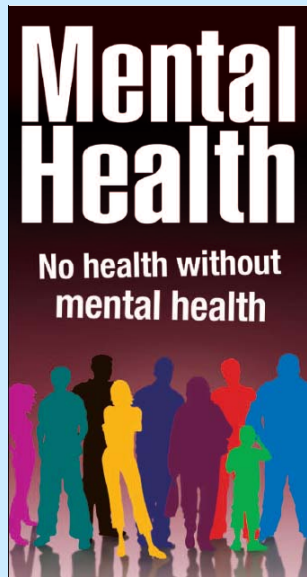


# Current Challenges in Global Mental Health



**Dr Shekhar Saxena**

Director, Department of Mental  
Health and Substance Abuse

World Health Organization

Geneva

Health is a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity.

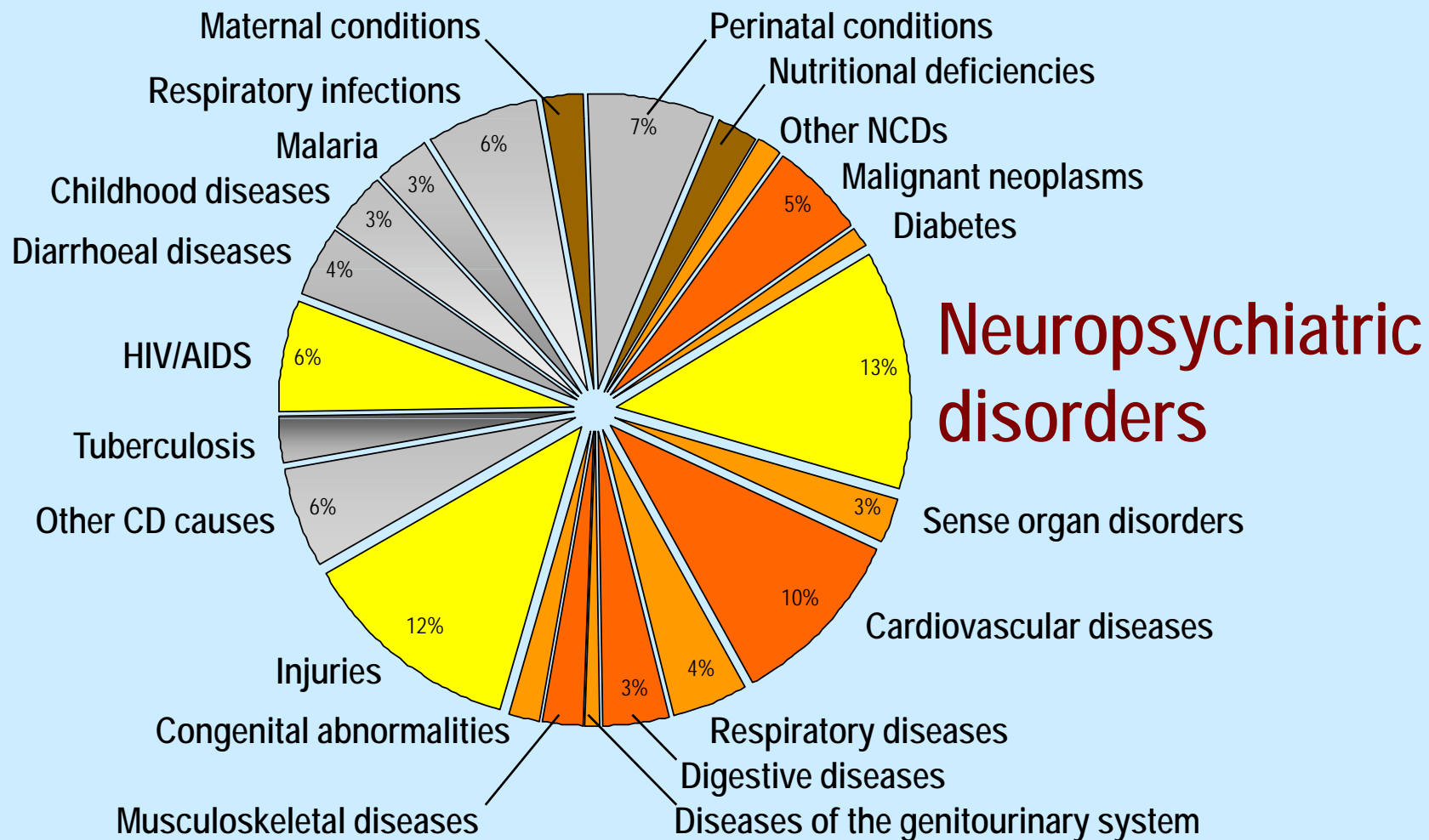


# Mental Health

No health without mental health



