

Research on Optimizing National Mental Health Literacy from the Perspective of Health in China: Significance and Approach

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Abstract: Improving the level of national mental health and strengthening the construction of social psychological service system are the necessary and important ways to promote the implementation of the Healthy China strategy. However, the gap between the requirements of Healthy China strategy for social mental health service system and the current situation of mental health service in China is still widespread. Promoting the public to form an effective demand for psychological help and establishing a new mental health service model is the key to bridge this gap. Optimizing mental health literacy is an important starting point and breakthrough to solve this problem. At present, the research on mental health literacy is undergoing a transformation from the paradigm of psycho-epidemiology to the paradigm of psychology and sociology. Taking contemporary China as the background, the reconceptualization of mental health literacy and the exploration of the current situation of Chinese mental health literacy in the new era is one of the core task of current psychological path research. The significance of this study is mainly reflected in: (1) promote the formation of effective demand for help and improve the level of public mental health; (2) enhance cultural self-confidence and construct the theory of mental health literacy of contemporary Chinese people; (3) guide the supply side structural reform of mental health services and promote mental health equity; (4) reduce the burden of mental illness and help build a well-off society in an all-round way; (5) help build a social and psychological service system.

Keywords: Mental health literacy; Healthy China strategy; Social psychological service system; Mental health; Mental health services

1. Introduction

Health is the inevitable requirement of promoting people's all-round development. Mental health is an important part of health and reflects profound social value. The report of the 19th CPC National Congress

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clearly pointed out that we should strengthen the construction of social psychological service system and cultivate a social mentality of self-esteem, self-confidence, rationality, peace and positive progress^[1]. In contemporary China, improving the level of national mental health is not only related to individual well-being, but also the inevitable requirement of social mentality construction and an important cornerstone of promoting the coordinated development of national economy and society.

Mental health literacy (MHL) refers to the knowledge or belief that helps individuals recognize, manage and prevent mental disorders^[2]. A large number of studies show that individual mental health literacy is closely related to their mental health level. Optimizing individual mental health literacy is an important way to improve public mental health level.

2. China's Health Strategy and the Current Situation of National Mental Health

2.1. Healthy China strategy

Healthy China strategy is a national strategy established under the background of the new era, with the fundamental purpose of improving the health level of all people and the framework of health services, life health, health security, health environment, health industry, health support and security^[3]. Since the concept of Healthy China was put forward, it has become a national strategy in a short time.

The government work report in March 2015 pointed out for the first time to “build a healthy China”. The Fifth Plenary Session of the 18th CPC Central Committee clearly deliberated and adopted the *Proposal of the CPC Central Committee on Formulating the 13th Five-Year Plan for National Economic and Social Development*, and made improving health literacy as the main goal of economic and social development during the 13th five-year plan period. In 2016, the Political Bureau of the CPC Central Committee deliberated and adopted *The Outline of the “Healthy China 2030” Plan*, which raised the “Healthy China” to the level of the national strategy for the first time, and also implemented this strategy into a specific program of action. In 2018, the State Council established the National Health Commission as the main body to further promote the implementation of the Healthy China strategy.

The Healthy China strategy is an important part of the national strategic system and occupies a distinct and important position in China's four comprehensive strategic layout. It is not only concerned with building a well-off society in an all-round way, but also related to deepening the reform of the medical and health system, involving many fields such as economy, culture and society^[3]. The Healthy China strategy is a systematic project for building a well-off society in an all-round way. It is the highest requirement for promoting the reform of “three medical linkage” and the highest goal of building a “multi-level mixed” well-being^[4].

2.2. National mental health status

With the continuous advancement of industrialization and urbanization in China, the lifestyle has changed from traditional to modern, which brings great challenges to the mental health of the public. The results of the national epidemiological survey of mental diseases show that the prevalence of mental diseases in China has increased year by year since the 1980s^[5,6]. Poor mental health will not only bring pain to patients and their families, but also cause a heavy disease burden to the whole society. Taking Beijing as an example, the total disability adjusted life years (DALY) of the resident population of the region in 2011 was 10,140,000 person-years, which is higher than the disease burden caused by common diseases such as coronary heart disease

(92,000 person-years) and myocardial infarction (64,000 person-years). Mental health problems such as schizophrenia, emotional disorders and substance abuse have become serious public health problems that affect residents' physical and mental health and hinder economic and social development.

