

Features of Work of Psychologists with Different Age Groups

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ABSTRACT

The Gulbenkian Global Mental Health Platform and the World Health Organization have jointly created a series of thematic papers on current mental health issues. The topics were identified by the Platform's advisory and oversight committees and identified priority ways to improve significantly the global mental health situation. The topic of this article is in one line with the four key objectives of the WHO 2020-2030 Mental Health Action Plan. The topic of the article concerns the following important issues: strategies that can be implemented through health care in order to promote mental health and prevent mental disorders; strategies based on the health care system for the organization and provision of integrated care for patients with mental disorders and other chronic health conditions; innovative methodologies for the transition from institutional to community-based psychiatric care. "Social Determinants of Mental Health" is the topic of this thematic report. It was chosen to deepen our knowledge of the many interacting forces that shape individual and collective levels of mental health and well-being. Moreover, it helps to understand and identify actions that can be taken to improve and protect our mental health. The article describes how a risk factor in the early stages can affect mental well-being or predisposition to mental disorder after many years or even decades.

An important message is that actions and public policy to address existing mental health issues have to be universal and comprehensive, but at the same time proportionate to the need.

Keywords: Social and psychological assistance; social assistance; psychological assistance; forms, methods and directions of social and psychological assistance.

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INTRODUCTION

Mental health and some general mental disorders are largely due to the social, economic and physical environment which people live in. Social inequality is associated with an increased risk of many common mental disorders. Therefore, measures should be taken to improve the conditions of daily life before birth, in early childhood, at school age, during family formation and adult period, as well as in old age. This will provide opportunities both to improve the mental health of the population and to reduce the risk of mental disorders associated with social inequality. It is necessary to act properly and comprehensively in the society and on an as-needed basis. This paper highlights effective actions that help to reduce the risk of lifelong mental disorders at the community and national levels. It includes environmental, structural and local interventions. Such actions help to prevent mental disorders. They will effectively promote the mental development and health of the population.

LITERATURE REVIEW

A review of the scientific literature concerning social and psychological support for different age groups clearly shows the experts' worries about the existing problems in the protection of the mental health of the world's population. Ferrari, A.J. *et al* [4] in his article for "Plos Medicine" concerning the study of the Global Burden of Disease (GBD) emphasize the health effects of depressive disorders. According to estimates of Disability-adjusted life year (DALY), depressive disorders were the second leading cause of youth morbidity in 2010. Although, depressive disorders (DR) were not reported as the leading cause of death, the suicide rate due to DR was

about 16 million. Nearly 4 million patients with coronary heart disease suffered from DR. Ferrari, A.J. *et al* [4] emphasize the importance of giving this issue a high priority in health care. Deputy Director-General. She is concerned about social inequalities in health. She writes a lot about social determinants and inequalities in health in the final report of the WHO European Region. The author emphasizes the urgent need to promote and protect health, especially for the most vulnerable [1]. Sir Marmot M. is the co-author of the report. He writes that social injustice kills people on a large scale. Marmot M. [3] concluded that differences in health were determined by the conditions in which people are born, live, work and their age. There has also been an injustice in material wealth, power and resources that affect daily life. The professor identified a key goal to address the determinants of health by involving political and social authorities, civil society and academia [6]. Gray Charlotte N.B. *et al.* [23] in article, also argues that social injustice, poverty and unfavorable living conditions have a profound effect on well-being and quality of life, on physical and mental health. Poverty and mental health are closely linked [20]. This is especially true for developing countries. Therefore, drawing the attention of all politicians to the problem of mental disorders is a critical task. Managers at their work can have a qualitative impact on the problem of DR in employees. Everything that happens in the workplace (and this is a huge period of time) affects the mental health of employees and their ability to work. Therefore, employers should be interested in improving working conditions and the atmosphere in the workplace [3].

Studies that were conducted by Rahman A., *et al* [10] on the methods of helping women in the perinatal period have shown improvements in the mental health of pregnant women and women who have recently given birth. The findings suggest that the correlation between emotional well-being and maternal health and infant development is twofold. Trials have improved the mother-child relationship and improved the health of the mother. On the other hand, research has shown a close link between a woman's material, social and spiritual well-being and her psycho-emotional state and the development of her child [11].

