

# Mental Health Care In China



# Figures

- In 2017, 4.2% Chinese suffered from depression (the Current prevalence rate of depression order is 2.1% in 2020)
- Comparing 17% adults experiences symptoms of common mental health problem in UK (Adult Psychiatric Morbidity Survey APMS, 2014)
- Suicide rates: China: 9.7 per 100,000 comparing 10.9 per 100,000 in UK (43.2%)
- **ONLY 25% participants have knowledge of depression (36.2% who self identified as having a mental health problem in UK)**

# Figures about Mental Health Care

- In UK, there are average 4.5 psychiatrists and 12.97 psychiatric nurse, but
- In China, 1.4 psychiatrists and 1.9 psychiatric nurses for every 100,000 people.
- Social workers: 52 registered social workers at Shenzhen (10 million population)
- Only 2.35% of China's Public Health is spend on Mental Health. (25% of public health is spend on Mental Health in UK, 2016)
- Less than 15% of China's population had insurance which covered Mental Health.
- Two-thirds of rural counties have no psychiatric beds at all.

# Laws



## AT LAST

In 2012, China passed its **FIRST Mental Health Law**

- The bill called for more facilities, an increase in their staff and efforts to raise awareness of the issues in education and workplace settings.
- It advised patients can be detained against their will.
- Only those at risk of harming themselves or others are eligible for compulsory inpatient treatment.
- However, there is no right to a legal hearing such as a mental health tribunal and no guarantee of legal representation.

# 686 program

- In December 2004 the project received its first financial allotment of 6.86 million Renminbi (\$829,000 in 2004 dollars).
- It's designed to improve access to evidence-based care and to promote human rights for people with severe mental disorders. As part of the 686 Program, teams “unlocked” and provided continuous mental health care to people with severe mental disorders who were found in restraints and largely untreated in their family homes.
- The program has developed an increasingly clear model of services that move mental health care out of the specialty mental hospital into community settings, linking provincial and district hospitals to township or neighbourhood level health clinics which provide outreach services into the community; carrying the services directly into villages and urban communities. This model is quite different than older models for providing mental health services in primary care settings.



**WARNING:**

The following images  
contain upsetting scenes..

please look away





# “牢笼”七年

存在

腾讯公益慈善基金会出品

第132期

摄影报道/三宝



STEVEN/GETTY IMAGE



# WHY?

- Stigma
- Financial difficulties
- Lack of effectiveness of medication treating mental disorder patients
- lack of education
- Cultural, religion beliefs

# However

1. 266 patients unlocked from 2005 in “686” demonstration sites across China were recruited in Stage One of the study in 2009. In 2012, 230 of the 266 cases were re-interviewed (the Stage Two study).
2. The program of “unlocking” was focused on providing free antipsychotic medications when they admitted to psychiatric units and assessed.
3. The most patients complied with treatment and showed great improvements. Their functioning improved and the family burden also lightened significantly.
4. 92% of those unlocked and entered into continuous treatment and remained free of restraints.

# Carers





# Psychiatric hospitals (Ankan yuyan)



# Continues...



It's not all  
doom and gloom



# Voluntary organisation

## Project of Sunshine



# Recovery



# The Future

1. The goal of training 3 million social workers by 2020.
2. By 2020, there will be Mental Health Social Welfare Centre in each city.
3. By 2020, there will be at least one community-based rehabilitation institution for mental disorder patients over 70 percent of counties.

***For the memory of***

***Xiu Bo***

***(1970-2002)***