



The Conceptual Framework for Mental Health Equity

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Dear Editor-in-Chief

Mental health is crucial for overall well-being and should be integrated into social and economic sectors to ensure equity, especially as mental disorders often lead to disabilities and inadequate awareness within health and social care systems (1). Given the increased frequency of mental disorders and drug use, especially in developing countries, mental health is a significant public health concern (2).

The separation of mental health from public health is problematic, as mental health issues cause significant morbidity worldwide (3). Globally, there is an increasing need to incorporate mental health into primary care due to the lack of mental health services and the increase in risk factors (4).

Despite significant challenges, including inadequate facilities, cultural barriers, and persistent societal stigma, policymakers should prioritize adapting healthcare services to effectively address the diverse mental health needs of various populations (5). In this regard, policymaking is vital in improving access to mental health services, such as offering mental health services at community clinics, positively impacting service use (6).

Taking into account the distinction between service provision and utilization, service provision involves providing services with the available resources, whereas health service utilization refers

to an individual's use of healthcare services (7). Mental health services, in particular, differ from other healthcare services with unique care patterns, demands, and settings, emphasizing community-based care (8). Also, mental health care needs cultural sensitivity and diversity inclusion for better service accessibility, availability, appropriateness, and acceptability (9).

Mental health services should be customized to fit the goals, priorities, and severity of the problem in each context, considering that mental health disorders are a worldwide problem. In addition, the acceptability of services and various accessibility factors—such as geographic, cultural, financial, and physical aspects—are essential to guarantee equal access and enhanced outcomes for people in need of mental health care. To address these challenges, a conceptual framework can support the timely and appropriate delivery of mental health services by integrating access, utilization, and service provision, ultimately enhancing service quality and improving accessibility and usage.

This paper offers a conceptual framework for classifying the major determinants of equity in mental health services. As illustrated in Fig. 1, regulations introduced by policymakers and service availability are crucial factors that influence the provision of mental health services, ultimately



affecting access and utilization. This framework emphasizes the access dimension, grounded in the principles of Universal Health Coverage (10),

focusing on expanding access and reducing gaps in the utilization of mental health services.

