

# Global Mental Health Challenges and Opportunities

Shekhar Saxena  
 Director  
 Department of Mental Health and Substance Abuse  
 World Health Organization



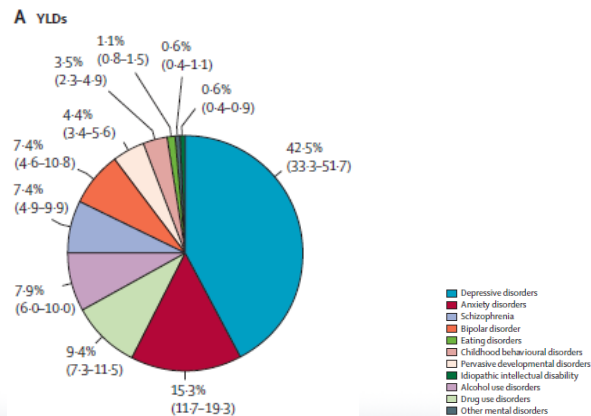
1

## Burden of Mental Disorders

- Global Burden of Diseases, 2010: 10%
- In addition.
  - Substance use as risk factors
  - Suicide
  - Behavioural risk factors for diseases
- About one third of all disability
- Depression is the largest contributor

2

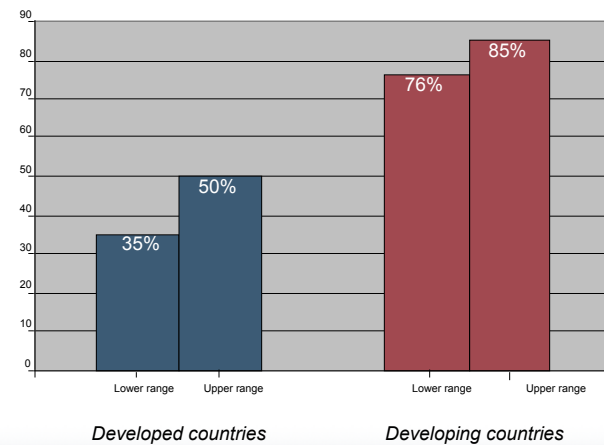
## Years lived with disability



3

## Gap in treatment:

Serious cases receiving no treatment during the last 12 months

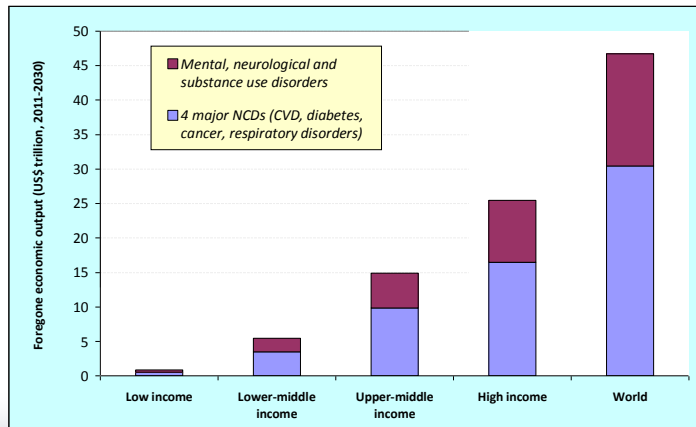


(WHO World Mental Health Consortium, JAMA, June 2<sup>nd</sup> 2004)

4

## Economic burden of NCDs and mental disorders GLOBALLY

(Source: WEF, 2011 – *The Global Economic burden of NCDs*)



