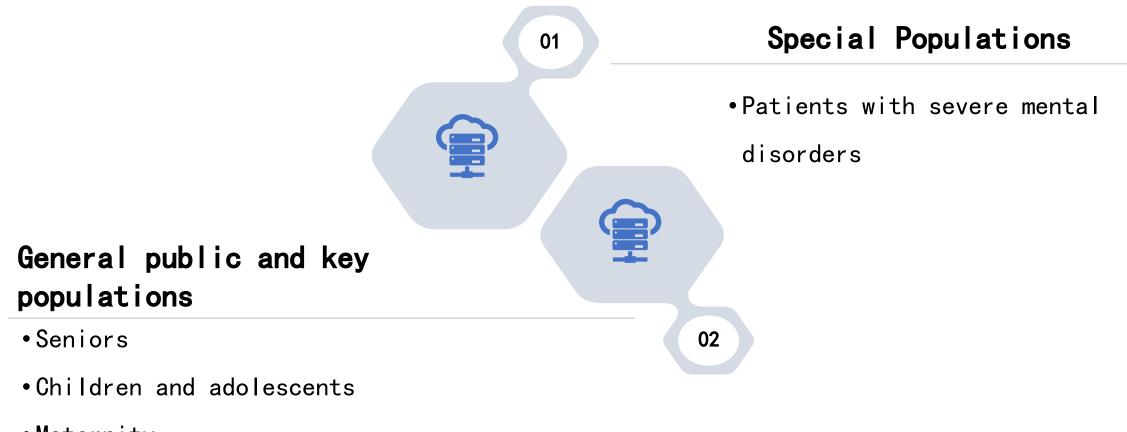


## Groups served by primary care



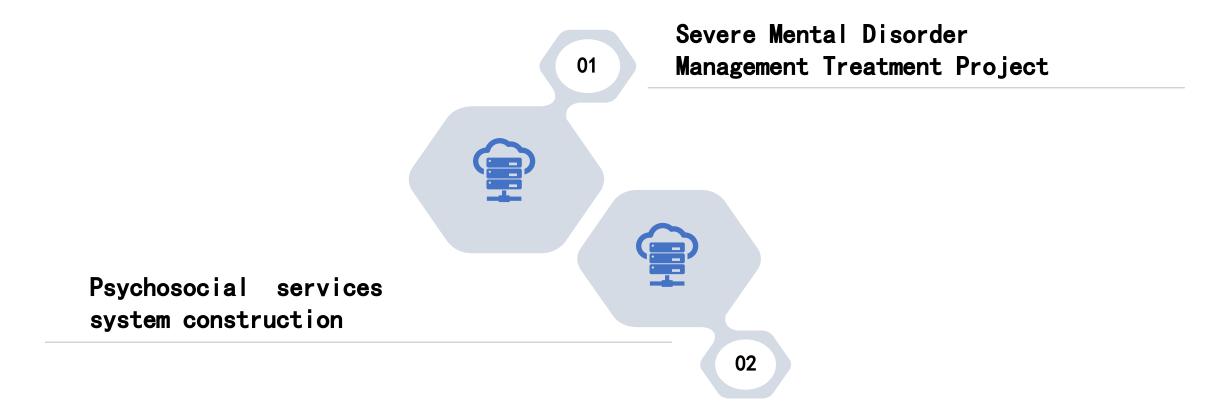


#### • Maternity

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## Outline 0







Since the 1960s and 1970s, China has started to develop community mental health services and mental health resources have been sunk to the grassroots; 2004 Loca Trea IIIn proj Iaun

2004 "Central Subsidised Local Management and Treatment of Serious Mental Illness Project" (the "686" project) was officially launched

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Large hospitals faced the impact of market economy reforms in the 1980s and community health services shrank at every level; In the late 1990s, along with the medical reform, a lot of reform attempts were made in mental health to explore a community-based public mental health service model suitable for China;



In 2005, the central government adopted a central transfer payment to spearhead a community-based management and treatment programme for serious mental illness in 59 districts (counties) across China.