# Disease Burden (DALYs)

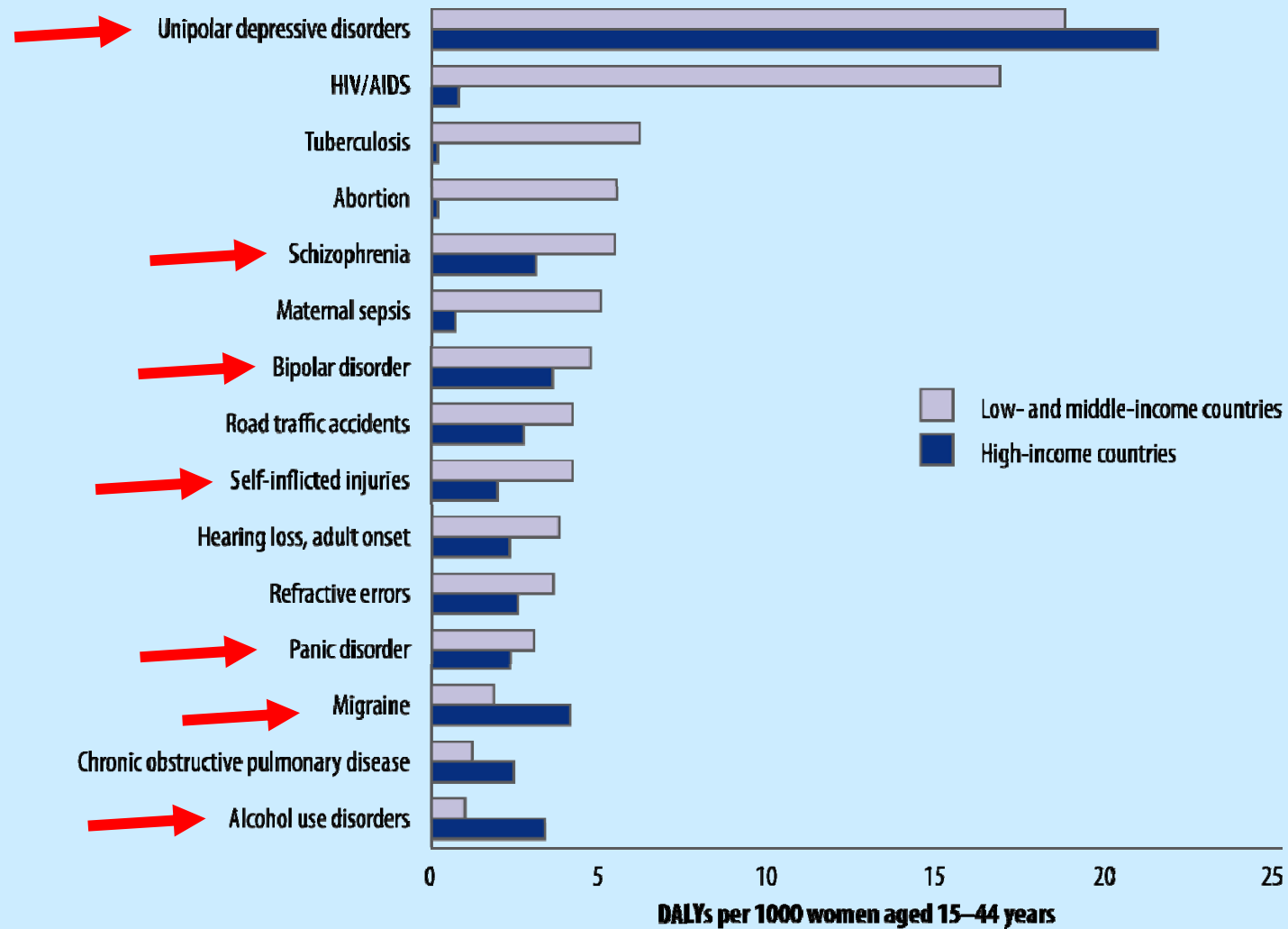


Source: WHR 2002



World Health Organization

# Leading causes of disease burden for women aged 15–44 years, high-income countries, and low- and middle-income countries, 2004



# 2030 rankings: The leading causes of DALYs lost

<b>World</b>	1	HIV/AIDS
	2	Depression
	3	Ischaemic heart dis.

