Insights into public mental health

As we reflect on the conflict in Ukraine and the human suffering and trauma it generates, this Issue covers a number of important themes, including child well-being, ethnicity and culture, mental health literacy and suicide prevention.

Our leading paper in the Issue is a fantastic example of methodological innovation, using a smartphone survey hosted on a custom-built app to gather data on the experiences of supervision, coping and well-being of 83 service providers and policymakers from eight countries working to support children’s well-being during the COVID-19 pandemic. This valuable study by Davidson and Karadzhov highlights the detrimental effects of the pandemic on children’s sector providers’ and policymakers’ self-efficacy, mental well-being and sense of connectedness and children’s sector service providers’ exceptional commitment, courage and resilience in responding to COVID-19 challenges to upholding children’s rights across the globe, particularly in resource-constrained settings. It suggests it is important to recognise providers’ own well-being as an integral part of resilient childcare, education and healthcare systems, and it is incumbent on governments, commissioners and service managers to explore and leverage digital technologies in supervision and peer support to providers. It also emphasises that voices from the frontline should be amplified and inform public mental health priorities, as sectors are moving into long-term recovery, and in anticipation of future crises.

Another interesting paper on child well-being by Akçay and Barış considers the impact of interventions focused on reducing screen time in children. Analysis of the findings of this study showed that a significant effect of screen time reduction was observed in studies in longer-term interventions.

There is a focus on ethnicity and culture in this Issue. The paper by Hussain and colleagues makes an important contribution to this field in undertaking a thematic synthesis of mental health policies published in England from 1999 to 2020, specifically focusing on ethnicity-related mental health issues. The findings from this synthesis demonstrate that ethnic mental health inequalities remain comparable over the past two decades and there are ongoing issues with a lack of data on the ethnicity of mental health services users and poor indicators of performance measurement on policy implementation.

In public mental health, it is important to recognise that population-wide interventions need to be adapted to the specific cultural needs of different communities. The paper by Anwar-McHenry and colleagues discusses the cultural adaptation of the Act-Belong-Commit campaign in an aboriginal community in Australia, which contains lessons for the roll out of other population mental health interventions.

Mental health literacy remains an important public mental health issue, and the paper by Bink and Corrigan discusses a novel view on this topic by considering the implications of information overload in the ongoing development of public mental health education programmes.

A very novel topic is covered in the paper by Jarke, who reviews evidence on the mental health of performers in porn. It highlights the lack of insights into the mental health of
performers within the literature and absence of evidence to inform policy which could improve the performers’ mental health or prevent mental ill-health.

This issue includes three articles relating to suicide, from Brazil, USA and South Africa. Thiago Jesuino and his co-authors carried out an extensive audit of the available curricula of Brazilian Medical Schools. There was a great deal of variation in the suicide-related content. Less than 30% of institutions had any formal provision. Although the authors do not draw any comparisons with how much teaching is found in other countries’ medical schools, it is likely while some countries will devote more time to suicide education, others will have provided even less. Of particular relevance is a report by Schmitz et al. (2012), for the American Association of Suicidology, which found that only 28% of psychiatry training programmes included relevant skills-based work.

The study of crisis hotlines from Lauren Krishnamurti and her colleagues, in Philadelphia and Colorado, takes a wide-ranging look at gender differences, primarily among callers. Results are largely as might be expected, with more female than male callers, overall. The countries included were in Europe, Asia, Australia and North America, but common patterns emerged. Although the study was about callers, an Australian study (Hunt et al., 2018) was mentioned which found that the techniques used by responders tended to differ, depending on whether the caller was a man or a woman. This is not necessarily a negative finding, but more work needs to be done to examine it.

The paper from South Africa addresses the problem of coverage of suicide and attempted suicide in the media, on which we have previously published articles, from Australia: Thienel (2019), and India: Ransing (2021). Lieketseng Ned and her team checked the main English-language newspapers covering 3 years. It was perhaps surprising that more reports were not found, as the suicide rate in South Africa is high, but the articles found were enough to show the poor quality of reporting. It appears that newspapers, at least at that time, put more priority on selling copies that offering a balanced view. Drawing attention to the problem should lead to improvements.

We hope you enjoy this Issue and find the content both thought-provoking and useful for your practice.

References


Further reading