> In 2009, the management and treatment of serious mental illness was incorporated into the National Basic Public Health Service System, and since then, community mental health services in China have been gradually

The "686" project shifts the management of patients with severe mental disorders forward, aiming at disease control, combining prevention and treatment as a means to provide early detection, continuous follow-up and rehabilitation services to patients on a community basis.

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With the enactment and implementation of the Mental Health Act on 1 May 2013, the target of management was changed from "serious mental illness" to "severe mental disorder".





What is the severe mental disorder? Severe mental disorder: a mental disorder in which the symptoms of mental illness are so severe that the person is seriously impaired in social adaptation and other functions, unable to have a complete understanding of his or her own health condition or objective reality, or unable to manage his or her own affairs. \* Reference to the Mental Health Law of the People's *Republic of China*, promulgated on 1 May 2013

## **Project clients**

1. Schizophrenia

2. Schizo-affective disorder

3. Paranoid mental disor der





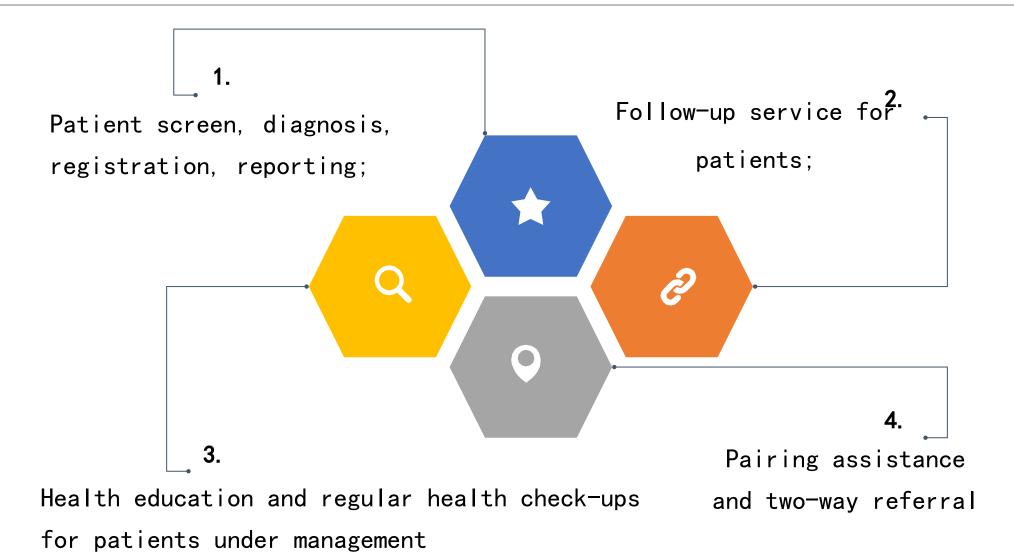
5. Mental disorders du e to epilepsy

6. Mental retardation with psychotic disorders

7. Patients who meet the conditions of Article 30(2)(2) of the Mental Health Law of the People's Republic of China and have been diagnosed and assessed as having a serious mental disorder, not limited to the six diseases listed above.
\* Refer to the Code of Practice for the Management and Treatment of Severe Mental Disorders (2018 Edition)