<b>High-income countries</b>	1	Depression
	2	Ischaemic heart disease
	3	Alzheimer

<b>Middle-income countries</b>	1	HIV/AIDS
	2	Depression
	3	Cerebrovascular

<b>Low-income countries</b>	1	HIV/AIDS
	2	Perinatal
	3	Depression

# The numbers

- **150 million with depression**
- **25 million with schizophrenia**
- **38 million with epilepsy**
- **90 million with alcohol or drug use disorder**
- **Nearly 1 million commit suicide every year**



# Economic burden of mental disorders

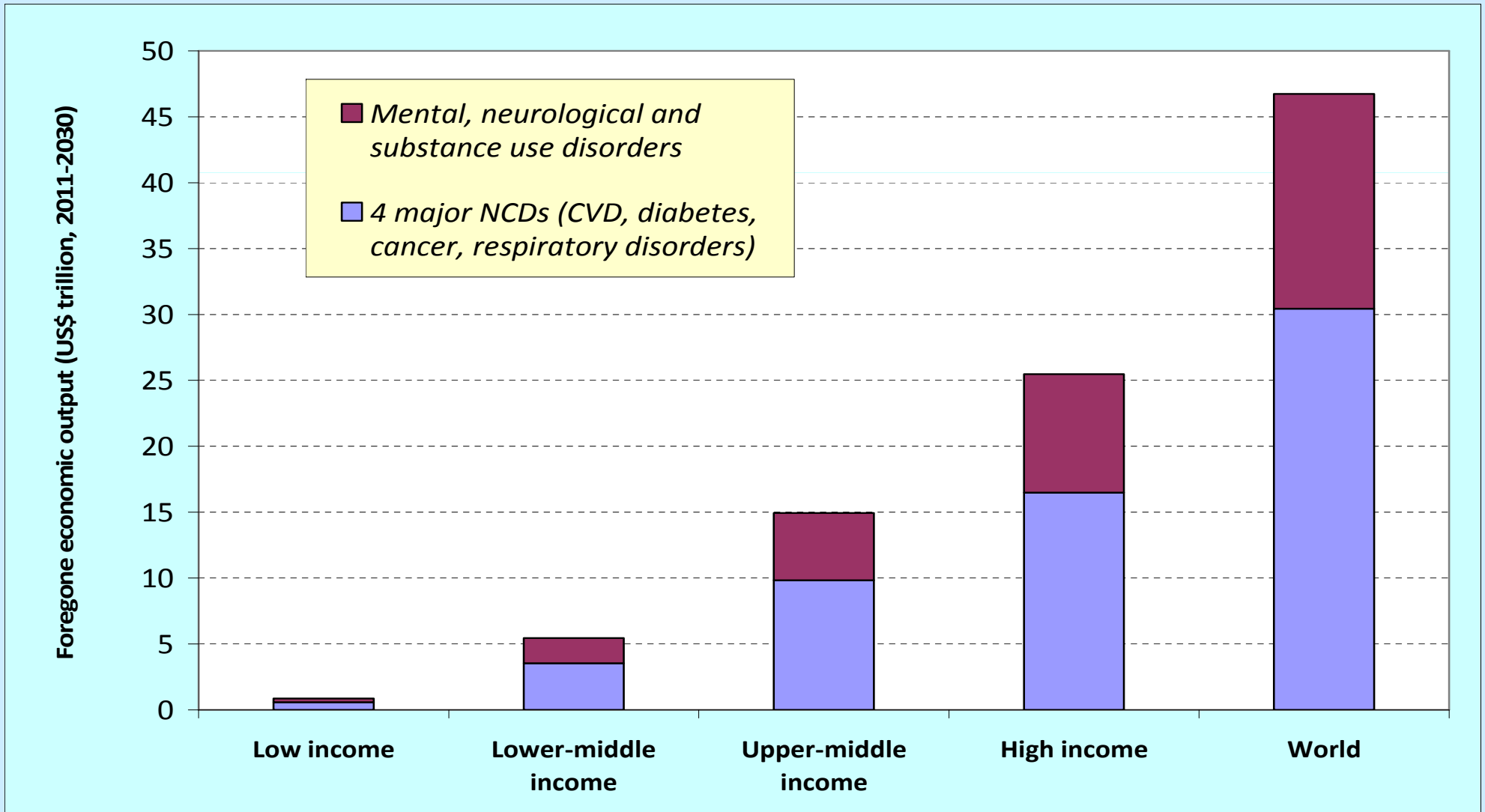
(Source: WEF, 2011 – *The Global Economic burden of NCDs*)