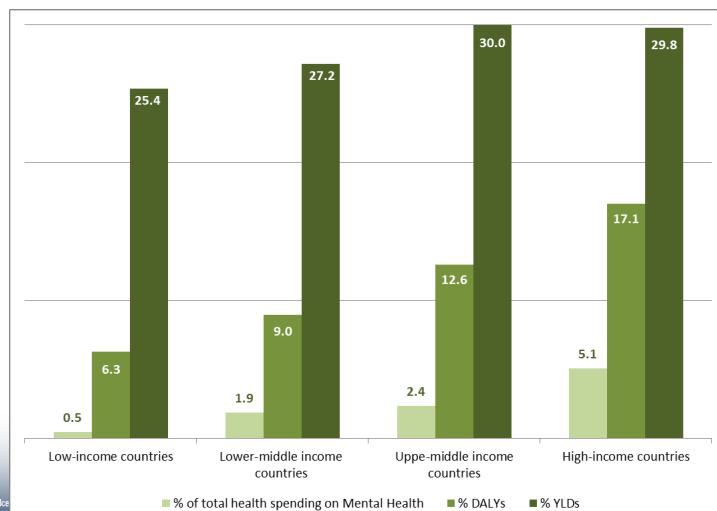
5

## Human rights abuses are common



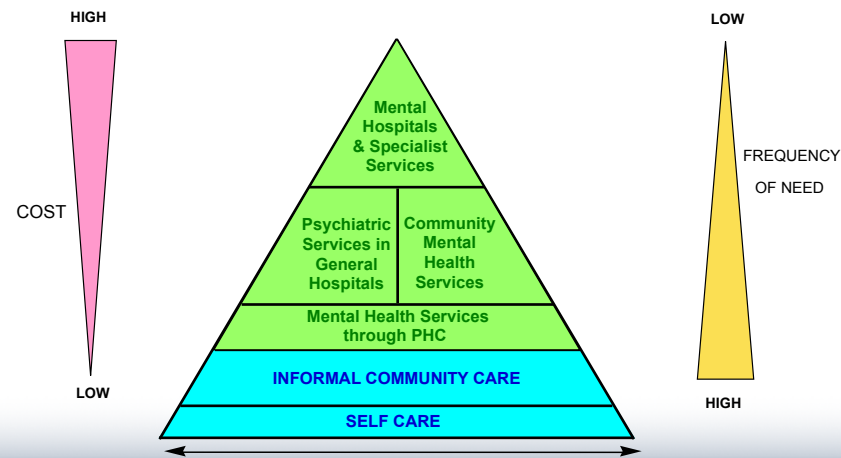
6

## Financing remains a problem YLDs, DALYs and Budgets



7

## Mental Health Services (WHO, 2003)



8

## Grand Challenges in Global Mental Health

(Nature, July 2011)

Top five challenges:

- Integrate screening and core service packages in PHC
- Reduce the cost and improve the supply of medications
- Provide effective and affordable community based care
- Improve children's access to care
- Strengthen mental health component in training of health personnel



Grand challenges in global mental health

9

## WHO's Mental Health Action Plan 2013-2020



10

### Comprehensive Mental Health Action Plan 2013-2020

#### Vision

*A world in which mental health is valued, promoted and protected, mental disorders are effectively prevented and persons affected by these disorders are able to exercise the full range of human rights and to access high quality, culturally appropriate health and social care in a timely way to promote recovery, all in order to attain the highest possible level of health and participate fully in society and at work free from stigma and discrimination.*

#### Cross-cutting Principles

<b>Universal health coverage</b>	<b>Human rights</b>	<b>Evidence-based practice</b>	<b>Life course approach</b>	<b>Multisectoral approach</b>	Empowerment of persons with mental disorders and psychosocial disabilities
----------------------------------	---------------------	--------------------------------	-----------------------------	-------------------------------	--

#### Goal

*To promote mental well-being, prevent mental disorders, provide care, enhance recovery, promote human rights and reduce the mortality, morbidity and disability for persons with mental disorders*

#### Objectives and Targets

<b>1. To strengthen effective leadership and governance for mental health</b>	<b>2. To provide comprehensive, integrated and responsive mental health and social care services in community-based settings</b>	<b>3. To implement strategies for mental health promotion and prevention in mental health</b>	<b>4. To strengthen information systems, evidence and research for mental health</b>
<b>Targets 1.1 and 1.2</b>	<b>Target 2</b>	<b>Targets 3.1 and 3.2</b>	<b>Targets 4</b>

11

## Vision

A world in which mental health is valued, promoted and protected, mental disorders are prevented and persons affected by these disorders are able to exercise the full range of human rights and to access high quality, culturally-appropriate health and social care in a timely way to promote recovery, all in order to attain the highest possible level of health and participate fully in society and at work free from stigmatization and discrimination.

12

## Objectives

1. To strengthen effective leadership and governance for mental health
2. To provide comprehensive, integrated and responsive mental health and social care services in community-based settings
3. To implement strategies for promotion and prevention in mental health
4. To strengthen information systems, evidence and research for mental health



13

## Cross-cutting principles

1. Universal health coverage
2. Human rights
3. Evidence-based practice
4. Life course approach
5. Multisectoral approach
6. Empowerment of persons with mental disorders and psychosocial disabilities



14

## Targets: By 2020 Objective 1 (leadership and governance)

80% of countries will have developed or updated their policy/plan for mental health in line with international and regional human rights instruments.