METHODS

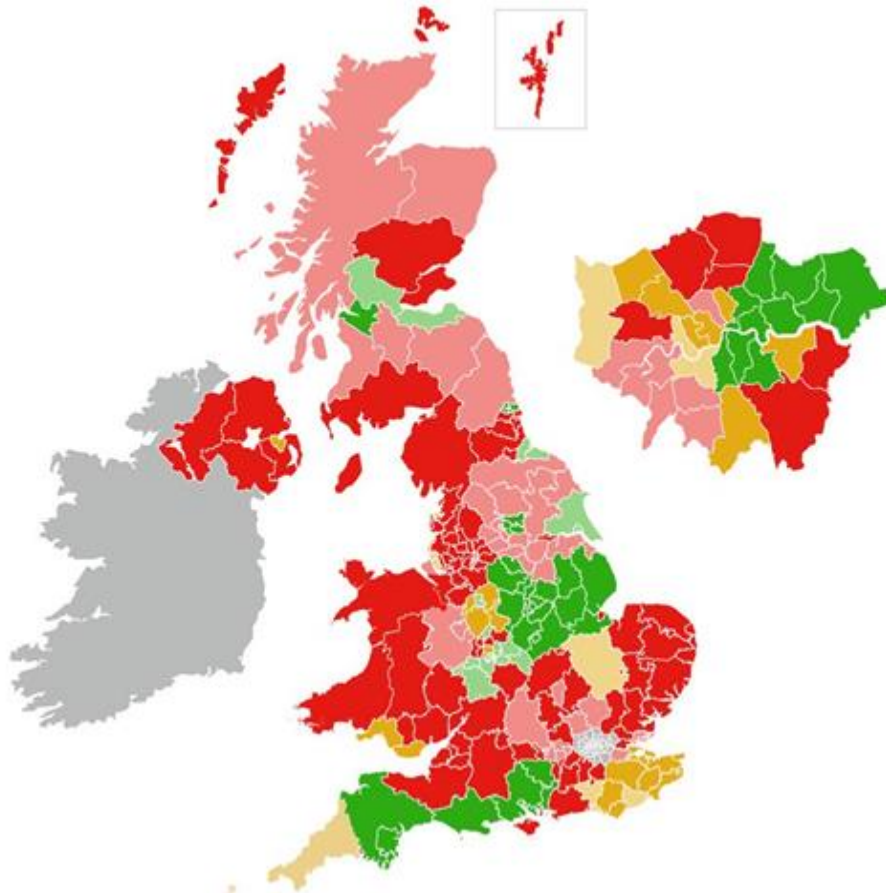
We have addressed two key issues based on analyzes conducted by the WHO Commission on the Social Determinants of Health [23], the Marmot Review in England, WHO review of the social determinants of health and the health gap, as well as WHO's innovative reports on mental health promotion and mental health prevention, the study by the Institute of Health Equity and a number of other well-researched mental health resources: 1) the social determinants of general mental disorders; and 2) action on social determinants that can prevent mental health disorders and / or improve the mental health of the population. Our work was carried out in collaboration with the WHO Department of Mental Health and Substance Abuse (MSD), as well as with the participation of an international group of experts.

RESEARCH RESULTS

There is a two-way relationship between mental disorders and socioeconomic status: mental disorders lead to a decrease in income and employment, which creates poverty and increases the risk of developing mental disorders. Patterns of inequality in social distribution arise before adulthood. A systematic review of the scientific literature has shown that the prevalence of depressed mood or anxiety was 2.5 times higher among young people at the age of 10-15 with low social and economic status than among young people with high social and economic status. The experience and influence of social determinants vary depending on life. They especially affect people of different ages, genders and life stages. WHO emphasizes the need to create approaches to understanding and overcoming inequalities in mental and physical health throughout life? Strong evidence shows that a lot of mental and physical health conditions in later life arose at an early age [3].

We need to analyze the way of life. After that it becomes clear that the influences that are crucial at each stage of life can change the vulnerability and impact of harmful processes or stressors. Social organizations and institutions such as preschools, schools, labor market and pension systems have a significant impact concerning opportunities that allow people to choose their own way of life. These social organizations and institutions are extremely different. Their structure and influence depend on national and transnational policies to a greater or lesser extent.

