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Technological Applications

Mental health of urban population: a call to action

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ABSTRACT

Rapid urbanization across the globe significantly challenges the mental health of urban populations. This paper explores the intricate relationship between urban living and mental well-being, highlighting the urgent need for comprehensive research and precise interventions to counteract the negative impacts of urban life on mental health. It emphasizes the critical role of adopting a multidisciplinary and intersectoral approach, weaving together public policy, urban planning, community initiatives, and readily accessible mental health services. By focusing on the determinants of mental health in urban settings, such as environmental, social, and economic factors, the study advocates for strategies that improve access to green spaces, bolster social cohesion, and promote economic fairness. It also underscores the transformative potential of technology in making mental health services more accessible and the pivotal importance of interdisciplinary collaboration in navigating the intricacies of urban mental well-being challenges. This paper issues a call to action, urging policymakers, urban planners, and health professionals to place mental health at the forefront of urban agendas, thereby cultivating environments conducive to psychological well-being and effectively tackling the distinctive challenges of urban living.

Keywords: Mental health; Urban population; Mental well-being; Public policies

1 INTRODUCTION

Recent years have seen a growing recognition of urbanization's impact on mental health, reflecting the complex and deep-rooted challenges urban populations encounter. With the continued expansion of cities in terms of both size and quantity, it is crucial to understand the repercussions of this rapid urbanization on the mental health of individuals [1]. This recognition stems from the understanding that the increasing concentration of people, infrastructure, and activities in urban areas can 2



have pervasive impacts on the psychological functioning of individuals. Consequently, there is a pressing need for further research and action to mitigate any negative effects and promote positive mental health in the face of urbanization.

The contextualization of this issue is vital, considering over half of the global population now resides in urban areas – a number projected to rise in the coming years. Cities are hubs of innovation, economic opportunity, and social interaction. However, they are also stages for stress, pollution, social inequalities, and other conditions that may be detrimental to mental health. Moreover, modern urban life, with its fast pace and constant demands, presents unique challenges that can impact mental health in complex and multifaceted ways [2].

The significance of mental health in urban environments is underscored not only by the prevalence of psychological disorders but also by the impact of mental health on quality of life, productivity, and overall social well-being. Mental health disorders, including depression, anxiety, and stress, are becoming increasingly common among the urban population, affecting not just individuals but also their families, communities, and the socioeconomic fabric of cities. Furthermore, the unequal distribution of resources, opportunities, and mental health services in urban settings raises critical questions about equity, accessibility, and inclusion [3], [4].

This paper aims to conduct a detailed discussion of existing publications on urban mental health, highlighting emerging trends, predominant challenges, and potential opportunities for intervention and improvement. It covers a range of aspects, including the influence of urban environmental factors (such as noise, pollution, and population density) on mental health, the relationship between the social structure of cities and psychological well-being, and the role of public policies and community initiatives in promoting urban mental health.

By exploring these dimensions, the paper seeks to provide a holistic understanding of the factors contributing to mental health in urban settings, offering insights for researchers, policymakers, mental health professionals, and urban



planners. Highlighting areas requiring further attention and suggesting directions for future research and interventions, this study aims to pave the way for the creation of healthier, more resilient, and inclusive cities, where the mental health of all citizens is a central priority.

2 THEORETICAL FOUNDATIONS OF URBAN MENTAL HEALTH

Mental health, as a complex aspect of human well-being, extends beyond the mere absence of mental disorders. The World Health Organization (WHO) defines mental health as a state of well-being in which an individual realizes their own abilities, can cope with the normal stresses of life, work productively and fruitfully, and is able to contribute to their community [5]. This definition emphasizes not only the ability to perform daily tasks and work effectively but also the capability to form harmonious relationships, handle adversity, and contribute socially, portraying mental health as a vital resource for daily life rather than just the absence of disorders.

