

Comments on Rosenshein and Valentine, “[The Role of Primary Care Providers in Mental Health Care](#)” A Literature Review Submitted to the Myers-JDC-Brookdale/Brandeis Collaboration on Mental Health



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Basically, it is reasonable to assume that no mental-health system is able to care for all the people suffering from mental illness.

As the Brookdale studies show, patients often turn to primary care – their family physicians. Actually, virtually all patients in Israel see their family physicians for physical ailments as well. The reform has not caused patients to be referred to primary care for mental health; they have always been there.

Given this situation, optimally one should aim for a health system in which family physicians treat lighter cases, and cases requiring greater specialization or mental-health teamwork are treated at clinics intended for the purpose. To advance in this direction, the care of severe mental illness should be separated from the care of other mental illnesses. On the other hand, steps should be taken to strengthen the professional skills of primary physicians. The arrangement of situating psychiatrists in primary-care clinics has already reached a stage where it appears highly promising.

My criticism of the attached material is that the identity of the population under discussion is not always clear; who goes untreated, who is over-treated (always at the expense of the untreated). From my experience, it would appear that most of the severely ill in Israel are in treatment (needs to be checked), but the quality of care could improve. The care of lighter cases depends on financial status (private care), a tendency to overuse primary care, and the absence of a diagnosis and therefore of good treatment. To my mind, to link the two populations is to miss the different goals. Finally, there is a great deal of difference between Israel and the US in the structure of services, and caution must be exercised in drawing conclusions.

The views expressed here are the personal views of the author and do not necessarily reflect the position of the organization in which the author works or of the Myers-JDC-Brookdale Institute.