50% of countries will have developed or updated their law for mental health in line with international and regional human rights instruments.



15

## Targets: By 2020 Objective 2 (mental health and social care services)

- Service coverage for severe mental disorders will have increased by 20%.



16

## Targets

### Objective 3 (mental health promotion and prevention)

- 80% of countries will have at least two national, multisectoral mental health promotion and protection programmes functioning by year 2020
  - One universal
  - One targeted on vulnerable groups
- Rates of suicide in countries will be reduced by 10% by year 2020



17

## Targets: By 2020

### Objective 4 (information, evidence and research)

- 80% of countries will be routinely collecting and reporting at least a core set of mental health indicators every two years through their national health and social information systems.



18

## Role of the WHO

- Guide and support Member States
- Offer technical assistance
- Support training
- Monitor global mental health situation



19

## WHO's Technical Material

- mhGAP Intervention Guide and Training material
- Policy Guidance Package
- Emergency Mental Health tools



20

## Scaling up care in Ethiopia

- Second largest country in Africa; 85 million people: one of the poorest countries in the world.
- Government fully committed to scaling up.
- 232 professionals trained in the last 3 years, using mhGAP-IG.
- Plans to train 300 professionals in 2014

### Critical Success Factors

- The Health Minister
- Dedicated professionals
- External inputs



21

## China: the Mental Health Law 2013

- 27 years in the making!
- Major transformation in involuntary admissions
- Treatment and rehabilitation made easier
- Health and social financing streamlined

中华人民共和国精神卫生法

(2012年10月26日  
第十一届全国人民代表大会  
常务委员会第二十九次会  
议通过)

### Critical Success Factors

- Persistence of key professionals
- Larger socio-economic changes

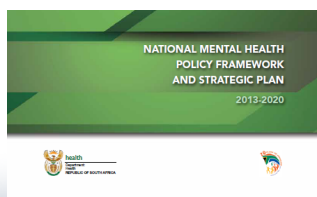
22

## South Africa Setting an example !

DFID Department for International Development  
The Mental Health and Poverty Project



AFFIRM Africa Focus on Intervention Research for Mental Health



- ### Critical Success Factors
- Highly motivated professionals
  - Good support from the Health Minister

23

## India: Mental Health Policy and Law

- Intensely debated
- Large involvement of civil society
- Envisages massive increase in financial allocation

AS INTRODUCED IN THE RAJYA SABHA  
Bill No. LIV of 2013  
THE MENTAL HEALTH CARE BILL, 2013

### Critical Success Factors

- Pressure from civil society
- Good support from the Health Ministry
- Active judiciary on human rights issues

24

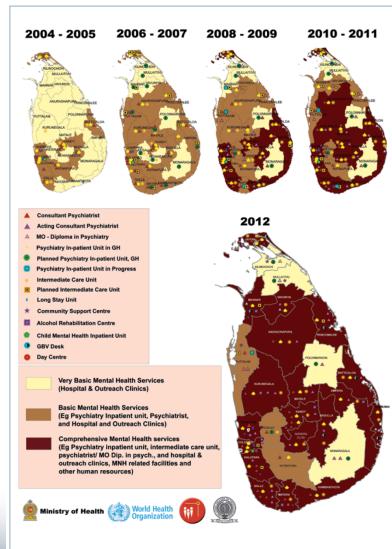
## Sri Lanka: Building Back Better

- Substantial and sustained expansion of services after 2004 Tsunami

### Critical Success Factors

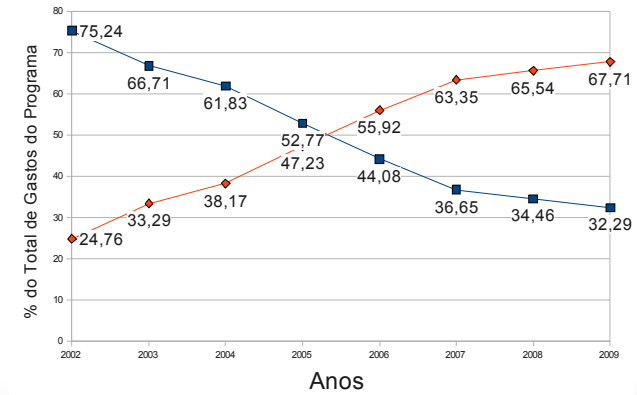
- Massive national loss
- Support from the President
- Well functioning PHC system