Furthermore, mental health is understood as a dynamic spectrum, influenced by a diverse set of socioeconomic, biological, and environmental factors. Contemporary understanding recognizes mental health's inherently interactive nature, where genetic factors, life experiences, social, and cultural environments intertwine to shape an individual's psychological well-being ^[6]. This holistic view highlights that mental health is more than disease absence; it's an essential life resource, an intrinsic capital that enables living a full and meaningful life.

In urban environments, mental health is shaped by various determinants interacting in complex ways. These include environmental factors like air quality, the presence of green spaces, and noise exposure, as well as social and economic aspects, such as the quality of social relationships, job stability, and access to health and education services. Research shows that urbanization, despite offering socioeconomic improvement opportunities, is also associated with higher levels of stress, mood disorders, and anxiety. Therefore, understanding mental health determinants in urban



settings is crucial for developing effective interventions and public policies promoting healthy and inclusive urban environments [7].

The distinction between mental health in urban and rural environments is a field of study gaining prominence in scientific literature, reflecting growing concern over urbanization's implications for individuals' psychological well-being. Studies have shown that, in general, mental health can be adversely affected by city living conditions compared to rural environments. Factors like population density, noise and air pollution, and the rapid pace of urban life contribute to increased stress and the prevalence of mental disorders among city dwellers [1], [2].

Moreover, the complexity of social interactions in urban environments, along with the characteristic anonymity of these places, can lead to social isolation and decreased community support, which are fundamental for mental health maintenance. The lack of access to green spaces and opportunities for nature interaction in densely populated cities is also identified as compromising psychological well-being [8]. In contrast, rural environments, with lower population density and closer nature proximity, tend to promote better mental health, although they also face specific challenges, like limited access to specialized mental health services.

Therefore, it's essential that public policies and mental health interventions are tailored to urban environments' peculiarities, considering the unique challenges these spaces present. Strategies promoting access to green spaces, building cohesive communities, and strengthening social support networks can be effective in mitigating the negative impacts of urban life on mental health. Additionally, investing in accessible, high-quality mental health services that can meet the urban population's specific demands is crucial.

3 DETERMINANTS OF MENTAL HEALTH IN URBAN ENVIRONMENTS

Social factors play a crucial role in the mental health of urban inhabitants, notably social isolation, stigma associated with mental disorders, and limited access to mental



health services. Social isolation, intensified by life in large cities where relationships can be superficial and transient, heightens the risk of mental health issues such as depression and anxiety ^[2]. Moreover, the stigma linked to mental disorders may deter individuals from seeking help, further worsening their condition ^[1]. The difficulty in accessing mental health services, often due to resource shortages or overloaded existing services, contributes to a treatment and support gap for those in need ^[8].

Environmental factors, such as pollution, noise, and high population density, also significantly impact mental health in urban settings. Prolonged exposure to air pollution is associated with increased instances of depression and anxiety, while constant noise can lead to chronic stress and sleep issues ^{[9], [10]}. Furthermore, high population density can lead to feelings of overcrowding and stress, contributing to higher rates of mental disorders among city dwellers ^[3].

Economic factors, including employment, housing, and financial security, are key determinants of mental health in urban contexts. Job instability and financial insecurity create an environment of constant anxiety and uncertainty for many, directly affecting their mental well-being. Housing quality and affordability are also critical, as inadequate, or insecure housing can elevate the risk of mental health problems. Moreover, economic inequality, often more pronounced in urban environments, can exacerbate feelings of exclusion and lack of opportunities, negatively influencing mental health [11], [12].

Public policies must address these factors in an integrated manner, promoting strategies that strengthen social fabric, improve the urban environment, and ensure greater economic equity. Initiatives aimed at increasing access to green spaces, improving air quality, and reducing noise can significantly contribute to the mental well-being of urban citizens [8], [10]. Similarly, policies promoting social inclusion, access to quality mental health services, and housing security are essential for addressing the challenges posed by urban life [13].