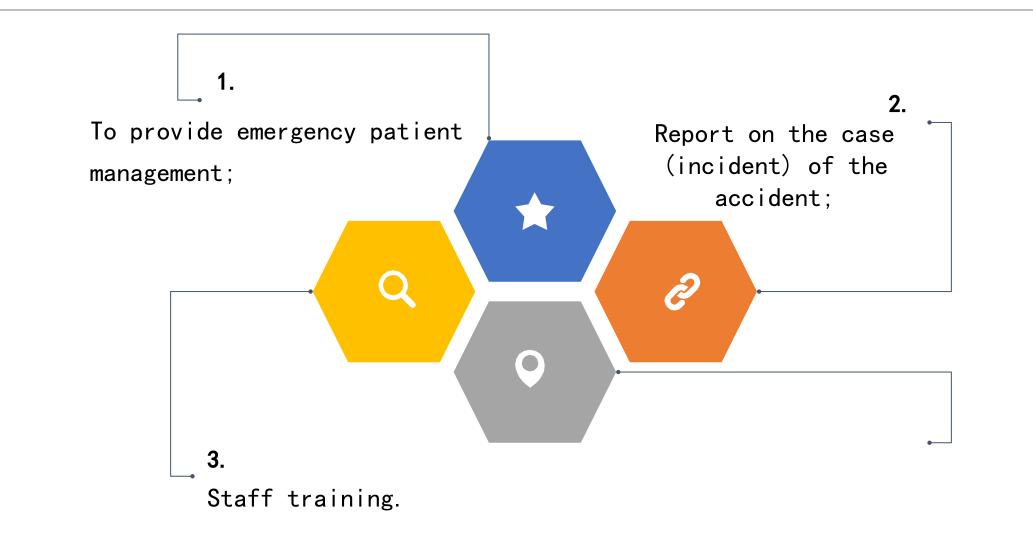






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What's new in Tianjin?

In addition to the services mentioned above, Tianjin has added the organization of psychiatrists to provide professional guidance and free follow-up consultations on medication in the community, as well as waiving partial hospital fees for patients with severe mental disorders under community management when they have violent tendencies to commit crimes or have serious drug side effects and need to be hospitalized 5and free medication administration for patients with severe mental disorders under management.



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Keyword

Keyword

Keyword

#### Accurate management by information technology Tianjin established its own mental health information system in 2017

The aim of integrating data sources based on the original national information system according to the actual situation in the city is to achieve refined patient management.

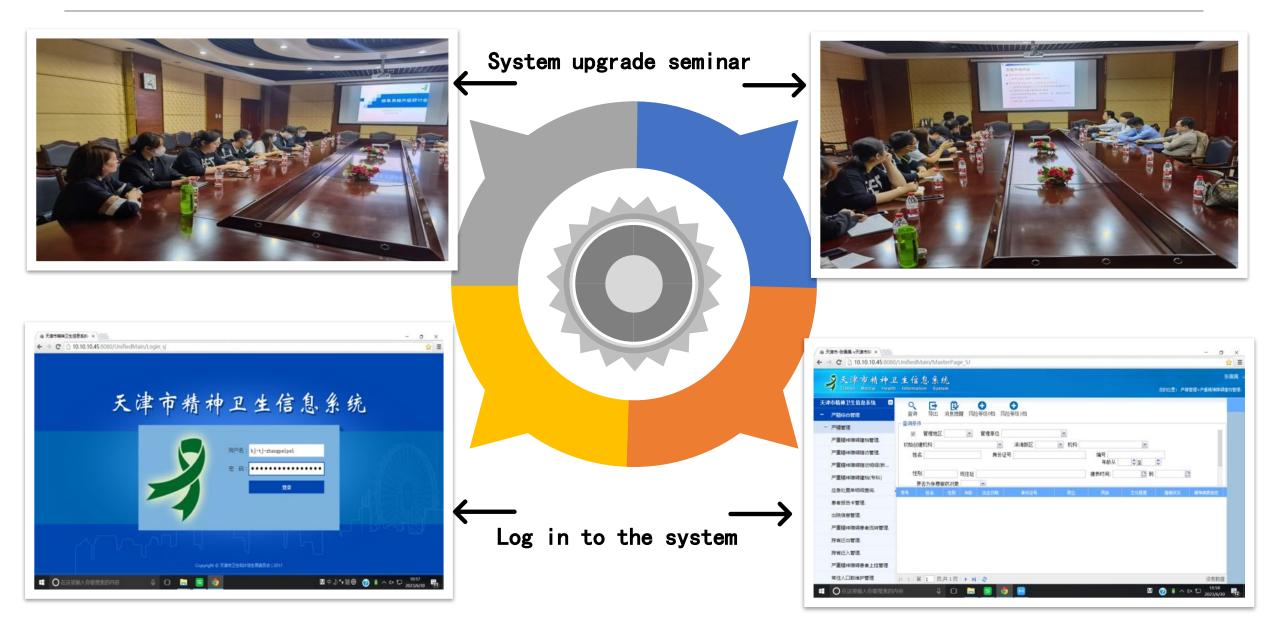
#### Precise patient management through information technology by 2020

Patients are marked 'red, yellow and green' according to their condition, medication status and risk, with different management models for different patients.

