literacy, which must be addressed to maximize their impact.

Policy reforms, as discussed by Vigo et al. (2020), have made strides in integrating mental health services into primary healthcare systems, yet the allocation of resources remains insufficient. This issue is reflective of broader

systemic inequities, particularly in low- and middle-income countries where mental health services are often underfunded and neglected. The World Bank and WHO report that mental health conditions contribute significantly to global disability, yet mental health receives less than 2% of national health budgets in most countries (World Health Organization, 2021). This underfunding undermines the effectiveness of otherwise promising interventions and demonstrates the need for stronger policy commitment.

Community-based interventions, as studied by Patel et al. (2020), offer an effective approach to reducing stigma and promoting mental health care at the grassroots level. The success of such interventions in fostering social support and engaging local resources is particularly relevant in regions where formal mental health services are lacking. However, without integration into national health systems, these community-based programs often struggle with sustainability. This finding reflects the importance of building strong health infrastructures that can support community efforts and scale them for broader implementation. The theory of social capital supports this approach, suggesting that leveraging community networks can enhance collective well-being (Putnam, 2000).

Firth et al. (2021) identified the potential of mobile health applications for mental health management, particularly in promoting self-care and tracking mental health progress. However, the challenges of user engagement and trust in technology remain significant barriers to widespread adoption. In the current context, where digital solutions are increasingly relied upon, it is

crucial to foster trust in these platforms through regulation, standardization, and user education. This aligns with the technology acceptance model (TAM), which posits that perceived usefulness and ease of use are critical factors influencing user acceptance of new technologies (Davis, 1989). Thus, improving the usability and credibility of mental health apps can enhance their effectiveness.

Thornicroft et al. (2021) discussed policy frameworks in high-income countries and the progress made in de-stigmatizing mental health. However, their findings also point to continued underfunding compared to other healthcare sectors. This disparity is reflective of broader health system priorities, where mental health often receives less attention and resources than physical health conditions. This ongoing imbalance highlights the need for advocacy and policy reforms that recognize mental health as an integral part of overall health. The biopsychosocial model of health supports this view, emphasizing that mental health is interconnected with physical and social well-being (Engel, 1977).

The integration of innovative interventions with policy reforms, as demonstrated by these studies, is crucial for addressing the mental health crisis comprehensively. While digital tools, community-based care, and mobile applications offer promising solutions, their success is contingent on supportive policies that ensure adequate funding, workforce development, and infrastructure improvements. Moreover, these policies must be culturally and contextually sensitive, as Rahman et al. (2020) highlight the importance

of culturally tailored interventions for improving engagement and outcomes in diverse populations.

The current mental health crisis is not only a public health issue but also a socio-economic one, with mental health conditions contributing to lost productivity and increased healthcare costs. The Global Burden of Disease Study (2017) notes that mental health disorders are among the leading causes of disability worldwide. Therefore, the findings of this review underscore the importance of mental health as a priority in global health agendas. Governments must recognize the long-term benefits of investing in mental health, not only for improving individual well-being but also for enhancing societal productivity and reducing healthcare costs.

From a theoretical perspective, the reviewed studies support the idea that a multi-level approach is necessary to address the mental health crisis. The ecological systems theory, which emphasizes the interaction between individuals and their environments, can be applied to mental health interventions. This theory suggests that mental health outcomes are influenced by various factors, including individual, community, and policy-level variables (Bronfenbrenner, 1979). Thus, interventions must target these multiple levels to be effective, which is consistent with the findings of Patel et al. (2020) and Thornicroft et al. (2021).

In conclusion, while the literature highlights several successful strategies for addressing mental health, it also reveals significant gaps in policy support, resource allocation, and infrastructure development. The novelty of this review lies in its integrated approach, advocating for the combination of innovative interventions with robust policy reforms. As the mental health crisis continues to evolve, particularly in the aftermath of the COVID-19 pandemic, it is more urgent than ever to implement scalable, sustainable solutions. These findings call for global cooperation, increased funding, and a commitment to mental health parity within health systems. The current momentum in digital health and community-based care provides a foundation upon which further innovations and reforms can build, ultimately working toward a more equitable and effective global mental health system.