However, the medical treatment rate of the public due to mental health problems in China is very low^[7]. There are many reasons for public mental health problems. Among them, lack of mental health knowledge, inability to correctly identify mental diseases and subjective unwillingness to seek help are important factors that hinder the public from seeking professional mental health help^[8]. The formation of "unknown illness" or "unwillingness to get treatment" seriously restricts people's demand for mental health service, and hampers the development of mental health.

2.3. Current situation of social mental health service system

Building and improving the social psychological service system is not only the due meaning of improving the level of public mental health and promoting the Healthy China strategy, but also an important way to realize this strategy. However, China's mental health service started late, and the service mode and service technology suitable for national conditions are still in the exploratory stage. The strength of community mental health service is weak, the access threshold of employees is low, and the material support and institutional support are not enough^[9,10]. Therefore, the social psychological service system is difficult to fully meet the needs of the public to improve their mental health. How to provide mental health services according to the needs of the public is one of the key problems to be solved in the construction of social psychological service system. Therefore, to carry out research on national mental health literacy and then find strategies to optimize mental health literacy is an important entry point to solve this problem.

3. Significance of Carrying Out Research on Optimizing National Mental Health Literacy

Based on the above, it can be seen that promoting the public to carry out effective psychological help seeking and optimizing the existing mental health service model are the two core problems to be solved to strengthen mental health services and improve the level of public mental health. Both of these two problems are closely related to the concept of mental health literacy.

3.1. Connotation of mental health literacy

The concept of mental health literacy was first proposed by Jorm and his colleagues, and it was translated into mental health knowledge or awareness of mental health knowledge^[2]. Mental health literacy is developed from the concept of health literacy. It includes five parts: the knowledge of preventing mental disorders, identifying the symptoms of mental disorders, the relevant knowledge of obtaining psychological help and treatment, the self-help strategy when dealing with mild symptoms of mental disorders, and the first aid skills for individuals in mental health crisis or mental disorders.

Mental health literacy is an important factor affecting individual mental health, and its impact on mental health is mainly realized through the following three ways: first, high-level mental health literacy can enhance the ability to identify, diagnose and prevent mental diseases^[2]; second, low-level mental health literacy will reduce the timeliness of individual psychological help seeking and the effectiveness of mental health services^[11]; third, lack of mental health literacy will increase the risk of mental illness or other long-term adverse

outcomes^[12].

3.2. Significance of carrying out research on optimizing mental health literacy

On the one hand, the research on optimizing national mental health literacy is the inevitable requirement of theoretical development. On the other hand, it also has great practical significance. Next, this paper will briefly describe its five significances from the individual to the institutional level.

3.2.1. Promote the formation of effective demand for psychological help and improve the level of public mental health

Firstly, carrying out mental health education according to the research results of mental health literacy will help to improve the public's knowledge level of identifying mental diseases and increase their understanding of seeking professional mental health services. As mentioned above, at present, the demand for public mental health services in China is on the rise, but the subjective demand of the public is difficult to transform into effective demand. On the one hand, this is due to the public's lack of knowledge to accurately identify mental diseases. On the other hand, it is due to insufficient understanding of how to obtain professional services, and insufficient understanding of the importance of mental health, the effectiveness and professionalism of mental health services. Mental health literacy covers the knowledge elements that help individuals correctly identify mental diseases and obtain formal mental health services. Therefore, the research on mental health literacy can solve the above two problems.

Secondly, the publicity of popular science knowledge of mental health literacy helps to reduce the stigma of mental diseases. The study found that the public stigma of mental illness restricted patients from seeking professional help^[12]. The self-stigma of individuals suffering from mental diseases will reduce their willingness to actively seek help for mental health. The stigma of some treatment methods (such as drug therapy) will reduce the willingness and compliance of patients to use this method^[13,14]. The concept of mental health literacy includes the dimension of the public's attitude towards mental diseases and patients with mental diseases. Understanding the public's attitude will help to reduce the stigma of mental diseases, so as to improve the public's willingness to seek help for mental health and improve their mental health level.

3.2.2. Enhance cultural confidence and build the theory of mental health literacy of contemporary Chinese people

Mental health literacy is a concept born in the background of Western culture. Social and cultural elements play an important role in the construction of the concept of mental illness.