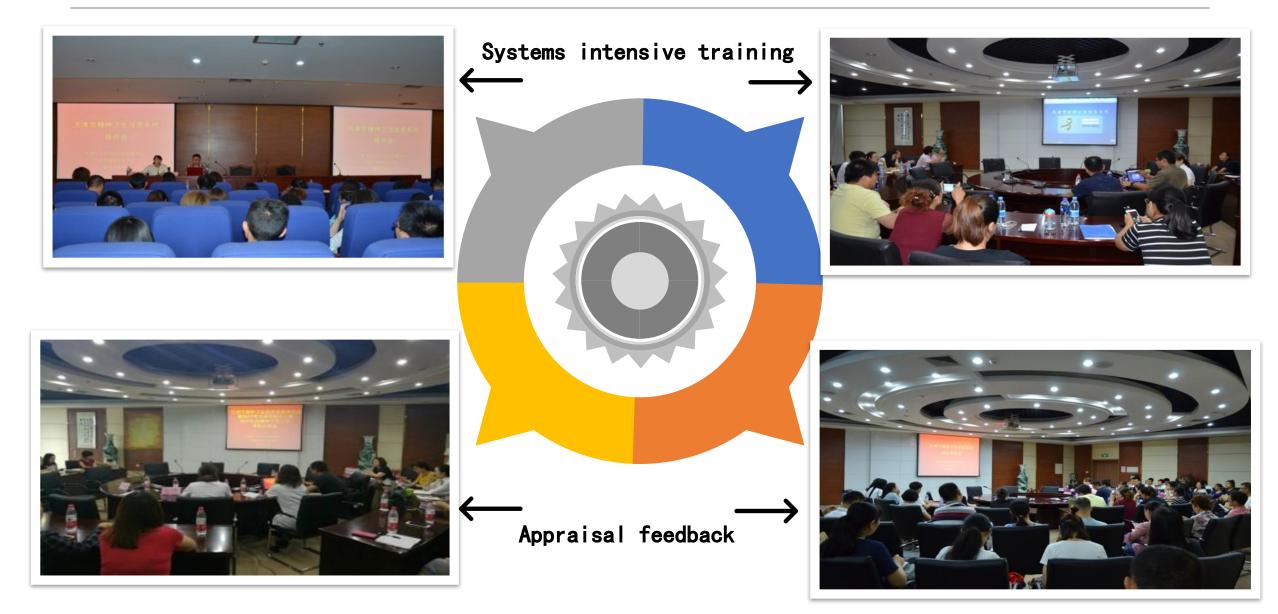
#### Data element specification for mental health is to be developed in 2022 to strengthen local and regional links.

To carry out the standardisation of mental health data elements in Beijing, Tianjin and Hebei in order to standardise the content of mental health information in Beijing, Tianjin and Hebei, to achieve consistency and comparability of mental health information, to ensure effective information exchange, statistics and sharing, and to realise regional patient management linkage.





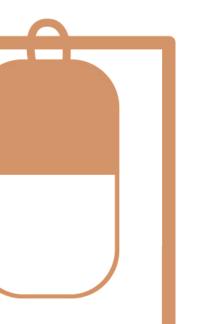








- 1. Improving the network of psychological services at the grassroots level
- 2. Improving the psychological service network of the education system
- 3. Improving the psychological service network of institutions/enterprises
- 4. Standardize the development of social psychological service institutions





- Enhancing the capacity of mental health services in medical institutions
- 2. Improving the platform for psychological assistance services
- 3. Improving the network for the popularisation of mental health science
- 4. Improving the working mechanism of services for patients with severe mental disorders

## Improving eight service

networks





- Developing a professional workforce for social work in the field of mental health
- 2. Nurturing psychological counsellors
- 3. Developing a mental health service workforce in medical institutions