Integrating these approaches requires multidisciplinary and intersectoral collaboration, involving not only mental health professionals but also urban planners, economists, and community leaders. Such cooperation can lead to the development of healthier, more resilient, and inclusive cities, where the population's mental well-being is a priority. Recognizing the complexity and interdependence of mental health determinants in urban environments, it is possible to advance towards a more equitable and healthy society for all.

4 IMPACTS OF URBANIZATION ON MENTAL HEALTH

Rapid urbanization has been linked to an increase in the incidence of mental disorders, a phenomenon observed worldwide. Research indicates that living in urban environments is associated with a higher risk of developing anxiety disorders, depression, schizophrenia, and mood disorders compared to rural populations [13], [14]. For instance, a meta-analysis by Peen et al. (2010) [14] found that mental disorder prevalence in urban areas is significantly higher, with depression rates about 39% higher compared to rural areas.

Moreover, urbanization not only raises the prevalence of known mental disorders but also amplifies risk factors associated with these conditions, such as social isolation, stress, noise pollution, and environmental pollution. In Lederbogen et al. (2011) [15], they showed that individuals raised in cities exhibit higher activity in brain areas associated with stress processing, suggesting greater vulnerability to psychiatric disorders. This highlights the complex interaction between the urban environment and mental health, indicating that exposure to certain urban life aspects can alter brain physiology in a way that predisposes individuals to mental disorders.

Social structure and community cohesion significantly influence adolescent mental health. Research by Aneshensel and Sucoff (1996) [16] demonstrates that adolescents in low socioeconomic neighborhoods in Los Angeles are more exposed to environmental dangers like crime and violence, which escalates their risk of depression, anxiety, and behavioral disorders. However, social cohesion within a neighborhood can



buffer the adverse effects of structural disadvantages on adolescent depression [17]. Further studies show the preventative role of family structure and social integration in youth violence, where adolescents in neighborhoods with fewer single-parent families and higher family integration exhibit reduced violent behaviors [17], [18].

Population density and urban life quality are also critical factors. Studies suggest that in cities with high population density and low quality of life, the negative effects on mental health can be even more pronounced. The lack of green spaces and recreational areas, along with constant exposure to noisy and polluted environments, significantly contributes to increased stress and anxiety among urban residents [2], [8], [10], [15]. Housing quality, access to mental health services, and the level of social cohesion within urban communities are other factors influencing the incidence of mental disorders [2].

Unemployment and economic crises significantly impact mental health, especially in terms of short-term mental health risks and problems. The relationship between unemployment and mental health has been extensively studied, and the findings consistently indicate that unemployment is associated with a range of adverse mental health outcomes. The evidence suggests that unemployment can lead to increased anxiety, mood disorders, and suicidal behavior, with men and young adults being most severely affected [19], [20], [21]. Education and social support may buffer these negative outcomes, highlighting the complex interplay between unemployment, societal factors, and individual mental health [21].

Therefore, it is vital that public policies and urban interventions consider the impacts of urbanization on mental health. Developing green spaces, promoting social cohesion, and facilitating access to mental health services are strategies that can mitigate the negative effects of urban life on mental health. Recognizing and addressing these challenges is essential for improving the mental well-being of urban inhabitants and creating healthier and more sustainable cities in the future.

8



The COVID-19 pandemic significantly impacted the mental health of the global urban adult population, with numerous studies reporting a rise in anxiety, depression, and stress. Research across different countries indicates that risk factors such as being female, urban living, and previous psychiatric history exacerbated mental health challenges during periods of social isolation [22],[23],[24],[25],[26]. Similarly, a study from China and other regions have shown high incidences of anxiety and depression, particularly among women and those employing emotion-focused coping strategies [27].

Longitudinal research in the UK and the Philippines tracked mental health trajectories during the pandemic, revealing initial deterioration followed by some improvement. However, specific vulnerable groups, including women, young people, those with lower socioeconomic status, and those living alone or with children, consistently experienced worse outcomes. Factors contributing to increased distress in the Philippines included younger age, student status, quarantine experiences, and health concerns, while protective factors included reliable health information and confidence in healthcare providers [28], [29].