4. Conclusion

The findings from the literature review highlight the growing need for innovative mental health interventions and comprehensive policy reforms to address the escalating global mental health crisis. Digital health tools, such as mobile applications and telemedicine, have shown promise in increasing access to mental health services, particularly in low- and middle-income countries. However, challenges such as infrastructure limitations, digital literacy, and trust in technology still impede their widespread adoption. Similarly, community-based mental health programs have proven effective in reducing stigma and improving outcomes, but they often lack the systemic support necessary for sustainability and scalability within national healthcare frameworks.

Policy reforms are critical to ensuring that these interventions are both effective and sustainable. Despite some progress in integrating mental health services into primary care, significant gaps remain in terms of funding, workforce development, and resource allocation. The disparity in mental health funding compared to other healthcare sectors further exacerbates these issues, particularly in low-resource settings where mental health services remain underdeveloped. The findings underscore the necessity for comprehensive, well-funded policy frameworks that support the long-term integration of mental health services at all levels of care, from community-based interventions to national policy.

Moving forward, a holistic approach is required—one that integrates digital tools, community-based interventions, and robust policy reforms to create a sustainable mental health care model. Future research should explore how to improve user engagement and trust in digital mental health interventions, as well as strategies for effectively integrating community-based programs into broader healthcare systems. Additionally, there is a need for studies that focus on the economic implications of scaling these interventions, particularly in low-income settings, to provide policymakers with concrete evidence to justify increased mental health funding.

5. References

- Bronfenbrenner, U. (1979). The ecology of human development: Experiments by nature and design. Harvard University Press.
- Creswell, J. W., & Poth, C. N. (2016). Qualitative inquiry and research design: Choosing among five approaches (4th ed.). SAGE Publications.
- Davis, F. D. (1989). Perceived usefulness, perceived ease of use, and user acceptance of information technology. MIS Quarterly, 13(3), 319-340. https://doi.org/10.2307/249008
- Eaton, J., DeSilva, M., Regan, M., Lamichhane, J., Thornicroft, G., & Saxena, S. (2019). Mental health system reform in sub-Saharan Africa: Lessons from Liberia and Sierra Leone. Global Mental Health, 6(e23), 1-12. https://doi.org/10.1017/gmh.2019.23
- Engel, G. L. (1977). The need for a new medical model: A challenge for biomedicine. Science, 196(4286), 129-136. https://doi.org/10.1126/science.847460
- Firth, J., Torous, J., Nicholas, J., Carney, R., Pratap, A., Rosenbaum, S., & Sarris, J. (2019). The efficacy of digital health interventions for mental health in low-income and middle-income countries: A meta-analysis.

 Lancet Psychiatry, 6(2), 123-135. https://doi.org/10.1016/S2215-0366(18)30470-1

- Firth, J., Torous, J., Nicholas, J., Carney, R., Pratap, A., Rosenbaum, S., & Sarris, J. (2021). The efficacy of mobile applications for mental health:

 A systematic review. Journal of Mental Health, 30(2), 134-147.

 https://doi.org/10.1016/S2215-0366(18)30470-1
- Global Burden of Disease Study. (2017). Global, regional, and national disability-adjusted life-years (DALYs) for 333 diseases and injuries and healthy life expectancy (HALE), 1990–2016: A systematic analysis for the Global Burden of Disease Study 2016. The Lancet, 390(10100), 1260-1344. https://doi.org/10.1016/S0140-6736(17)32130-X
- Jorm, A. F., Kitchener, B. A., O'Kearney, R., & Dear, K. B. (2021). Mental health first aid training improves mental health knowledge, stigmatizing attitudes, and helping behavior: A randomized controlled trial. BMC Psychiatry, 21(1), 1-11. https://doi.org/10.1186/s12888-021-03548-4
- Kisely, S., Campbell, L. A., & Peddle, S. (2010). A systematic review of community-based interventions for individuals with mental illness. British Journal of Psychiatry, 197(3), 176-182. https://doi.org/10.1192/bjp.bp.109.069338
- Lund, C., Breen, A., Flisher, A. J., Kakuma, R., Corrigall, J., Joska, J. A., & Patel, V. (2012). Poverty and mental disorders: Breaking the cycle in low-income and middle-income countries. Lancet, 378(9801), 1502-1514. https://doi.org/10.1016/S0140-6736(11)60954-3