First, different cultural groups hold different views on mental illness and health^[15]. For example, the Native American Anishinabek people use "mnobmaadis" to represent the concept of "health", which means the balance of body, emotion, psychology and soul; in contrast, the nation defines the unbalanced and disharmonious living state as disease^[16]. On this basis, different cultural groups also have different ways of representation and help seeking for mental diseases. For example, Chinese people often use somatization to represent psychological problems; in terms of help-seeking methods, in the cultural language of China and even the whole of Asia, the ways of praying for God, worshipping Buddha and taking traditional Chinese medicine are regarded by the public as effective ways of help-seeking^[17].

Secondly, different cultures have different definitions of "what is the behavior and emotion in line with social norms"^[18]. For example, in the North American Indian community, members are acquiesced or even

encouraged to express the emotion and behavior of anger. However, this emotion is taboo in the mainstream culture of North America. Expressing similar emotions will be regarded as “disorder”. Therefore, the diagnostic criteria of psychological diseases also have a profound cultural brand. The current diagnostic criteria have been questioned by many scholars because of its Eurocentrism and cultural inequality^[19].

It can be seen that psychological diseases are not only reflected in “disease” and “non disease” in the sense of psycho-epidemiology, but also reflected in “adaptation” and “inadaptability” in the cultural level. Misappropriating a series of Western concepts and tools on mental health literacy without correction will cover up the elements of psychological diseases and psychological healing with local cultural characteristics, and dispel the cultural significance of psychological symptoms. Therefore, to carry out the research on mental health literacy in contemporary China, it is necessary to trace the origin, re-explore the concept of mental illness and help seeking under the local cultural background, and put forward the core concept and measurement tools of mental health literacy with cultural adaptability.

General Secretary Xi once pointed out that “only by taking the reality of our country as the research starting point, putting forward the theoretical viewpoints with subjectivity and originality, and constructing the discipline system, academic system and discourse system with their own characteristics, can the philosophy and social sciences of our country form their own characteristics and advantages.”^[20] Therefore, based on the current society, studying the mental health literacy of local people will help to rediscover the disease view and help-seeking view of mental diseases rooted in China, understand the understanding mode of “mind” and “psychological phenomenon” in China’s traditional culture, further understand the effective healing elements of local psychotherapy means, and establish a localized psychotherapy theoretical system in line with the mental health literacy of Chinese people.

3.2.3. Guide the supply side structural reform of mental health services and promote mental health equity

The Outline of “*Healthy China 2030*” Plan clearly points out the need to “promote the supply side structural reform of health services”^[21]. As for the field of mental health services, China started late and the localization level of psychological counseling is low. The mental health service model and service technology suitable for China’s national conditions are still in the exploratory stage. The two main bodies of mental health service, the government led service body and the market guided service body, have not realized full coordinated operation.

Mental health inequality has emerged in China. Mental health inequality refers to the difference in mental health status among groups due to socio-economic factors^[22]. When discussing this topic, two issues have attracted the attention of researchers at the same time: (1) due to the socio-economic differences among groups, there are differences in the quality of mental health services available; (2) different groups showed different mental health status.

At present, in terms of mental health service resources and talent training, the allocation of service resources is biased towards cities and economically developed areas in the East; at the institutional level, the allocation of mental health service resources is biased towards medical and health institutions and colleges, and the mental health service resources of grass-roots communities are relatively scarce^[10]. The group of psychological counselors and psychotherapists is not strong enough, and their degree of specialization is not high. The number of counselors with qualifications of consultation, treatment and supervision is small, and the service is expensive. Most practitioners in related fields have medical and psychiatric backgrounds, and relatively few have psychological and social work backgrounds. An effective supply of mental health services

has not yet been formed. The prevalence of mental diseases varies greatly among groups with different socio-economic status. Studies have shown that the incidence rate of socioeconomic status and emotional disorders is negatively correlated^[23,24]. Among the groups with lower socio-economic status, personality disorders and drug abuse are also more frequent^[25,26]. The research on national mental health literacy will help the country to implement and improve the structural reform of the supply side of mental health services and make mental health services meet the needs of the public.

