

## HIGH-DEMAND PSYCHOLOGY SERVICE: A MODEL PROPOSED BY THE MAYOR'S OFFICE OF BARUTA. CARACAS, VENEZUELA

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### Abstract

The objective of this work is to propose a model of attention in psychology services with high demand, based on prevention and public health. The fundamental pillars of the model are described, starting from the analysis of the demand in psychosocial terms, the strategies of response to the different users: employees, citizens of the municipality and 55% of citizens living in other municipalities of the Greater Caracas; supported by the experience of the Psychology Service of the Mayor's Office of Baruta, in the state of Miranda.

The work describes in a general way the approach to mental health from the public health perspective, to continue with the functioning of the service, objectives and strategies of psychosocial care following the guidelines of cognitive behavioral therapy, brief psychotherapy and community clinical psychology, modalities of care and key social programs. We hope to encourage discussion on a new doing and training of psychologists to provide answers to the high demand in a primary care service at the municipal level, which includes in its management the well-being and mental health of its workers and citizens in correspondence with the Sustainable Development Goals (SDGs), the World Health Organization and the Pan American Health Organization.

**Keywords:** mental health; wellbeing; primary care; high demand; public health; municipal proposal.

RECEIVED: 09-07-2025 / ACCEPTED: 13-09-2025 / PUBLISHED: 22-12-2025

**How to quote:** Acosta, Y. (2025). High-demand Psychology Service: A model proposed by the Mayor's office of Baruta. Caracas, Venezuela. *Almanaque*, 46, 35 - 50.  
<https://doi.org/10.58479/almanaque.2025.171>





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## Introduction

This paper starts from the importance of mental health from a public health perspective, especially after the effects of the Covid-19 pandemic in 2020. The reports of the World Health Organization (WHO, 2022) prioritized its attention, considering mental health as one of the main health problems at present. In addition, there is sufficient evidence of the magnitude and impact of the pandemic on the mental health of women, children, adolescents, widowed, divorced and separated people, as the most vulnerable, also increasing the need for psychological care in the world. Acosta (2021), Torres-Cantero, Álvarez et al (2022), and Rivera (2023), point out that after Covid-19 the prevalence of depression increased threefold (15.97% vs. 4.4%), anxiety and (15.15% vs. 3.6%) and post-traumatic stress disorder (21.94% vs. 4%) in the global context.

Contributing to the increase in the impact on mental health and the demand for psychological care are the aging of the population, worsening social problems, the collapse of available psychological services, the occurrence of events such as natural disasters, poverty and violence that have a direct psychosocial impact on populations; on the other hand, the pandemic highlighted the weaknesses of health systems, the problems of psychological health services and health inequalities at the global level.

Considering the particularities of contexts such as the Venezuelan one, it is necessary to pay more attention to mental health, to generate novel responses to the high demands, revising the traditional care model to propose other care schemes with greater scope, reducing waiting periods and particular responses to different mental health problems.

In response to this situation, at the municipal level, the Psychology Service of the Mayor's Office of Baruta, Miranda State, was created in 2022, with the objective of attending to the well-being and mental health of 672,583 inhabitants of the municipality, according to figures from the National Institute of Statistics (INE, 2024). However, the increase in the number of requests for help and data from the mayor's office, such as the municipal police and citizen services, made it possible to design a preventive primary care service. Its objectives and psychological care strategies were defined, the different demands were recorded and analyzed, and the main findings from the beginning of its operations were systematized to present a model of primary care that we will call: High Demand Psychology Service, hereinafter SPAD.

The proposed model has a modest and flexible goal. This article organizes the information accumulated since its foundation in 2022, which may be useful to other professionals who face the situation of a high number of requests, which cannot be satisfied by the present psychology team, but who also work under traditional predominant schemes of psychological support, generally with a more individual conception, using assessment methodologies and clinical and psychotherapeutic action, typical of hospital or private practice contexts (Labrador, 2010; Novoa Gómez, 2012; Menéndez, 2020).

By changing or broadening the vision of the SPADs, including prevention, understood as a constant practice of collecting, analyzing, interpreting and disseminating health data to plan, classify, propose and evaluate public health actions that complement clinical-health care practice, alternative and group-based responses can be offered, which may be more appropriate for settings with a high number of requests. Seen in this way, the services can be spaces for research, for the generation of information for their users and other professionals, for innovative experiences to design other forms of care, supporting and/or integrating new theoretical and methodological perspectives.