Figure 1. Prevalence of mental health teams in different countries.



Note. Red areas - there is no team of specialists. Pink areas - there is a primitive level of support. There are only some groups of specialists, but currently it does not correspond to the national standards and needs to be expanded. Yellow areas - there is a basic level, but nowadays it does not correspond to national standards and the situation needs to be improved. In green areas, women and families can have access to treatment, social and psychological care that meet national standards.

Source: Mental Health Foundation, 2016 [3].

The prenatal period has a significant impact on physical, mental and cognitive outcomes at an early age and throughout life. Maternal health is particularly important. Bad environmental conditions, ill health and nutrition, smoking, alcohol and drug abuse, stress and high physical activity can adversely affect the development of the fetus and its subsequent life after birth [4].

Kids with poor mothers are more likely to be disadvantaged even before birth. They might have poor nutrition, too intensive exercise and stress during pregnancy. Newborns are more likely to be underweight. A systematic review and meta-analysis of 17 studies of depressive symptoms in mothers and children under 9 in developing countries have shown that children from to have depression later in life. Analysis of four longitudinal studies has shown that the risk of underweight and stunted growth was approximately doubled among children of depressed mothers [6].

The scale of the problem of perinatal depression among mothers in developing countries is significant. A systematic review of research in low- and middle-income countries shows that general perinatal mental disorders among women account for 16% before birth and 20% after childbirth. Common risk factors for perinatal disorders include:

- social and economic instability;
- unwanted pregnancy;
- early pregnancy;
- unmarried status;
- lack of care and support from an a partner (spouse);
- unfriendly mothers-in-law;
- experiencing violence by an intimate partner;
- insufficient emotional and practical support;
- In some cases - a woman's mental health.

Difficult conditions at an early age are associated with a higher risk of mental disorders. Family and quality of parenting factors have a significant impact on mental and physical health risks. The London Institute of Health Equity analyzed the factors influencing early childhood. This Institute has found that lack of secure attachment and conflict negatively affect social behavior, educational outcomes, employment status, and children's mental and physical health in the future [16].

The impact of numerous risks is particularly detrimental as the consequences accumulate. Children from lower social and economic groups are less likely to experience the conditions for optimal development. An analysis from the United Kingdom has shown that family income can be inversely related to social and emotional difficulties among children aged 3 and 5 years. However, the impact can be offset by protective parenting, such as good social and emotional interaction [19].

Still, the first years of mental development are very important for the rest period of life. Continuation and appropriate forms of support are needed throughout childhood and adolescence. Education is important in building emotional resilience. It influences a number of later life outcomes that increase the mental risks of the disorder - such as employment, income and community

participation. Schools are also important as institutions capable of conducting educational programs. As in childhood, adolescents from the poorer families are likely to be more vulnerable to various life factors.

Poverty makes it difficult to create conditions at home that can be conducive to learning. Overcrowding is a huge problem of our modern world. Stable parental work not only reduces poverty, but also implements family habits. Such work ensures that children start to understand the role of employment in adulthood. Schools can play a key role in working directly with children. They can also work with other services, provide support and advice to parents on parenting strategies and potentially support their readiness to work or learn skills [13]

The Global Burden of Disease Study project points to a significant and growing level of mental disorders among the adult population worldwide [4]. Depression is the main cause of various restrictions in life among women. Anxiety ranks the 6th on this list. Depression ranks first among men. Mental disorders because of drug have the 7th place, disorders because of alcohol usage - 8th and anxiety - 11th.

It is estimated that one in four or five young people (aged 12-24) will suffer from mental disorders during the year, regardless of region of residence. Many mental disorders are undiagnosed and untreated worldwide. In England, one in four people suffers from a mental disorder during their lifetime. 17.6% of adults experience at least one of the most common mental disorders. 17% of adults have minor mental disorders, while 5% of adults suffer from a critical phase psychosis. 24% of adults drink too much alcohol. Alcohol consumption is negatively linked to the mental health of the population in many countries around the world. Such consumption increases the possibility to suffer from alcoholism, depression and suicide, as well as other harmful effects such as poor physical health, accidental injuries and domestic violence. There is growing political debate and political movement to reduce alcohol consumption in many countries, including Britain, Australia, Malawi, Zambia, Scotland and Russia.