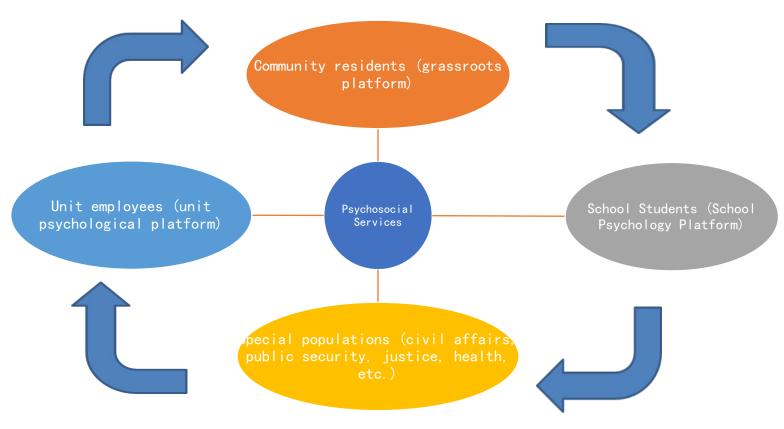
- 4. Form a volunteer team for mental health service.
- 5. Sound industry organization and

strengthen management

Building five teams of talent



# Laying down a network of psychosocial service systems





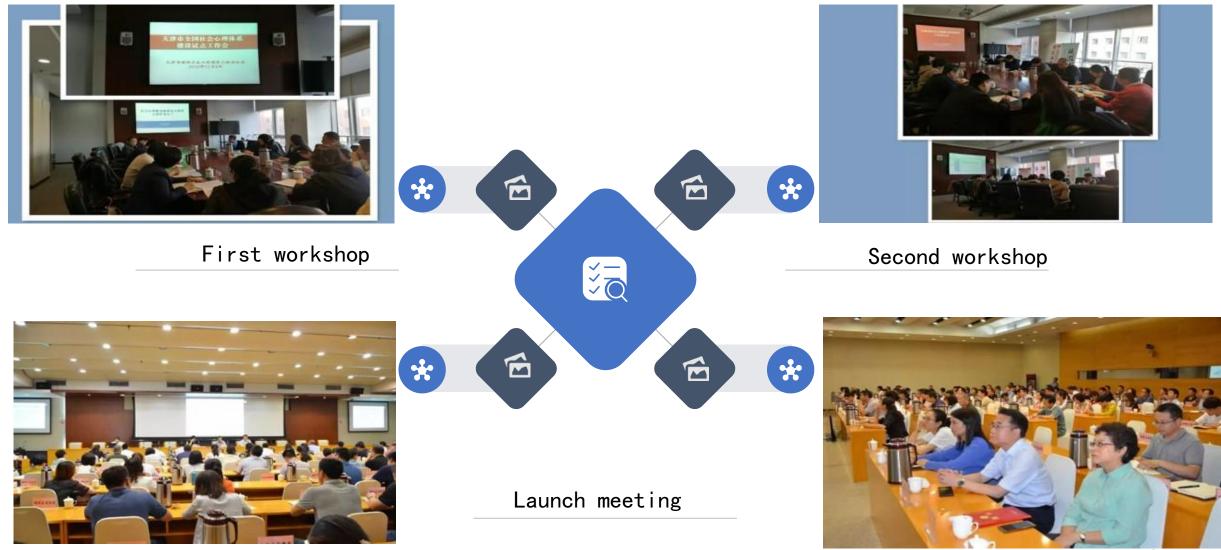
#### Construction effectiveness



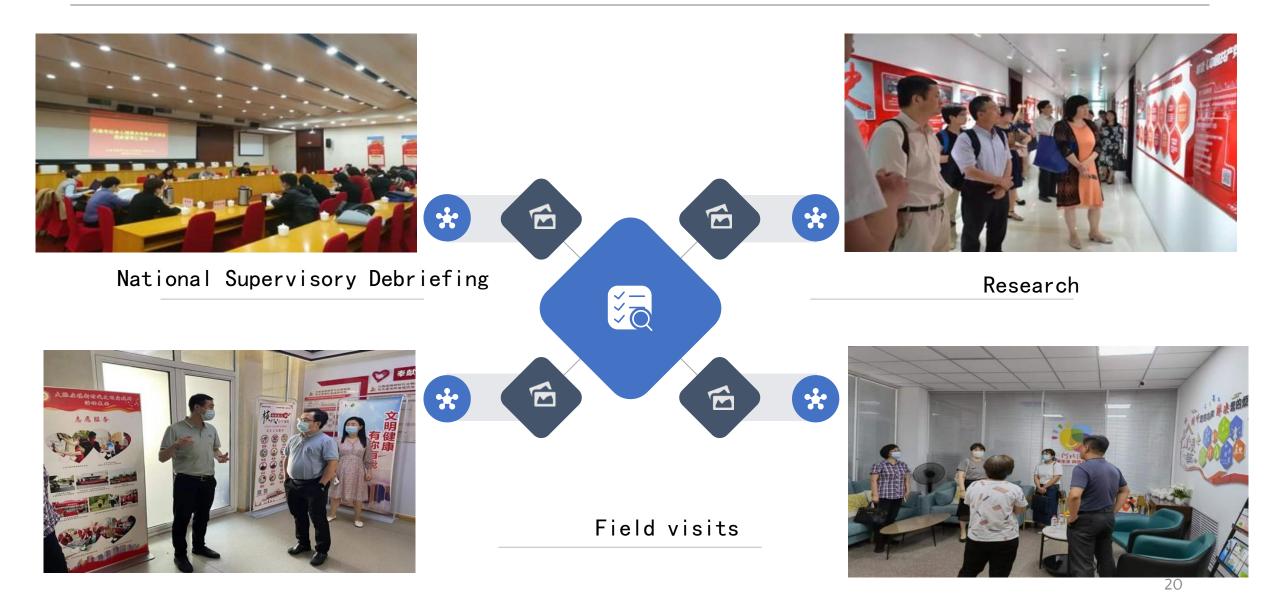
Achieve full coverage of the psycho-social service network. The city's psychological stations cover 100% of townships (streets) and psychological counselling rooms cover 100% of villages (communities). The coverage of personalized psychological counselling for key groups such as those serving prison sentences, drug addicts and community correctional officers has reached 100%. The provision of mental health teachers and the construction of psychological counselling rooms in all universities, primary and secondary schools is 100% complete. 100% of psychiatric specialist hospitals at all levels set up psychological outpatient clinics. The service network is becoming more and more densely woven, the service capacity is steadily improving and the effects of the services are gradually emerging. ×-