In the following, general concepts of mental health are defined based on public health criteria, the objectives of SPAD, modalities and strategies of care, social programs developed, the fundamental bases, considering the Sustainable Development Goals (SDGs), the World Health Organization and the Pan American Health Organization are described.

## **Objective**

The main objective of this paper is to propose a model of care for psychology services with high demand, from the perspective of prevention and public health. By high demand we will understand not only the number of requests, but also the psychosocial analysis of it.

## **Development**

### **Mental health from a public health perspective**

Considering mental health from a public health perspective is not new, because there is extensive literature that refers to this approach. However, the scope of action of mental health with emphasis on prevention generates resistance and traditional medical-assistance models prevail in psychology services in Venezuela, where the biological approach as the basis of psychological problems, medicalization and referrals to other mental or physical health specialists such as neurologists, endocrinologists or psychiatrists are frequent practices. The services thus managed, are collapsed by the high demand and the waiting lists and waiting

times for care are very long. On the other hand, it is insisted and reinforced in universities, spaces of integral formation and innovation in psychology practices, to consider this model in different spaces of attention and the consulting room as the only and/or main space of relationship and therapeutic support.

It is necessary to urge professionals and institutions in charge of mental health care to overcome the predominant model. We propose a public health approach, which alludes to the collective field and recognizes that health and disease processes are related to different cultural, social, economic, political and environmental factors, among others. On the other hand, from this perspective, it has been shown to reduce costs, intervention times and time of suffering without reducing the quality of care; therefore, we consider it convenient to consider this approach, especially when we are faced with a very high number of requests for psychological support.

From public health, health promotion and disease prevention are two major areas of work, and are directly linked to better mental wellbeing, with prevention in the onset of mental disorders and their impact, as well as the medium and long-term decrease in requests for care, significantly reducing the burden of mental and behavioral disorders in the world (Novoa, 2012; Cuestas, Saiz et al, 2016). The proposal does not deny individual care and assistance, but prioritizes promotion and prevention as central intervention strategies, having the opportunity to increase the number of care with different group and community strategies. Other levels of care are also considered in this perspective: community and cultural.

In this same line of prevention and promotion, the Pan American Health Organization (PAHO) created the High Level Commission on Mental Health and Covid-19 in the year 2023, leaving us with five strategic lines of action as a policy for mental health:

- Strengthen leadership, governance and multisectoral partnerships and integrate mental health into all policies.
- Improve the availability, accessibility and quality of community services aimed at mental health and psychoactive substance use.  
Promote strategies and activities for promotion and prevention throughout the life course.
- Strengthen the integration of mental health and psychosocial support in the context of emergencies.
- Strengthen data, evidence and research.

Prevention from a public health perspective involves 3 levels of care. Primary prevention, aimed at avoiding the development of diseases in vulnerable populations. Secondary prevention, aimed at reducing the duration of the disease when it is already present, limiting the sequelae through early diagnosis and care; and tertiary prevention aimed at those who have an irreversible disease (Hunt and Eisenberg, 2010; Cuesta, Saiz et al, 2016).

The previous classification has been criticized and in contrast, it is suggested to speak only of prevention, treatment and maintenance. And within this new proposal we speak of prevention a) Universal: aimed at the general population without people having been selected for having any risk factor for the disorder to be prevented. b) Selective: aimed at people who have a higher risk than others of developing the disorder. c) Indicated: aimed at high-risk individuals who already have subclinical manifestations precursors of the disorder or in whom some biological marker predisposing to the disorder has been detected. Indicated prevention is also known as early care (Tortilla-Feliu, 2002).

Finally, viewing mental health from a public health perspective also implies considering aspects of accessibility to health services for the entire population with adequate and efficient services, ensuring the protection of human rights, attending to the mental health of communities, identifying vulnerable groups such as children, adolescents, the elderly and women, insisting on the elimination of discrimination, stigma and exclusion of people with mental health problems, and promoting research in different areas to develop innovative strategies and improve the health system.

Following these guidelines on mental health and primary care, the psychology service of the municipality of Baruta, in the state of Miranda, was created with a preventive care scheme, assuming that "some mental health problems can be managed through primary care". This experience serves as an example of application.

## High-demand psychology service

The Psychology Service was created in 2022, attached to the Health Superintendence of the Mayor's Office of the Baruta municipality in Miranda state. The design considered mental health care in a comprehensive manner, with community orientation and a preventive and positive approach to mental health.