The Scandinavian countries have the lowest levels of mental disorders among the elderly, followed by Western European countries. At the same time, the elderly in Italy, Greece and Spain have the highest levels of mental disorders. Such results in Europe are partly related to the level of government support and services and to the greater provision of mental health services [5]. Unlike many other countries, where aging is associated with an increased risk of depression and other common mental disorders, Japan has a lower rate of depression among people over the age of 65 compared to younger age groups. Social isolation among the elderly is especially significant (especially for women). Social isolation increases the risk of mental disorders. Aging studies in England show that at least 10% of older people are socially isolated. These indicators are even more pronounced in people older than 75 years. There is a clear link between loneliness in the elderly and the symptoms of depression, poor mental health and well-being, alcoholism, suicidal ideation and mortality.

Table 1. Number of older people who experience anxiety or depression.

Age	% feelings of anxiety or depression
50–54 years	22%
55–59 years	21%
60–64 years	16%
65–69 years	14%
70–74 years	15%
75–79 years	17%
80 years and older	20%

Source: Mental Health Foundation, 2016 [3].

DISCUSSION

Protective factors include the availability of quality education and educational work, the availability of steady work. It is extremely important to be inseparable from society and have a reliable intimate partner. Professor Atif Rahman and his colleagues at the WHO estimated that reducing maternal depression in Pakistan by 25%, 50% or 75% would reduce the underweight of children by 7%, 26% and 36%.

A large body of research has emphasized the importance of maternal support. This will avoid an increase in infant mortality in many cases, growth retardation and malnutrition of children, overweight children, lower vocabulary tests, behavioral problems, emotional problems, lower cognitive performance, mental health problems and infections [19].

The United States has a strong evidence base, including studies that are examining the effectiveness of preschool interventions for young children living in low-income and long-term poverty. Perry's Preschool Education Project "High / Scope", "Nurse-Family Partnership" and the "Incredible Years" series are three examples of programs that have made a significant contribution to the evidence base [10]. These programs improve pregnancy outcomes and children's readiness for school, academic achievement, economic success and mental and physical health outcomes.

In addition, the "Incredible Years" programs have been implemented in 20 countries and territories, including Denmark, Finland, the Occupied Palestinian Territory and the Russian Federation.

The "Mother2Mothers" program conducts early childhood interventions in the KwaZulu-Natal region of South Africa to help communities to develop support groups. The task

is to provide education and psychosocial support to pregnant women and newborns living with HIV / AIDS, especially to create access to all medical services [24].

The evaluation of the study has shown that participants had greater psychosocial well-being, made greater use of the services available to them and received better results compared to women who did not participate in the program. In addition, the evaluation has shown that women in labor underwent more positive changes than pregnant participants as a result of increased contact time with program staff [7-8].

Mental health activities for children and adolescents are usually carried out in schools. Schools play an important role in education and development in terms of social, emotional, academic and cognitive abilities. The effects of school exposure have a good effect on children's mental health in the short and long term. The actions to support mental health and address mental disorders in children and adolescents at school have been implemented in a number of countries. This includes a number of school-level interventions in low- and middle-income countries. These countries are affected by war and violence, where the risks of mental health problems especially high [22].

The systematic analyzes of school-based programs show that the vast majority of them have used a universal (school) approach to maintaining mental health in order to achieve optimal impact. These approaches usually include strengthening the school spirit, communication with parents, special teacher training and parent training. The social and emotional learning program in a number of states across the United States is a good example of such a school program. The program helps to maintain relationships that make learning challenging, interesting and meaningful. At the same time, this program develops

children's social and emotional skills and reduces the risks of unstable behavior. Adult mental disorders affect not only themselves. They also affect children, partners and other people, communities, economic development and future generations. Unemployment and underemployment are particularly strong risk factors for mental disorders. A recent report from the Institute for Health Justice concerning the effects of the economic downturn on health outlines evidence of a close link between job loss and symptoms of depression and anxiety. These consequences are especially obvious for the unemployed for a long time [11]. Strategies that help to reduce long-term unemployment will be especially important to reduce the risk of mental illness in adults.