In Sweden and Spain, studies documented significant psychological impacts, including depression, anxiety, and insomnia, with pre-existing health conditions and poor self-rated health being major predictors of poorer mental health outcomes. In Spain, loneliness emerged as a strong predictor of mental health issues, while spiritual well-being served as a protective factor. These findings emphasize the need for targeted public health interventions and policies to address the mental health challenges posed by the pandemic, particularly in urban areas where social restrictions were more acutely felt [30], [31].

Thus, the COVID-19 pandemic has highlighted the importance of public policies and intervention strategies that address the mental health needs of the population, especially in urban centers, where the effects of social isolation and restrictions can be more intense. Identifying the risk factors associated with the deterioration of mental



health is crucial for developing more effective support and prevention programs, aiming to mitigate the impacts of future crises on mental well-being.

5 INTERVENTION STRATEGIES AND MENTAL HEALTH PROMOTION

5.1 Public Policy and Urban Planning

Integrating public policy and urban planning with a focus on mental health marks an innovative approach in urban development, aiming to foster environments conducive to individuals' psychological well-being. Studies show that urban design, including green spaces, high-quality public areas, and reducing noise and air pollution, significantly impacts stress, anxiety reduction, and the prevention of mental disorders [8], [10], [32]. Additionally, policies prioritizing public transport and active mobility, such as walking and cycling, enhance physical and mental health by encouraging social interaction and healthier, sustainable urban engagement [33].

However, implementing urban mega-projects presents challenges in mental health-focused public policy. While aiming for economic revitalization and urban infrastructure improvement, these projects often lead to increased social inequality, precarious job creation, and underinvestment in social services, including mental health [32].

The study by Bratman et al. (2015) [34] demonstrated through a controlled experiment that walks in natural environments significantly reduced rumination levels and neural activity in the subgenual prefrontal cortex, a brain area linked to mental illness risk. The study provides direct evidence of nature exposure's positive impact on mental health, highlighting the importance of accessible natural areas within urban contexts for overall mental health.

For public policy and urban planning to effectively promote mental health, a continuous commitment to research and evidence-based strategy implementation is necessary. Collaboration between urban planners, mental health professionals, governments, and the community is key to creating cities that not only avoid mental



health damage but actively contribute to citizens' well-being. Awareness of mental health importance in urban planning can lead to more inclusive, sustainable practices, benefiting individuals and communities alike.

5.2 Community Programs and Social Support

Integrating community programs and social support in urban mental health promotion offers a holistic, inclusive approach to enhancing city dwellers' quality of life. Community initiatives promote social interaction, mutual support, and support network building, significantly reducing isolation feelings and combating mental health stigma. Including strategies that encourage active participation in decisions and actions affecting their lives and communities underscores the importance of individual and collective empowerment in mental health care and prevention [35].

Linking social support programs with mental health services, including primary care, is vital for developing effective interventions. [36] highlight that engaging youth in mental health and substance use prevention and treatment interventions results in better health outcomes, emphasizing the need for youth participation-valuing approaches. This implies reconfiguring mental health services to be more accessible, welcoming, and tailored to young adults' specific needs in urban settings. Moreover, implementing public policies that integrate mental health and urban planning, focusing on developing inclusive, well-being-promoting public spaces, is crucial [37].

Thus, interdisciplinary and interinstitutional collaboration emerges as a central pillar in building a mental health care network capable of effectively responding to urban adults' demands. Programs that foster social inclusion, skill development, and resilience, alongside easy access to quality mental health services, can significantly contribute to individual well-being and healthier, more cohesive urban communities.



5.3 Mental Health Services and Accessibility

Urbanization and increasing population density are putting pressure on mental health services in cities, making it challenging to provide adequate care to the adult population. The accessibility of these services is hampered by factors such as the availability of healthcare professionals, uneven geographic distribution of services, and various socioeconomic and cultural barriers that deter individuals from seeking help. Studies highlight that the concentration of resources in city centers restricts access for those in suburbs and economically disadvantaged areas, emphasizing the need for expanded services in these regions [38], [39], [40].