Figure 1. Expansion of mental health services in Sri Lanka



25

## Brazil Hospital vs Community: Reverting Expenditure



Gastos Extra-hospitalares  
Gastos Hospitalares

Всероссийская организация здравоохранения    Organisation mondiale de la Santé    世界卫生组织    منظمة الصحة العالمية    Organización Mundial de la Salud    World Health Organization

26

## Other countries....

- Pacific islands- mental health policy
- Chile- treatment of depression
- England- access to low intensity psychotherapy
- Viet Nam- community mental health
- Ghana- mental health law, treatment of epilepsy
- Indonesia- MH in primary health care
- Nigeria- MH in primary health care

....and many more

Всероссийская организация здравоохранения    Organisation mondiale de la Santé    世界卫生组织    منظمة الصحة العالمية    Organización Mundial de la Salud    World Health Organization

27

## Millennium Development Goals 2000-2015



Всероссийская организация здравоохранения    Organisation mondiale de la Santé    世界卫生组织    منظمة الصحة العالمية    Organización Mundial de la Salud    World Health Organization

28

## POST2015 DEVELOPMENT AGENDA

1. End poverty in all its forms everywhere
2. End hunger, achieve food security and **adequate nutrition** for all, and promote sustainable agriculture
3. **Attain healthy life for all at all ages**
4. Provide equitable and inclusive quality education and life-long learning opportunities for all
5. Attain gender equality, empower women and girls everywhere
6. Secure water and sanitation for all for a sustainable world
7. Ensure access to affordable, sustainable, and reliable modern energy services for all
8. Promote strong, inclusive and sustainable economic growth and decent work for all
9. Promote sustainable industrialization
10. Reduce inequality within and among countries
11. Build inclusive, safe and sustainable cities and human settlements
12. Promote sustainable consumption and production patterns
13. Promote actions at all levels to address climate change
14. Attain conservation and sustainable use of marine resources, oceans and seas
15. Protect and restore terrestrial ecosystems and halt all biodiversity loss
16. Achieve peaceful and inclusive societies, rule of law, effective and capable institutions
17. Strengthen and enhance the means of implementation and global partnership for sustainable development

29

## Open Working Group

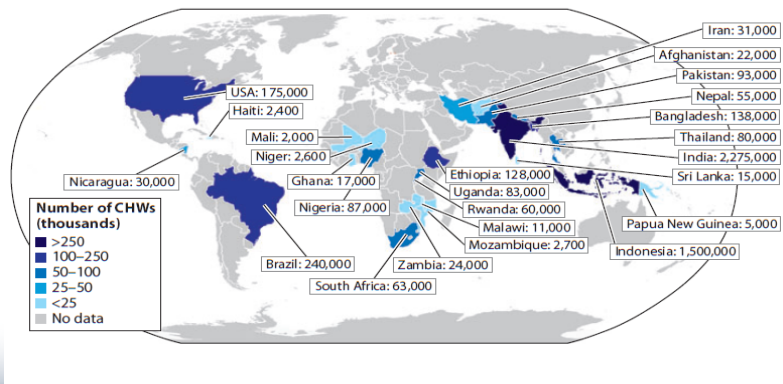
### Proposed goal 3. Attain healthy life for all at all ages

(as on 10th June 2014)

- 3.4 by 2030 reduce by x% premature deaths from non-communicable diseases (NCDs), reduce deaths from injuries, including halving road traffic deaths, **promote mental health and wellbeing, and strengthen prevention and treatment of narcotic drug and substance abuse**
- 3.5 by 2030 increase **healthy life expectancy** for all by x%
- 3.6 achieve **universal health coverage (UHC)**, including financial risk protection, with particular attention to the most marginalized and people in vulnerable situations
- 3.7 by 2030 ensure universal availability and access to **safe, effective and quality affordable essential medicines**, vaccines, and medical technologies for all

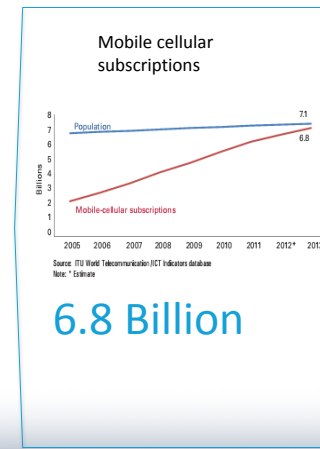
30

## Human Resources remain scarce. Community Health Workers What prevention and treatment care can they deliver ?



31

## m-health Can we exploit the potential ?



32





Thank you !