The main objective is the **prevention and promotion of mental health care** for the workers of the mayor's office and the inhabitants of the municipality. In other words, it is a service with two main types of users: internal and external. In this sense, it also seeks to provide support in psychological aspects to other departments of the Mayor's Office such as education, sports, citizen attention and the autonomous institutes of citizen security (police) and attention and protection of the rights of children and adolescents.

Another objective is to design innovative individual and collective responses through attention to the main reasons for consultation: mood disorders such as anxiety, sleep disorders, psychological care of the elderly and their informal caregivers, and in the last year, attention to psychological emergencies such as panic attacks and suicidal ideation has also been considered through telephone attention.



Documenting and investigating the reality of the country starting from the municipality, is also an objective of the service; presenting data by analyzing the demand for psychological care not only from requests for individual attention; but also those arising from the exchange with the directorates of the mayor's office, visits to communities, expanding the range of action and scope with a positive impact for families, schools and the community.

## **Demand Analysis**

Analyzing demand is key. This is understood not only as the symptoms or subjective problems and number of requests, but also as the analysis of data in psychosocial terms: changes and frequency in the reasons for consultation, profiles of applicants, geographical and social contexts of applicants, knowledge of the institutional framework where the service operates, exchanges with the different directorates that make up the institution. The high demand may also be due to the relationship between the number of requests and the number of professionals available, which generates response capacity indicators, such as the number of people on the list and the waiting time to be attended.

The psychology service generated high positive expectations internally and externally, receiving a high number of messages on its social networks and requests for psychological support. Internally, the education department reported some problems with students, such as bullying and school violence, low performance, maladaptive behavior in the classroom, school dropouts and requests for psychological evaluation due to the presence of neurodevelopmental disorders among its students.

The sports department also requested support from the psychology service. In this case, they reported systematic bullying behavior among young people who practice sports, the need to train instructors and offer tools for handling these bullying situations and for the proper management of work-related stress and emotional intelligence; the psychiatry service reported a high number of patients with chronic pain.

This is how the knowledge and integration to the different directions of the institution where the service is inserted offers a broad framework for action. In fact, we have a large field of work to be considered by psychologists; where preventive care of psychological problems becomes relevant, informing about the importance of attending the psychologist, their individual and social work, naturalizing the assistance to these professionals and talking about mental health, avoiding stigma, among others.

Outside the service, most of the requests respond to people with psychological discomfort who request individual attention but who are informed and oriented towards the various support modalities.

## Types of users

Another of the fundamental aspects of SPAD are the types of users, in order to generate specific strategies far removed from the classic clinical-assistance approach and to reduce the waiting time for care and to orient/refer, if necessary, to another type of care or service. It should be noted that, in principle, two main types of users were considered: employees of the municipality (internal users) and inhabitants of the municipality (external users). However, a closer reading of the former refers to workers from different departments and it is pertinent to ask ourselves about their profile and needs: are the requirements the same for those who work in sports, education, culture, human resources or health medical personnel? Or on the contrary, it invites us to reflect more carefully on these different environments and professionals.

The external users are the inhabitants of the different sectors of the municipality. It is also worth asking the question: do citizens living in Caurimare, Valle Arriba, Santa Fé, Hoyo de la Puerta, La Palomera or the historical area of the municipality, for example, have the same psychological needs and problems? The answer is no, they are totally different geographical and socioeconomic contexts. On the other hand, since 2023, requests for care from other people living in other municipalities of Greater Caracas began to increase, currently reaching 55% of the total processed; additionally, messages are received from Venezuelan migrants abroad and patients referred from other psychology services and educational units.

## Triage and referral to care modalities

The high demand makes Triage necessary, which is carried out via telephone, once people request attention through the telephone numbers or the Instagram account @psicologiabaruta, leaving a message or filling out a form. The call made by a psychology professional explores the reason for consultation, duration and frequency of symptoms or difficulties in daily life, history of previous conflicts/crises and treatments received, in addition to recording the applicant's personal data and availability for care.

From Triage, referrals are made to individual online care mainly, or to the social programs that are developed. Face-to-face care is limited according to the following criteria: emergency cases, referrals from schools, workers, people at risk and elderly people, the latter especially because of their difficulty in using technology in psychological sessions. The request can also be referred to a hospital or psychiatric service if the psychological examination indicates that the request cannot be attended in the service.