Poor quality employment (working without official employment or only on a short-term contract, working with low wages and low levels of job security) has a significant detrimental effect on mental health. And on the contrary, job security and decent working conditions support good mental health [7].

So, employers play a significant role in the potential reduction or exacerbation of mental disorders among the working age population and should introduce better employment conditions for workers. Low incomes, debt levels and relative poverty are clearly associated with the risk of mental disorders. Strategies and ambitions that help to provide a sufficient income for a healthy lifestyle are important [20].

The introduction of affordable financial services plays a significant role in overcoming poverty, empowering people (especially women) and communities, as well as reducing poor physical health and improving mental health among the most disadvantaged. The workplace is increasingly seen as a key environment for stressors to intervene. Mental and physical health can be improved through simple methods.

Employers who promote actions such as increased workplace control, job restructuring, and reduced demands can have a positive impact on mental health by reducing stress, anxiety and depression. They can increase self-esteem, job satisfaction and productivity [3].

Systematic studies suggest that techniques that prolong and / or improve social activity in the elderly, life satisfaction and quality of life can significantly reduce depressive symptoms and protect against risk factors such as social exclusion. All research show that there are effective programs and methods that can help to reduce social isolation. There are exercises, physical activity programs and programs that promote lifelong self-development [22].

CONCLUSION

Different groups of clients in the world have different susceptibility to mental disorders due to greater influence and vulnerability to difficult social, economic and environmental circumstances. Problems begin before birth and accumulate throughout life. Therefore, social assistance should be aimed at improving the conditions in which people are born, grow, live, work and grow older.

Actions that prevent mental disorders and promote mental health are an important part of efforts to improve the health of the world's population [23]. The key principle that follows from this article is the policy of universality. We need to help when it is necessary. It will not be possible to achieve the necessary reduction of mental health problems in society only by focusing on the most disadvantaged people. Risk factors and protective factors operate at several different levels, including the individual,

family, society, structure and population level. Social mechanisms and institutions, such as education, social care and work give people the opportunity to choose their own way of life. Good mental health is an integral part of a person's health and well-being. Mental health and mental disorders develop in different social, economic and physical conditions at different stages of life. Risk factors for many common mental disorders are closely linked to social inequality. The greater the inequality is, the higher the risk of mental disorders might be [24]. It is important to take steps to improve everyday life, from birth to early childhood, teen years and adolescence, family and career building, and older. Forms, methods and directions of social and psychological assistance at these stages of life would provide an opportunity to both improve the mental health of the population and reduce the risk of mental disorders that are associated with social inequality.

Epidemiological studies concerning the distribution of positive mental health in Europe have also been conducted. The results of the survey have shown significant differences in the mental health of the population between countries, as well as between men and women within countries. Deteriorating mental health has been found in women, poor groups and those who report weak social support.

Access to the natural environment and open spaces is also vital for good mental health. It is estimated that almost half of the world's population now lives in urban areas and has weak links with nature. Living in a countryside and doing activities such as walking, running, cycling, horseback riding and gardening has a positive effect on mental health. They also reduce stress, anxiety and depression.

However, in many low- and middle-income countries, people living in poverty are at greater risk of mental illness due to increased stress, social exclusion and lack of social capital, malnutrition and the effects of violence and trauma that are often overlooked by politicians. Social and psychological care strategies at the state level are likely to have a significant impact on reducing mental health problems and have the greatest potential to reach large groups of populations. A wide range of measures at the national level, including poverty alleviation and effective lifelong social protection, reducing inequality and discrimination, preventing war and violent conflict and promoting better working conditions, health care, housing and education can have positive mental health benefits. The main emphasis should be placed on:

- treatment of maternal depression;
- preschool development;
- family orientation (family members with mental disorders);
- anti-poverty programs;
- social protection of the unemployed;
- anti-alcohol policy.

Good mental health is an integral part of a person's health and well-being. Risk factors for many common mental disorders are largely related to social inequality. It is vital to improve the conditions of everyday life in order to reduce these inequalities and reduce the incidence of mental disorders in general.

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