The level of residents' mental health literacy has been improving. Since the implementation of the pilot social psychological service system in the city, mental health knowledge has been comprehensively popularized and disseminated, and the public's awareness of mental health self-management has been strengthened. 62% of the general population in urban areas and 67% of the general population in rural areas were aware of core mental health knowledge in 2021, and the mental health literacy level of residents reached 19%, an increase of 58% compared to 2019 (12%). This represents an increase of 58% compared to 2019 (12%), all meeting the national requirements.

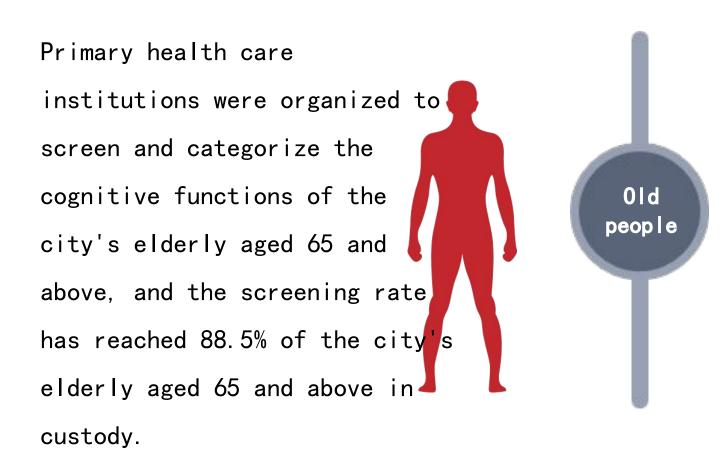












Conducted 456 awareness-raising activities on dementia-related knowledge at the community level, directly benefiting more than 58,000 people and distributing more than 138,000 copies of awareness-raising materials;