From the beginning, the service began with a proposal of online and restricted face-to-face attention; seeking a greater reach with the former, in addition to considering the extension of the municipality and the economic and transportation difficulties of some users. When analyzing also from where they were requesting attention, it was decided in the year 2025 to start face-to-

face consultation from the ambulatory Dr. José María Vargas, located in Las Minas de Baruta and Dr. Humberto García Barrios, in the Polideportivo La Trinidad. In the latter operates the physiatry service, where the high demand comes from patients with chronic pain. Therefore, the psychologist's support in the physiatry service is mainly aimed at: orienting and supporting the patients' social and autonomy skills, addressing psychoemotional aspects, collaborating with the interdisciplinary team of the outpatient clinic, and in general the psychologist supports the functional recovery and improvement of the patients' quality of life. In all cases of care, the guidelines of cognitive behavioral therapy, brief psychotherapy and community clinical psychology are followed.

## **The profile of the SPAD psychologist**

Another aspect of this model is undoubtedly the training, academic competencies and social sensitivity of psychology professionals who wish to work in a predominantly community-oriented service. Knowledge of clinical care with all its theoretical orientations and methodologies is necessary, but they must also know the theories of community social psychology, preventive approaches and even possess the willingness and flexibility to continue studying and incorporating the main changes and trends in the world, such as telepsychology in daily practice, use of technology in counseling, and more recently applications for communication and artificial intelligence that allow the use of technology in counseling, and more recently applications for communication and artificial intelligence that would allow building new strategies for psychoeducation and linkage with users, increasing the scope of the service, reaching rural and remote communities in the center of the municipality, and providing preventive responses and group interventions that promote protective factors of mental health and identify risk factors in the communities.

Other important skills in the psychologist's profile are those related to oral and written communication, which allow the generation of content and dissemination of SPAD's experiences. Teamwork skills are necessary in order to liaise with community leaders, other professionals and organizations present in the municipality.

Flexibility and knowledge of the context, whether institutional or community, also play an important role in good performance, identity and commitment to users and communities. Let us take into account that this proposal allows us to identify new work spaces for psychologists, in addition to the traditional ones in companies and hospitals. In recent years, private care centers have emerged in response to emerging issues-situations such as obesity and bariatric operations, for example. As well as this service within an institution of municipal political power; both examples draw different regulatory frameworks that must be understood for a better professional practice.

Undoubtedly, the ethical dimension is also present, by valuing the confidentiality of user data and respect for human rights in the work context. On the other hand, professionals must be motivated, well remunerated and have updated materials and equipment for efficient professional practice.

Important data on the psychology service

- In the first year, 70% of the requests were from the municipality of Baruta.
- In the second year, 55% of the requests correspond to people living in other municipalities.
- The main reason for consultation is anxiety, followed by management of emotions, depression, and insomnia.
- Seventy-five percent of the requests come from women.
- The main age range attended is between 27 and 59 years old.

## Modalities of care

Psychological care has four modalities:

**Online**, a call or video call is made by the digital platforms that the user handles with more expertise. This is: whatsapp, zoom or meet mainly.

**Face-to-face individual or group attention.** The first responds to the attention in our offices: outpatient clinics and administrative headquarters of SPAD, or to the invitation to participate in workshops or group discussions. This last modality, in addition to being carried out in the aforementioned locations, can also be carried out in the different communities of the municipality.

**Chat forums.** This methodology, widely used after the pandemic period, has proven to be useful for the management of minor problems and massive demand, allowing the sharing of conceptual information, discussion or questions and concerns in real or deferred time, and fulfills an educational function, allowing the user to keep and share the information received and consult it in times of reflection or emotional crisis.

**Conversations, workshops.** Especially in community activities where the main social programs and key issues are developed under these modalities.

## Care plans and strategies

Responding to the main reasons for consultation: stress and anxiety, emotion management, depression, grief, poor school performance; and also considering that in the municipality there is a significant percentage of elderly people (INE, 2024; estimates that 13.4% are over 60 years old) the following group care programs are developed in person and two of them online (program 1 and 2).

- Managing anxiety and negative thoughts
- Improving sleep patterns
- Psychological care of the elderly and their informal caregivers.
- Emotion management for different audiences.
- School for families

The psychologist's work is complemented by the generation of content for different users and psychological topics, disseminated through various formats, media and digital platforms.

The work confronts the professionals with other scenarios and audiences of attention, which arise from the request of the health department to incorporate the psychology service in the comprehensive health days that are made in communities of the municipality. Under this scheme, contacts are established with citizens in parks, neighborhood associations, building halls, streets, auditoriums, sports venues; which allows us to identify people who require psychological care and are unaware of the service and even what a psychology professional does, while identifying new issues and target populations.