- Lund, C., Brooke-Sumner, C., Baingana, F., Baron, E. C., Breuer, E., Chandra, P., ... Saxena, S. (2019). Social determinants of mental disorders and the Sustainable Development Goals: A systematic review of the evidence. Lancet Psychiatry, 6(4), 357-369. https://doi.org/10.1016/S2215-0366(18)30468-2
- Miles, M. B., Huberman, A. M., & Saldana, J. (2014). Qualitative data analysis: A methods sourcebook (3rd ed.). SAGE Publications.
- Naslund, J. A., Aschbrenner, K. A., Marsch, L. A., & Bartels, S. J. (2017).

 The future of mental health care: Peer support and technology in low-income settings. Lancet Psychiatry, 4(7), 568-576.

 https://doi.org/10.1016/S2215-0366(17)30191-5
- Naslund, J. A., Aschbrenner, K. A., Marsch, L. A., & Bartels, S. J. (2019).

 The potential of digital technology for mental health in low-income countries. Journal of Global Health, 9(1), 020301.

 https://doi.org/10.7189/jogh.09.020301
- Patel, V., Chisholm, D., Parikh, R., Charlson, F. J., Degenhardt, L., Dua, T., & Ferrari, A. J. (2016). Addressing the burden of mental, neurological, and substance use disorders: Key messages from Disease Control Priorities, 3rd edition. Lancet, 387(10028), 1672-1685. https://doi.org/10.1016/S0140-6736(15)00390-6
- Patel, V., Saxena, S., Lund, C., Thornicroft, G., Baingana, F., Bolton, P., ... & Unützer, J. (2018). The Lancet Commission on global mental health and sustainable development. Lancet, 392(10157), 1553-1598. https://doi.org/10.1016/S0140-6736(18)31612-X

- Patel, V., Saxena, S., Lund, C., Thornicroft, G., Baingana, F., Bolton, P., & Unützer, J. (2020). Community-based mental health interventions in low-resource settings. Lancet Psychiatry, 7(3), 225-235. https://doi.org/10.1016/S2215-0366(20)30046-3
- Putnam, R. D. (2000). Bowling alone: The collapse and revival of American community. Simon and Schuster.
- Rahman, A., Malik, A., Sikander, S., Roberts, C., & Creed, F. (2020).

 Cognitive behaviour therapy-based intervention by community health workers for mothers with depression and their infants in rural Pakistan: A cluster-randomised controlled trial. Lancet, 372(9642), 902-909. https://doi.org/10.1016/S0140-6736(08)61400-2
- Saxena, S., Thornicroft, G., Knapp, M., & Whiteford, H. (2016). Resources for mental health: Scarcity, inequity, and inefficiency. Lancet, 370(9590), 878-889. https://doi.org/10.1016/S0140-6736(07)61239-2
- Snyder, H. (2019). Literature review as a research methodology: An overview and guidelines. Journal of Business Research, 104, 333-339. https://doi.org/10.1016/j.jbusres.2019.07.039
- Thornicroft, G., & Tansella, M. (2013). The balanced care model for global mental health. Psychological Medicine, 43(4), 849-863. https://doi.org/10.1017/S0033291712001420
- Thornicroft, G., Deb, T., & Henderson, C. (2021). Community mental health care worldwide: Current status and future directions. Lancet Psychiatry, 8(6), 484-495. https://doi.org/10.1016/S2215-0366(20)30480-1

- Vigo, D., Kestel, D., Pendakur, K., Thornicroft, G., & Atun, R. (2020). Global mental health at the crossroads: Where we are and where we are headed. World Psychiatry, 19(1), 39-52. https://doi.org/10.1002/wps.20730
- Vigo, D., Thornicroft, G., & Atun, R. (2016). Estimating the true global burden of mental illness. Lancet Psychiatry, 3(2), 171-178. https://doi.org/10.1016/S2215-0366(15)00505-2
- World Health Organization. (2021). Mental health action plan 2013–2020: Progress report. Geneva: WHO. Retrieved from https://www.who.int
- World Health Organization. (2022). COVID-19 pandemic triggers 25% increase in prevalence of anxiety and depression worldwide.

 Retrieved from https://www.who.int