- New estimates by the World Economic Forum for the global economic impact of mental, neurological and substance use disorders, using 3 different (and non-comparable) approaches:
  - Cost of illness  
(health care + lost productivity)
  - Value of lost output  
(reduced economic growth)
  - Value of statistical life  
(monetary cost of lost lives)
- Whichever way you look at it, the amounts are enormous

	2010	2030
<b>Cost of illness</b>	<b>US\$ 2.5 trillion</b>	<b>US\$ 6 trillion</b>
<b>Value of future lost output</b>	<b>N/A</b>	<b>US\$ 16.3 trillion</b> <i>(cumulative)</i>
<b>Value of lost lives</b>	<b>US\$ 8.5 trillion</b>	<b>US\$ 16.1 trillion</b>

# Economic burden of mental disorders

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





# MENTAL HEALTH ATLAS 2011



World Health  
Organization



World Health  
Organization



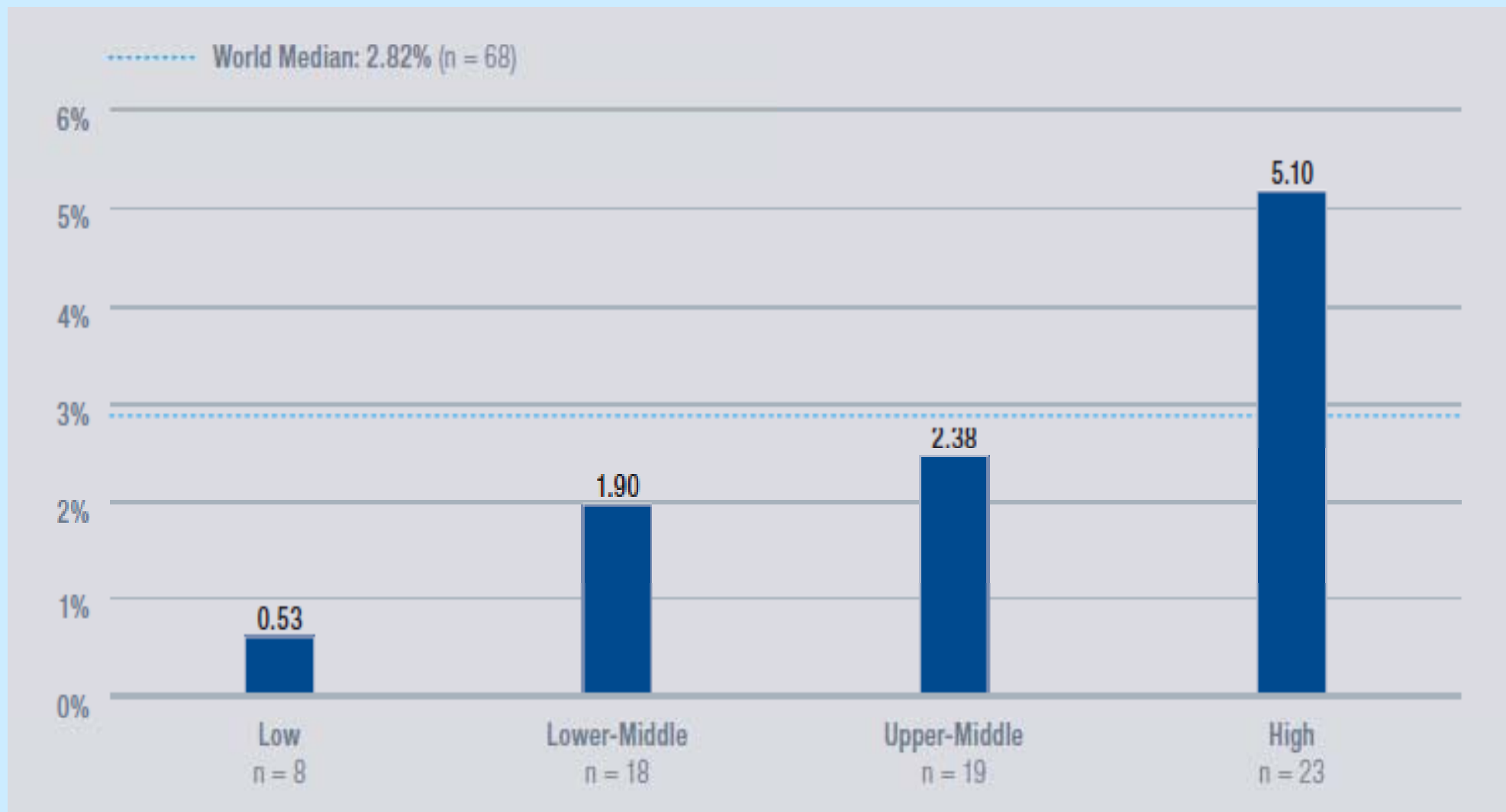
# KEY MESSAGES

- 1. Resources to treat and prevent mental disorders remain insufficient**
- 2. Resources for mental health are inequitably distributed**
- 3. Resources for mental health are inefficiently utilized**
- 4. Institutional care for mental disorders may be slowly decreasing worldwide**