In response, strategies such as decentralizing mental health services and integrating them into primary care have been proposed to improve accessibility. These approaches help reduce stigma and facilitate early intervention by offering a more holistic view of mental health that considers biopsychosocial factors [41]. Additionally, the rise of digital technologies like telemedicine and online support platforms during the COVID-19 pandemic has proven effective in bridging the gap for those unable to access traditional services. However, to maximize the benefits of digital tools, ensuring that they are accessible to all, particularly those with limited technological resources, is essential [42].

In summary, improving mental health service accessibility in urban contexts requires coordinated efforts among governments, health professionals, and civil society. Adopting decentralized, integrated care models and leveraging digital technologies are fundamental strategies for achieving broader, more equitable mental health coverage. Promoting inclusive policies and investing in adequate resources are essential steps to ensure all individuals, regardless of location or socioeconomic status, have access to the mental health care they need.



6 CHALLENGES AND OPPORTUNITIES FOR THE FUTURE

The challenges facing the mental health of the urban population are diverse, encompassing the need to expand access to mental health services, reduce the stigma associated with mental illness, and enhance the quality and effectiveness of care provided. A primary obstacle is the limited capacity of urban health services to meet increasing demand, exacerbated by rapid urbanization and socioeconomic disparities. However, these challenges also present significant opportunities for innovation in service delivery and the promotion of a positive mental health culture, through exploring new technologies and collaborative approaches.

Gaps in urban mental health research include a lack of longitudinal studies tracking populations over time, a need for research addressing the intersection between mental health and social issues such as housing and employment, and a scarcity of data on the effectiveness of interventions in specific urban environments. These limitations underscore the importance of investing in multidisciplinary research that can offer comprehensive insights into the complexities of mental well-being in urban contexts and inform more effective public policies.

The potential of technology and innovation to improve urban mental health is immense. Telemedicine, apps, online therapy platforms, and the use of big data to monitor mental health trends are just a few examples of how technology can enhance care access, personalize treatments, and provide ongoing support. Embracing these technologies can democratize service access, especially for vulnerable populations or in areas lacking mental health professionals.

Interdisciplinary collaboration among health professionals, urban planners, educators, and researchers is crucial to addressing the complexity of urban mental health. Integrating diverse perspectives and expertise can lead to the development of more holistic and effective strategies, considering both the social determinants of mental health and individual needs. Moreover, multi-level collaboration



involving local, national, and international stakeholders can facilitate the exchange of knowledge and best practices.

However, fully realizing these opportunities requires a paradigm shift in how this issue is perceived and addressed in cities. This includes not only increasing funding for health services and research but also promoting greater awareness of mental health as a critical public health issue that demands collective action and commitment at all societal levels.

In summary, while the challenges to the mental health of the urban adult population are significant, the opportunities for progress in this area are equally promising. Through focused research, the adoption of innovative technologies, and interdisciplinary and multi-level collaborative efforts, it is possible to transform the landscape of urban mental health, promoting well-being and resilience among populations in urban settings.

7 CONCLUSIONS

This paper on the mental health of the urban population has highlighted the complexity and diversity of the subject, covering everything from theoretical foundations to intervention strategies and mental well-being promotion. Mental health is understood as a comprehensive state of well-being, influenced by a wide range of socioeconomic, biological, and environmental factors. In urban environments, these determinants interact in complex ways, with urbanization presenting both challenges and opportunities. The studies discussed illustrate how city life can exacerbate mental health issues, underscoring the importance of public policies and interventions aimed at creating healthy and inclusive urban environments.

The research underscores the need for multidisciplinary and intersectoral approaches to address the challenges of urban mental health. Collaboration across various fields, such as mental health, urban planning, education, and technology, is crucial for developing effective strategies that consider the unique aspects of urban

environments. Innovation, particularly using technology, emerges as a potential vector for improving access to and the quality of mental health services, offering new forms of intervention and support. However, the successful implementation of these strategies requires a paradigm shift in how mental health is perceived and addressed, with a greater focus on inclusive policies and adequate funding for research and services.

