

Responsiveness essential for mental health care in Iran

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The Iranian mental health system should pay more attention to responding to non-medical expectations of service users. The measurement of responsiveness can inform us how well the mental health care system interacts with the population. These are the conclusion drawn in a dissertation by Ameneh Setareh Forouzan at Umeå University in Sweden.

"Our results showed that the concept of [responsiveness](#) is applicable to [mental health](#) services in Iran. Respect for service users' dignity and confidentiality were reported as good performing domains while the domains of autonomy, quality of basic amenities and prompt access to care performed poorer," says Ameneh Setareh Forouzan at the Department of Public Health and Clinical Medicine at Umeå University.

To relate people's experiences to a common set of standards, the concept of responsiveness, was introduced by the World Health Organization (WHO) in 2000 as people-centred care is a key component in the quality of health care.

In order to achieve highest attainable level of health and to establish a more coordinated approach to healthcare, the Iranian government created a unique structure based on the Alma Ata's [primary health care](#) strategy. The primary health care model was established in the 1980s emphasizing community participation and intersectoral cooperation to serve the needs of the population. The integration of mental health into the existing public healthcare network was initiated in 1986.

Although there have been some efforts to evaluate the mental health system performance after its integration, less attention has been paid to the assessment of the quality of care. This study provides evidence on the responsiveness of the mental healthcare system in Tehran, the capital of Iran, in accordance with the WHO responsiveness concept.

Ameneh Setareh Forouzan's research has shown that responsiveness was considered one of the [health system](#) goals alongside with improving health and fair financing. It measures what happens during people's interactions with the system. Responsiveness domains include dignity, autonomy, choice of health care, clear communication, confidentiality, quality of basic amenities, access to social support, and prompt attention. The chronicity of mental illness as well as the stigma still attached to mental health, makes the role of responsiveness vital for [mental health care](#) systems.

"Measuring responsiveness routinely could support the mental health care systems to become more patient-oriented and improve the respect for patients," continues Ameneh Setareh Forouzan.

"In the future, mental [health care](#) reforms should be orientated towards domains that are high in importance, but low in performance such as attention and prompt access to care."

Provided by Umea University

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