Annual survey on public knowledge of dementia prevention and treatment completed, with awareness rate at 80% or more



All primary and secondary schools in the city have full-time and part-time teachers in accordance with the requirement of at least one per school. All primary and secondary schools conducted at least one training session per term on mental health education for parents and students. Primary and secondary schools carried out mental health assessments, with a participation rate of 68.04%; approximately 742,600 files were created for school students. with a 77.43% rate; the core knowledge of mental health was known by 94.2%



All higher education institutions in the city are equipped with full-time teachers according to the ratio of 1:4000. All higher education institutions have carried out mental health assessment. with a 100% participation rate; the number of mental health files of students in schools is about 398,000, with a 59.78% file creation rate: the awareness rate of core mental health knowledge reaches 83.35%.

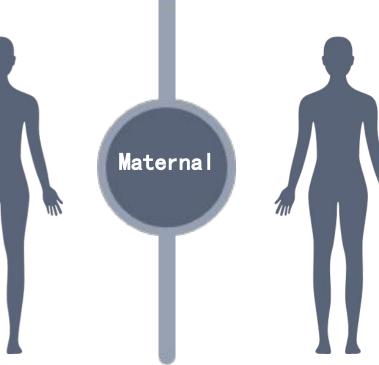


Screening for anxiety during pregnancy and puerperal depression before 28 weeks of gestation and within 42 days of Maternal delivery, and psychological intervention for mothers with *m* mildly abnormal anxiety during pregnancy or suspected abnormal puerperal depression.

Refer mothers with moderate or severe abnormalities on the Pregnancy Anxiety Screen or abnormal results on the Puerperal Depression Screen to a qualified health facility.

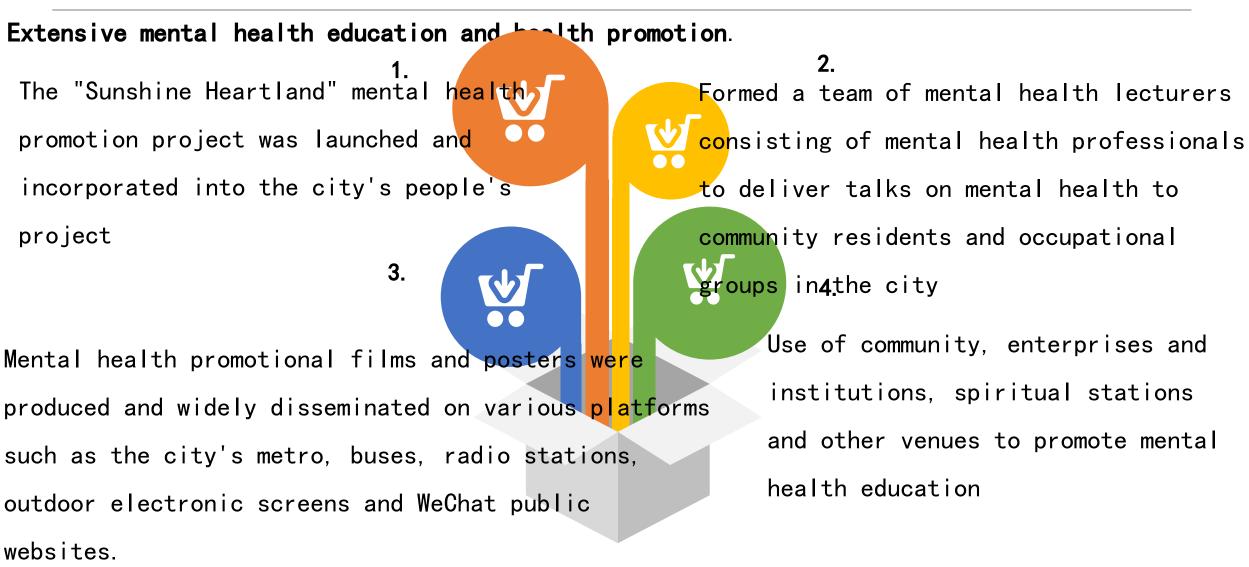


The obstetrics and gynecology department of a medical institution should provide medical care for th mental health of women during pregnancy and childbirth in the form of consultation with the psychiatric/psychological department of the institution.