Reflecting on the findings' implications, it becomes clear that promoting mental health in urban contexts demands a continuous commitment to evidence-based research, technological innovation, and interdisciplinary collaboration. Public policies play a vital role in this process, needing to be designed to meet the specific needs of the urban population, promoting access to green spaces, social inclusion, and community cohesion, as well as accessible and high-quality mental health services. As we move forward, it is essential that mental health be placed at the center of discussions on sustainable urban development, thus ensuring that the cities of the future are places where everyone can live fully and healthily.

REFERENCES

- [1] N. Okkels, C. B. Kristiansen, P. Munk-Jørgensen, & N. Sartorius, (2018) Urban mental health, *Curr Opin Psychiatry*, 31, 3, 258–264, doi: 10.1097/YCO.0000000000000413.
- [2] O. Gruebner, M. A. Rapp, M. Adli, U. Kluge, S. Galea, & A. Heinz,(2017) Cities and Mental Health, *Dtsch Arztebl Int*, doi: 10.3238/arztebl.2017.0121.
- [3] M. G. Carta & D. Bhugra (2019) Urbanization and mental health, in *Urban Mental Health* (Oxford Cultural Psychiatry series), D. Bhugra, A. Ventriglio, J. Castaldelli-Maia, and L. McCay, Eds., Oxford University Press, 83–95. doi: 10.1093/med/9780198804949.003.0007.
- [4] G. Marasini, F. Caleffi, L. M. Machado, & B. M. Pereira(2022) Psychological consequences of motor vehicle accidents: A systematic review, *Transp Res Part F Traffic Psychol Behav*, 89, 249–264, doi: 10.1016/j.trf.2022.06.017.
- [5] World Health Organization, Mental health: strengthening our response, *Retrieved from https://www.who.int/news-room/fact-sheets/detail/mental-health-strengthening-our-response*, 2018.
- [6] M. Rutter (2005) "Environmentally Mediated Risks for Psychopathology: Research Strategies and Findings," *J Am Acad Child Adolesc Psychiatry*, 44, 1, 3–18, doi: 10.1097/01. chi.0000145374.45992.c9.



- [7] F. Lederbogen, L. Haddad, & A. Meyer-Lindenberg (2013) "Urban social stress Risk factor for mental disorders. The case of schizophrenia," *Environmental Pollution*, 183, 2–6, , doi: 10.1016/j.envpol.2013.05.046.
- [9] J. A. Costa e Silva & R. E. Steffen (2019) Urban environment and psychiatric disorders: a review of the neuroscience and biology, *Metabolism*, 100, 153940, doi: 10.1016/j. metabol.2019.07.004.
- [10]T. Münzel *et al.* (2016) Environmental stressors and cardio-metabolic disease: part I–epidemiologic evidence supporting a role for noise and air pollution and effects of mitigation strategies, *Eur Heart J*, p. ehw269, doi: 10.1093/eurheartj/ehw269.
- [11] M. Martin-Carrasco *et al.* (2016) EPA guidance on mental health and economic crises in Europe, *Eur Arch Psychiatry Clin Neurosci*, 266, 2, 89–124, doi: 10.1007/s00406-016-0681-x.
- [12] M. Ridley, G. Rao, F. Schilbach, & V. Patel (2020) Poverty, depression, and anxiety: Causal evidence and mechanisms, *Science* (1979), 370, 6522, doi: 10.1126/science.aay0214.
- [13] D. Vlahov (2002) Urbanization, Urbanicity, and Health, *J Urban Health*, 79, 90001, 1S 12, doi: 10.1093/jurban/79.suppl_1.S1.
- [14]J. Peen, R. A. Schoevers, A. T. Beekman, & J. Dekker (2010) The current status of urban-rural differences in psychiatric disorders, *Acta Psychiatr Scand*, 121, 2, 84–93, doi: 10.1111/j.1600-0447.2009.01438.x.
- [15] F. Lederbogen *et al.* (2011) City living and urban upbringing affect neural social stress processing in humans, *Nature*, 474, 7352, 498–501, doi: 10.1038/nature10190.
- [16] C. S. Aneshensel & C. A. Sucoff (1996) The Neighborhood Context of Adolescent Mental Health," *Health Soc Behav*, 37, 4, 293, doi: 10.2307/2137258.
- [17] C. T. Dawson *et al.* (2019) Perceived neighborhood social cohesion moderates the relationship between neighborhood structural disadvantage and adolescent depressive symptoms, *Health Place*, 56, 88–98, doi: 10.1016/j.healthplace.2019.01.001.
- [18] C. Knoester & D. L. Haynie (2005) Community Context, Social Integration Into Family, and Youth Violence, *Journal of Marriage and Family*, 67, 3, 767–780, doi: 10.1111/j.1741-3737.2005.00168.x.
- [19] V. H. M. Bartelink, K. Zay Ya, K. Guldbrandsson, & S. Bremberg (2020) Unemployment among young people and mental health: A systematic review, *Scand J Public Health*, 48, 5, 544–558, doi: 10.1177/1403494819852847.
- [20] R. M. Urbanos-Garrido & B. G. Lopez-Valcarcel (2015) The influence of the economic crisis on the association between unemployment and health: an empirical analysis for Spain, *The European Journal of Health Economics*, 16, 2, 175–184, doi: 10.1007/s10198-014-0563-y.