Consequently, in a preventive SPDA there may be no office and medical gowns are unnecessary.

## Research in the SPSPD

The study of demand has configured a complex system of interrelationships, users, and preventive and assistive actions. Incorporating interns into projects with specific objectives has made it possible to conduct research and gather valuable information in the municipality's schools, for example. Between March and April 2025, with the participation of four psychology students from the Metropolitan University, students of community psychology, it was possible to collect 600 drawings from the families of children from preschool to third grade, in two schools in the municipality. The objective of this research was to learn about the changes in the family structure as a result of migration.

In the years 2024 and 2025, several cases of self-injury in adolescents were received in the psychology service, giving rise to a new research whose main objective is the identification of risk behaviors in children and adolescents attending school in the municipality of Baruta. Professionals from the mayor's office, as well as researchers from two national universities are participating in this research. With this team, a questionnaire for the collection of information was constructed and validated, which aims in its final phase to design and implement prevention programs aimed at these groups.

Finally, we could represent the SPAD's operating scheme as follows:

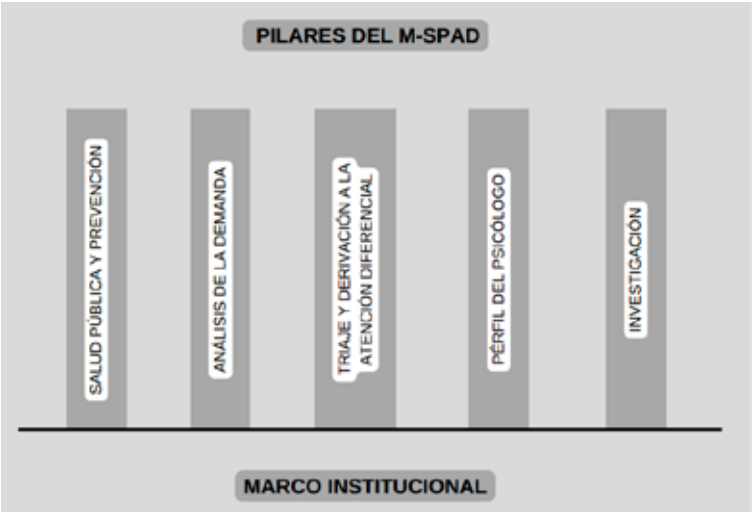


Figure 1. Summary of the basic pillars of the SPAD-Model. Own elaboration.

## Conclusion

It is essential to attend to mental health due to the high demand in all psychology services. Most of them are collapsed for reasons already mentioned in the text of this work, especially when they insist on working with traditional models, individual inquiry and assistance. In view of this reality, a proposal was made that does not intend to debate with hegemonic positions, but to call attention to the incorporation of new elements of care, based on the experience of the Psychology service of the municipality of Baruta, with an approach from the perspective of public health and prevention. On the other hand, it is not intended to be a definitive proposal, but rather a flexible one, in constant revision and permeable to suggestions.

Fundamental aspects in the operation of a high demand psychology service are: to analyze the demand, to carry out a triage to study, classify and refer to different types of psychological care, to define the training and competencies of the profile of the psychology professional to work in these services and to develop the research component.

This proposal, which arises from the municipal level, highlights other relevant aspects in mental health care related to the different responsibilities in the supply of care services and attention to the well-being, mental health and quality of life of citizens.

Governments must guarantee quality services, invest in health, integrate the community and bet on prevention for its multiple advantages, in addition to improving current assistance. Vulnerable groups should be protected, designing or supporting existing mental health policies. Plans and programs can be developed at state, regional, local and municipal levels, such as the one presented here, but they must be integrated for the best use of resources and scope of care.

Making and giving appointments is not enough to respond to the complex social demand we have described in this paper. It is necessary to incorporate new trends, care modalities and technologies, always respecting dignity and human rights, with the individual, the family, the community and the institutions as targets.

Preventive care also implies considering aspects of accessibility to health services for the entire population with adequate and efficient services, and considering community and cultural levels in actions and programs. There is still a long way to go.

The work has not been easy and has generated resistance, especially in clinical psychology professionals, and in psychologist training institutions that insist on the application of classic paradigms of individual and assistance, arguing that these methodologies are transferable to all areas. In this paper we insist that this is not possible; new times have generated new audiences and work scenarios, which broaden the work scope for psychologists.

We hope to have contributed to the discussion on a new way of doing psychology in mental health care in high demand services, as well as to the request for the revision of psychologists' training by incorporating some of the elements mentioned here in their curricula.

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