3.2.4. Reduce the burden of mental illness and help build a moderately prosperous society in all respects

The Healthy China strategy is an important part of the national strategic system. In the strategic layout of “The Four-Pronged Strategy”, the promotion of Healthy China strategy is related to building a well-off society in an all-round way. “Without the health of the whole people, there will be no comprehensive well-off society.” At present, the prevalence of various mental diseases in China has increased, and the disease burden of some mental diseases has exceeded that of typical chronic diseases such as cardiovascular diseases. Disability and premature death caused by mental illness have brought serious negative spillover effects to the social economy.

Improving national mental health literacy is one of the important ways to improve the level of public mental health. Research shows that mental health literacy will affect the individual’s ability to identify and diagnose mental diseases^[2], the ability to use reasonable mental health help seeking means to help themselves^[8], the ability to communicate with mental health service personnel^[27,28], and finally have an impact on the individual’s mental health level. At the same time, low mental health literacy itself is a risk factor for some mental diseases such as depression^[29]. Therefore, promoting the research on mental health literacy will help to improve the national mental health level, alleviate the disability results caused by mental diseases, and reduce the burden of mental diseases in the whole society.

3.2.5. Help build a psychosocial service system

General Secretary Xi pointed out in the report of the 19th National Congress of the Communist Party of China: “Strengthen the construction of social psychological service system and cultivate a social mentality of self-esteem, self-confidence, rationality, peace and positive progress”^[1]. On November 16, 2018, the National Health Commission, the Central Political and Legal Commission, the Propaganda Department of the CPC Central Committee and the Ministry of Education jointly issued the *Pilot Work Plan for the Construction of the National Psychosocial Service System*. It is pointed out that the working goal of the social psychological service system is that “by the end of 2021, the pilot areas will gradually establish and improve the social psychological service system, integrate mental health services into the social governance system, and integrate mental health services into the evaluation index system of healthy cities”^[30]. It can be seen that the construction of mental health service system is an important part of the establishment of social psychological service system. As mentioned above, the research on national mental health literacy is helpful to understand the current situation of people’s mental health literacy in China and the effective healing elements in China’s local psychotherapy means. On this basis, it puts forward the strategies to optimize mental health literacy, so as to provide the basis for establishing a corresponding mental health service model. Therefore, the research on national mental health literacy is of great significance to the fundamental work of constructing the national social psychological service system.

4. The Basic Approach to Carry Out the Research on National Mental Health Literacy

Mental health literacy is an important variable that combines national strategy (Healthy China strategy), social policy (construction of social psychological service system) and people's well-being (improving residents' mental health level). It is also the core factor to solve the "unknown illness" and "unwillingness to get treatment" of Chinese residents in terms of mental diseases. As mental health literacy is a comprehensive and complex concept, it is involved in the research of psychology, psychiatry and psycho-epidemiology. This field is changing from psychiatry and psycho-epidemiology to psychology and sociology. Among them, the re-conceptualization of mental health literacy against the background of contemporary China is one of the core tasks of current psychological path research.

4.1. Research approaches of psychiatry and psycho-epidemiology

Mental health literacy is called "mental health knowledge awareness" in the field of psychiatry and mental epidemiology. Researchers in this field mainly use the questionnaire survey method to understand the people's awareness of mental health knowledge, and conduct simple descriptive statistics and inter group difference test on the survey data, so as to judge the awareness rate of mental health knowledge of some specific groups in this area and the differences of mental health knowledge among different groups. In terms of survey tools, domestic researchers mainly use research tools such as the *Mental Health Service Demand Questionnaire* issued by the World Health Organization, the *Questionnaire on the Awareness Rate of Mental Health Knowledge of Ordinary Citizens* issued by CDC mental health center of Shanghai, and the self-made questionnaire^[31,33]. In terms of subject selection, these studies mostly take the city as the unit to conduct a sampling survey of urban and rural residents in the city. In terms of survey content, the researchers mainly focused on the needs of residents in a certain area for mental health services, the mastery of mental health science popularization knowledge, the ability to identify symptoms of mental illness and the ability to deal with dangerous situations caused by mental illness.

The advantage of this research method is that it can fully understand the current situation of mental health literacy of urban and rural residents in different regions, as well as the differences and characteristics of subjects with different demographic characteristics in etiology, disease identification, treatment and prevention, and the ability to obtain mental health service resources. Tracing the origin of the above research results can further explore the root causes of this mental health difference, and then carry out mental health knowledge popularization and provide mental health services according to the characteristics of different groups.