- [21] A. Virgolino *et al.* (2022) Lost in transition: a systematic review of the association between unemployment and mental health, *Journal of Mental Health*, 31, 3, 432–444, doi: 10.1080/09638237.2021.2022615.
- [22] M. Boden *et al.* (2021) Addressing the mental health impact of COVID-19 through population health, *Clin Psychol Rev*, 85, 102006, doi: 10.1016/j.cpr.2021.102006.
- [23]S. Özdin & Ş. Bayrak Özdin (2020) Levels and predictors of anxiety, depression and health anxiety during COVID-19 pandemic in Turkish society: The importance of gender, *International Journal of Social Psychiatry*, 66, 5, 504–511, doi: 10.1177/0020764020927051.
- [24] F. Pashazadeh Kan *et al.* (2021) A systematic review of the prevalence of anxiety among the general population during the COVID-19 pandemic, *J Affect Disord*, 293, 391–398, doi: 10.1016/j.jad.2021.06.073.
- [25] H. Samji *et al.* (2022) Review: Mental health impacts of the COVID-19 pandemic on children and youth a systematic review, *Child Adolesc Ment Health*, 27, 2, 173–189, doi: 10.1111/camh.12501.
- [26] D. F. Santomauro *et al.* (2021) Global prevalence and burden of depressive and anxiety disorders in 204 countries and territories in 2020 due to the COVID-19 pandemic, *The Lancet*, 398, 10312, 1700–1712, doi: 10.1016/S0140-6736(21)02143-7.
- [27] L. Duan *et al.* (2020) An investigation of mental health status of children and adolescents in china during the outbreak of COVID-19, *J Affect Disord*, 275, 112–118, doi: 10.1016/j. jad.2020.06.029.
- [28] D. Fancourt, A. Steptoe, & F. Bu, (2021) Trajectories of anxiety and depressive symptoms during enforced isolation due to COVID-19 in England: a longitudinal observational study, *Lancet Psychiatry*, 8, 2, 141–149, doi: 10.1016/S2215-0366(20)30482-X.
- [29] M. L. Tee *et al.* (2020) Psychological impact of COVID-19 pandemic in the Philippines, *J Affect Disord*, 277, 379–391, doi: 10.1016/j.jad.2020.08.043.
- [30] C. González-Sanguino *et al.* (2020) Mental health consequences during the initial stage of the 2020 Coronavirus pandemic (COVID-19) in Spain, *Brain Behav Immun*, 87, 172–176, doi: 10.1016/j.bbi.2020.05.040.
- [31] L. M. McCracken, F. Badinlou, M. Buhrman, & K. C. Brocki, (2020) "Psychological impact of COVID-19 in the Swedish population: Depression, anxiety, and insomnia and their associations to risk and vulnerability factors," *European Psychiatry*, 63, 1, e81, doi: 10.1192/j. eurpsy.2020.81.
- [32] A. Tarazona Vento (2017) Mega-project meltdown: Post-politics, neoliberal urban regeneration and Valencia's fiscal crisis, *Urban Studies*, 54, 1, 68–84, doi: 10.1177/0042098015625025.
- [33] C. Koszowski, R. Gerike, S. Hubrich, T. Götschi, M. Pohle, & R. Wittwer, (2019) Active Mobility: Bringing Together Transport Planning, Urban Planning, and Public Health, in *In: Müller, B., Meyer, G. (eds) Towards User-Centric Transport in Europe. Lecture Notes in Mobility. Springer, Cham*, 149–171. doi: 10.1007/978-3-319-99756-8_11.