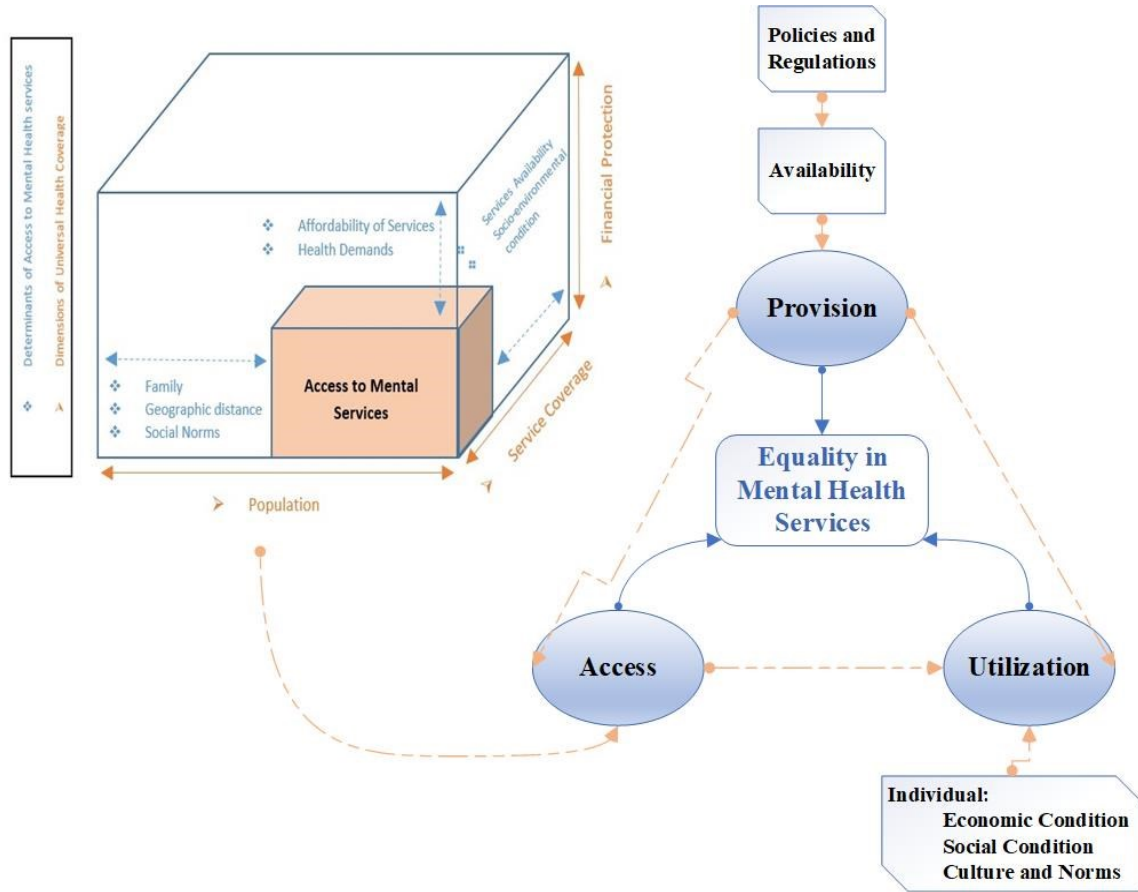


Fig. 1: The Conceptual Framework of Equality in Mental Health Services

The dimensions of this framework are interlinked to demonstrate the relationship between different determinants. As presented at the top of the framework, the availability and provision of mental health services are governed by mental health regulations and legislation, which in turn affect accessibility from a variety of perspectives, including affordability, availability, and geographical reach. Given the significance of accessibility for mental health services, it is critical to acknowledge that service availability and the legislative frameworks have a substantial impact on service provision, which in turn enhances access to affordable and easily accessible mental health care. Additionally, offering and facilitating public

access to mental health services can mitigate disparities in the overall utilization of mental health services. However, to fully achieve service utilization, it needs to consider various sub-factors such as the individual's cultural, social, and economic determinants.

Regarding the role of policymakers in improving equality in mental health services, they need to consider several factors, including insurance coverage, financial capacity, and community conditions, when determining where and how to spend resources for mental health care, enabling informed decisions about resource allocation and effective service provision for those in need. Moreover, the current framework indicates that,

in addition to the utilization and provision of mental health services that affect mental health equity, the access dimension—influenced by the supply chain of mental health service providers, human resources, and equipment—plays a significant role in the equity in mental health services.

Competing interests

The author declares that there were no competing interests.

References

1. Zak D (2015). Mental Health—An Issue Neglected by European Public Health Systems? In: *Topics in Public Health*. Ed(s): IntechOpen.
2. Alonso J (2012). Burden of mental disorders based on the World Mental Health surveys. *Braz J Psychiatry*, 34(1):7-8.
3. Bährer-Kohler S, Bolea-Alamanac B (2019). *Diversity in Global Mental Health: Gender, Lifespan, Access to Care, Treatment and Social Strata*. ed. Springer.
4. Collins PY, Insel TR, Chockalingam A, Daar A, Maddox YT (2013). Grand challenges in global mental health: integration in research, policy, and practice. *PLoS Med*, 10 (4):e1001434.
5. Bagcchi S (2014). India launches mental health policy to improve access to services. *BMJ*, 349:g6471.
6. Shiner B, Gottlieb D, Rice K, Forehand JA, Snitkin M, Watts BV (2022). Evaluating policies to improve access to mental health services in rural areas. *J Rural Health*, 38 (4):805-816.
7. Gulliford M, Figueroa-Munoz J, et al (2002). What does 'access to health care' mean? *J Health Serv Res Policy*, 7 (3):186-188.
8. McGuire TG (2016). Achieving mental health care parity might require changes in payments and competition. *Health Affairs*, 35 (6):1029-1035.
9. Hochhausen L, Le H-N, Perry DF (2011). Community-based mental health service utilization among low-income Latina immigrants. *Community Ment Health J*, 47:14-23.
10. World Health Organization. Making fair choices on the path to universal health coverage: Final report of the WHO Consultative Group on Equity and Universal Health Coverage. <https://www.who.int/publications/i/item/9789241507158>