

MODELS OF MENTAL HEALTH DELIVERY: EFFICACY, SUPPORT AND POLICY

Christensen H
Griffiths K
Wells L
Kljakovic M

POLICY CONTEXT

Depression and anxiety are common mental disorders often managed in primary health care and community settings.

The primary health care sector in Australia is facing a number of challenges in managing mental health care - the big five - quality, access, continuity, cost and workforce, are major issues.

This review shows a number of primary health care approaches 'work' in reducing symptoms of depression, including approaches within general practice settings and in community organisations.

KEY FINDINGS:

Successful community interventions include direct approaches through:

- early intervention programs in schools;
- the Internet; and
- school-based clinics.

Within general practice, the core components of effective practice are care management and enhanced care. In Australia, through the Better Outcomes in Mental Health Care (BOMHC) initiative, the shared care between GPs and allied health professionals (AHPs) involves a structured care plan delivered by the GP, delivery of focused psychological strategies by an Allied Health Professional and review by the GP at a point in the cycle of care.

The review found that the BOMHC Allied Health initiative is associated with reported good outcomes but low retention, the cause(s) of which are not well understood. We conclude that the care-management component of mental health delivery in this initiative may need to be optimised.

Many of the successful interventions in primary care focus on the importance of the patient or consumer playing an active role in treatment or early intervention.

Evidence indicates that GP training alone is a relatively ineffective strategy to reduce depression in consumers.

For more details, go to the [three page report](#)

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