- [34] G. N. Bratman, J. P. Hamilton, K. S. Hahn, G. C. Daily, & J. J. Gross (2015) Nature experience reduces rumination and subgenual prefrontal cortex activation, *Proceedings of the National Academy of Sciences*, 112, 28, 8567–8572, doi: 10.1073/pnas.1510459112.
- [35] H. L. Ramey & L. Rose-Krasnor (2015) The new mentality: Youth–adult partnerships in community mental health promotion, *Child Youth Serv Rev*, 50, 28–37, doi: 10.1016/j. childyouth.2015.01.006.
- [36] T. Dunne, L. Bishop, S. Avery, & S. Darcy (2017) A Review of Effective Youth Engagement Strategies for Mental Health and Substance Use Interventions, *Journal of Adolescent Health*, 60, 5, 487–512, doi: 10.1016/j.jadohealth.2016.11.019.
- [37] R. Magalhães, L. C. Gomes, C. Afonso, R. E. A. Brandão, P. C. Dias, & M. Mattos (2018) Health Promoting Schools: Implementation Challenges, Barriers, and Lessons from a Case Study, in *Globalization and Health Inequities in Latin America*, Cham: Springer International Publishing, 107–116. doi: 10.1007/978-3-319-67292-2_6.
- [38] P. Apparicio, J. Gelb, A.-S. Dubé, S. Kingham, L. Gauvin, & É. Robitaille, (2017) The approaches to measuring the potential spatial access to urban health services revisited: distance types and aggregation-error issues, *Int J Health Geogr*, 16, 1, 32, doi: 10.1186/s12942-017-0105-9.
- [39]T. I. Shah, S. Bell, & K. Wilson (2016) Spatial Accessibility to Health Care Services: Identifying under-Serviced Neighbourhoods in Canadian Urban Areas, *PLoS One*, 11,12, e0168208, doi: 10.1371/journal.pone.0168208.
- [40] G. Sharma & G. R. Patil (2021) Public transit accessibility approach to understand the equity for public healthcare services: A case study of Greater Mumbai, *J Transp Geogr*, vol. 94, p. 103123, doi: 10.1016/j.jtrangeo.2021.103123.
- [41] F. M. C. Cardoso & J. P. S. Macedo (2016) A Regionalização da Rede de Atenção Psicossocial no Piauí: Caminhos e Percursos, *Revista FSA*, 13, 4, 235–261, doi: 10.12819/2016.13.4.12.
- [42] H. K. Y. Almathami, K. T. Win, & E. Vlahu-Gjorgievska (2020) Barriers and Facilitators That Influence Telemedicine-Based, Real-Time, Online Consultation at Patients' Homes: Systematic Literature Review, *J Med Internet Res*, 22, 2, e16407, doi: 10.2196/16407.

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