Limited by the research paradigm and research purport of this discipline, the research of psychiatry and psycho-epidemiology has the following deficiencies: (1) the processing and interpretation of data are relatively superficial, and most studies focus on describing phenomena and comparing the differences between groups. As for the deeper reasons behind the phenomena and differences, they are more put forward in the form of common-sense assumptions, and lack of more in-depth research and thinking. (2) There is a lack of large-scale nationwide survey, and the research results can only reflect the current situation of mental health literacy of residents in a certain area. Therefore, the research conclusions are difficult to be popularized nationwide. At the same time, there is a lack of unified standards for measurement tools and evaluation standards, so it is difficult

to make cross-region horizontal comparison of research results. (3) The localization of measurement tools and research methods is insufficient. The current measurement tools used in China are based on the operational definition of the concept of “mental health literacy” proposed by Western scholars, which is difficult to reflect the extent to which mental health literacy will be affected by socio-economic and cultural factors. In particular, in recent years, more and more scholars have noticed that the research on mental health literacy modelled on the paradigm of Western psycho-epidemiology has limited value in solving national mental health problems, so they focus on the local reconceptualization of mental health literacy, and develop research tools more suitable for measuring contemporary Chinese mental health literacy. This is also an important factor that urges the research in this field to turn from psychiatry and psycho-epidemiology to psychology and sociology.

4.2. Research path of psychology

According to the co-occurrence network analysis results of mental health literacy, it is considered that the discipline cooperation center in this field has been extended from traditional psychiatry to psychology^[34]. At present, the research on mental health literacy in the field of psychology in China mainly focuses on the following four aspects: overview research, research influencing factors of mental health literacy, intervention research and localization exploration.

The main purpose of the early summary research is to introduce the concept of mental health literacy and summarize the research progress of various dimensions within this concept^[35,36]. In recent years, the content of summary research is not limited to this. More scholars begin to pay attention to the details related to this field, such as the measurement technology of mental health literacy^[37], intervention methods^[7,38].

The research on the influencing factors of mental health literacy shows that individual mental health literacy is affected by demographic characteristics. Specifically, gender^[39,40], age, education level^[40], parents' education level^[40], and family socio-economic status^[40] will all affect individual mental health and nutritional level. Personality traits are also important factors affecting mental health literacy. Individuals with low neuroticism and low psychoticism have a more positive attitude towards professional help seeking^[36]. In addition, individuals who have been exposed to mental diseases have mastered more mental health-related knowledge and showed less stigmatization attitude towards patients with mental diseases^[41].

In terms of intervention research, according to different intervention contents, it is mainly divided into attitude intervention, knowledge intervention and behavior intervention. The intervention on attitude mainly aims to change the public's negative attitude towards patients with mental diseases and reduce the stigma of mental diseases, including the intervention on cognition, emotion and behavior^[42,43]. The knowledge-based intervention mainly aims to increase the public's knowledge level in the identification and prevention of mental diseases^[44]. The main targets of behavioral intervention include not only the general public, but also patients with mental diseases. Among them, the former study mainly explores the changes of the group's help seeking behavior or help seeking intention before and after the intervention^[45], while the latter study mainly aims to improve their quality of life and reduce the possibility of recurrence by intervening their medication compliance and medical compliance^[36].

Localizing the concept of mental health literacy is the focus of current domestic research. Localization work includes not only the localization revision of foreign measurement tools^[48], but also the reconceptualization research on traditional mental health literacy and the preparation, investigation and empirical research of measurement tools based on new concepts. Among them, on the basis of deconstructing the traditional concept of mental health literacy, reconceptualizing it is the main focus of discipline transformation in this field in recent years. Many scholars propose to expand the connotation and extension of

this concept in order to meet the new challenges in the field of mental health. The concept of mental health literacy should include beliefs, attitudes, behaviors and skills related to mental health and psychological help seeking^[46,47]. At the same time, due to the cultural differences between China and the West, Chinese scholars also pay attention to integrating the meaning of Chinese culture into this concept. Jiang *et al.* proposed adding the dimension of “self—others” to mental health literacy, that is, investigating the knowledge, attitude and behavior habits of helping others and self-help at the two levels of preventing and treating mental diseases and promoting mental health^[7].

Conflict of interest

The authors declare there are no competing interests.

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