Districts include depression prevention and treatment as part of popular science education in maternity schools to raise awareness of prevention and treatment among pregnant women and their families





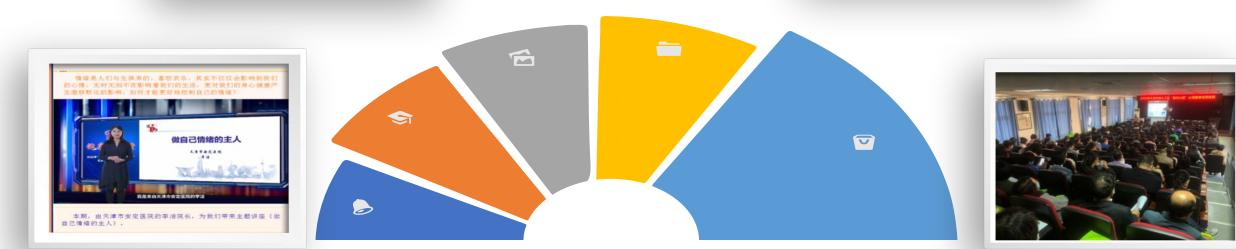


#### Conducting lectures on mental health

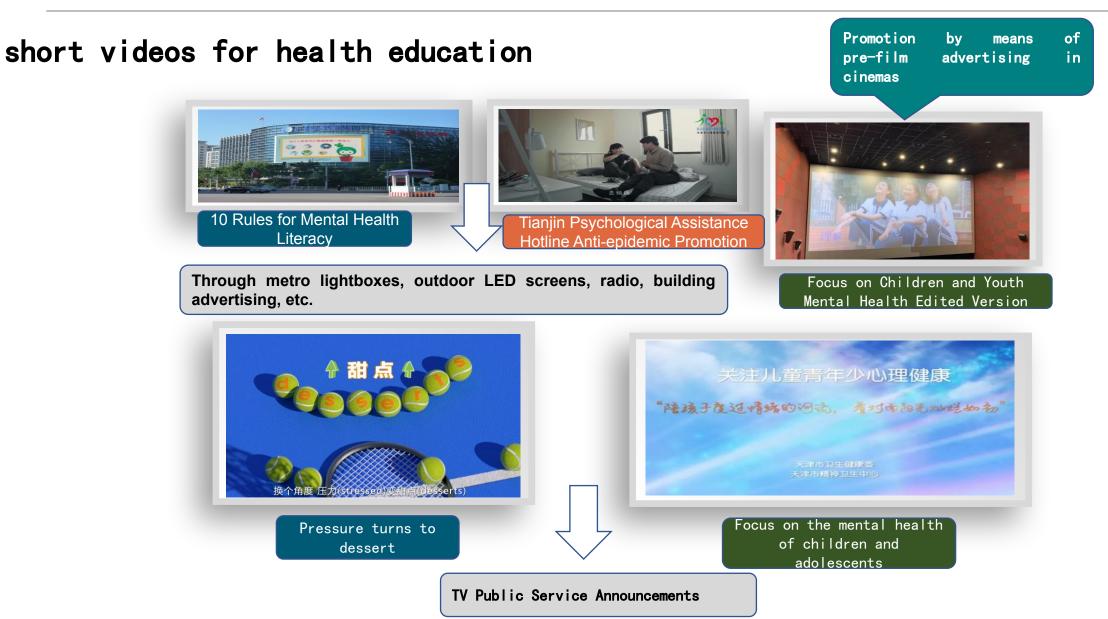














### Making posters





## Distribution of mental health promotional materials THE CONTRACTOR OF AN ADVISOR OF ADDIES 取药窗口 目請会 145 86 64 % % 49 % **新**静海

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