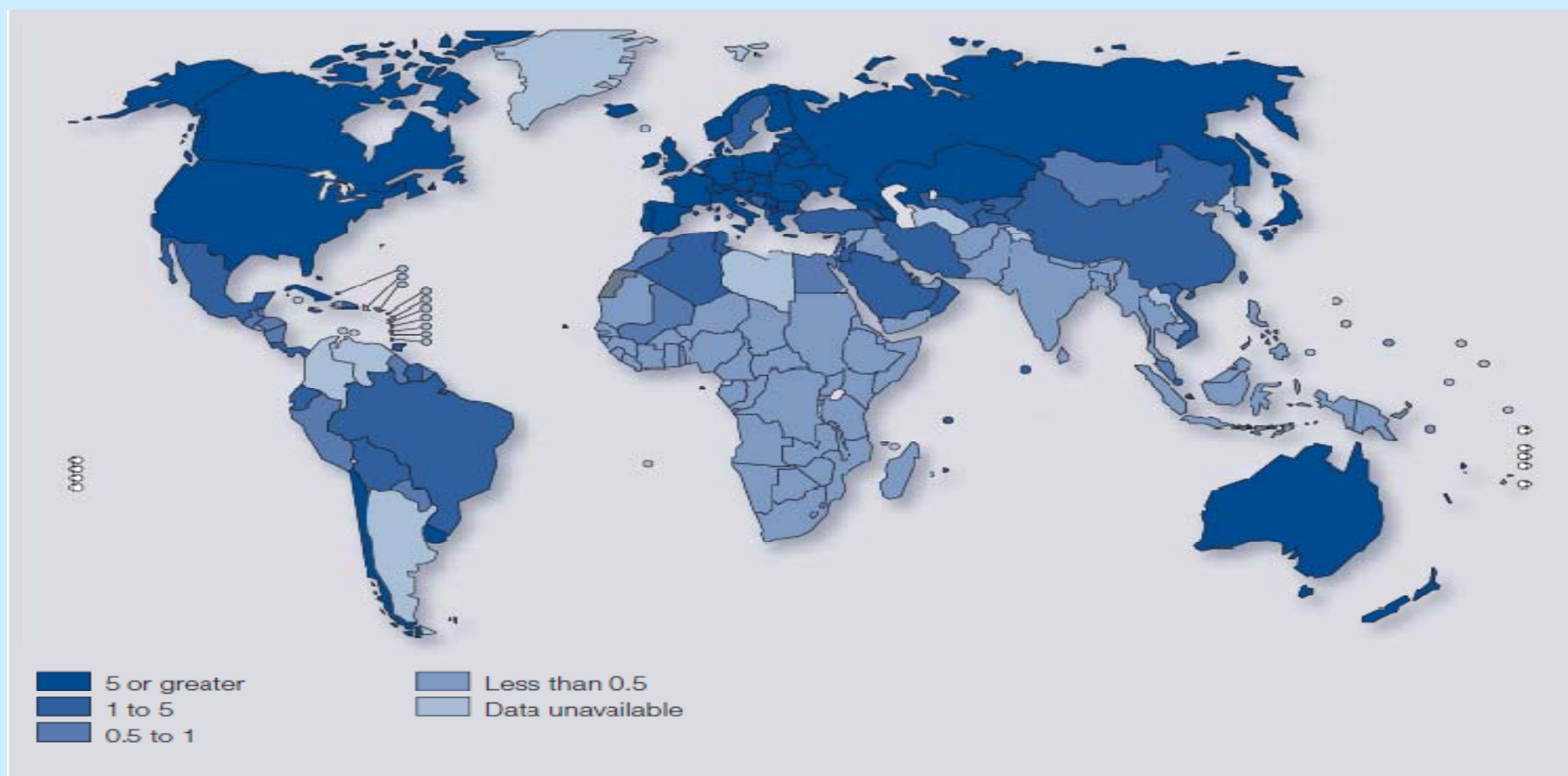
# INSUFFICIENCY

## Budget



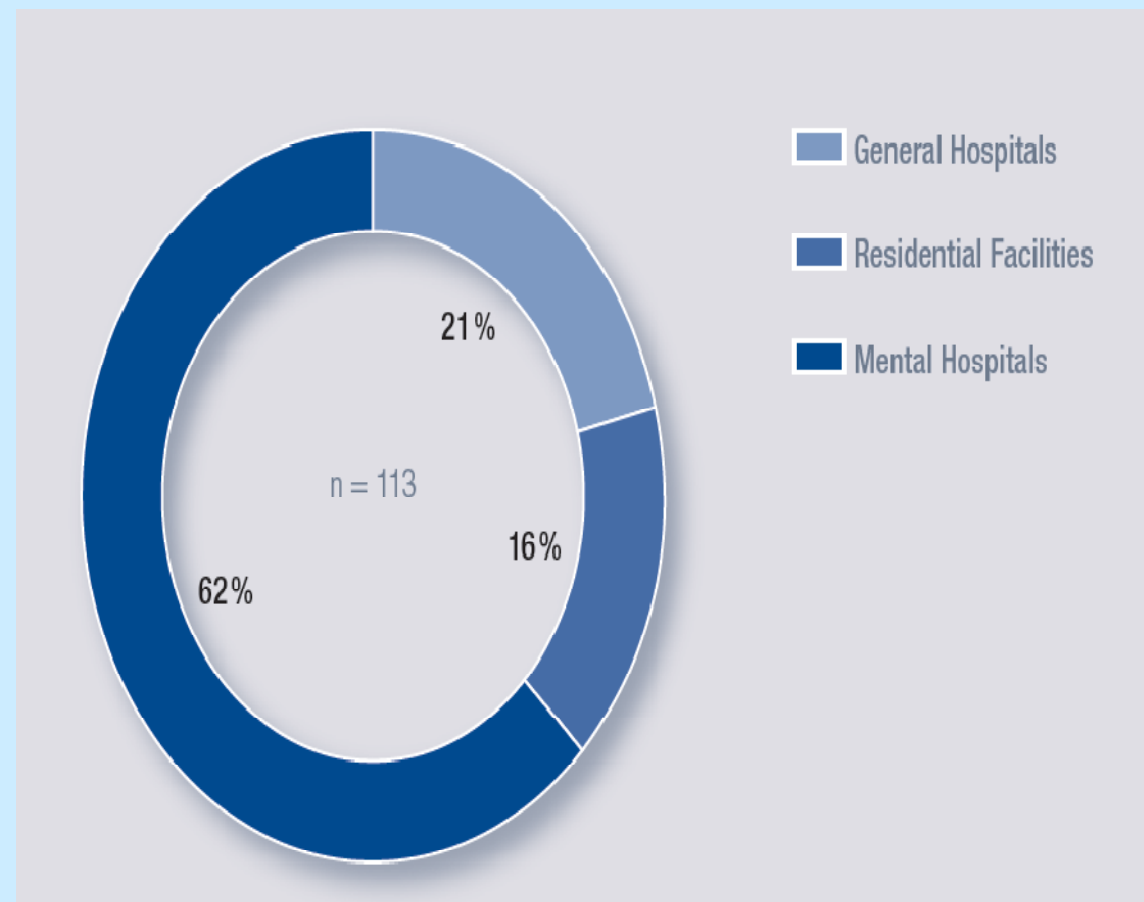
# INEQUITY

Almost half of the world's population live in a country where, on average, there is one psychiatrist or less to serve 200,000 people or more.

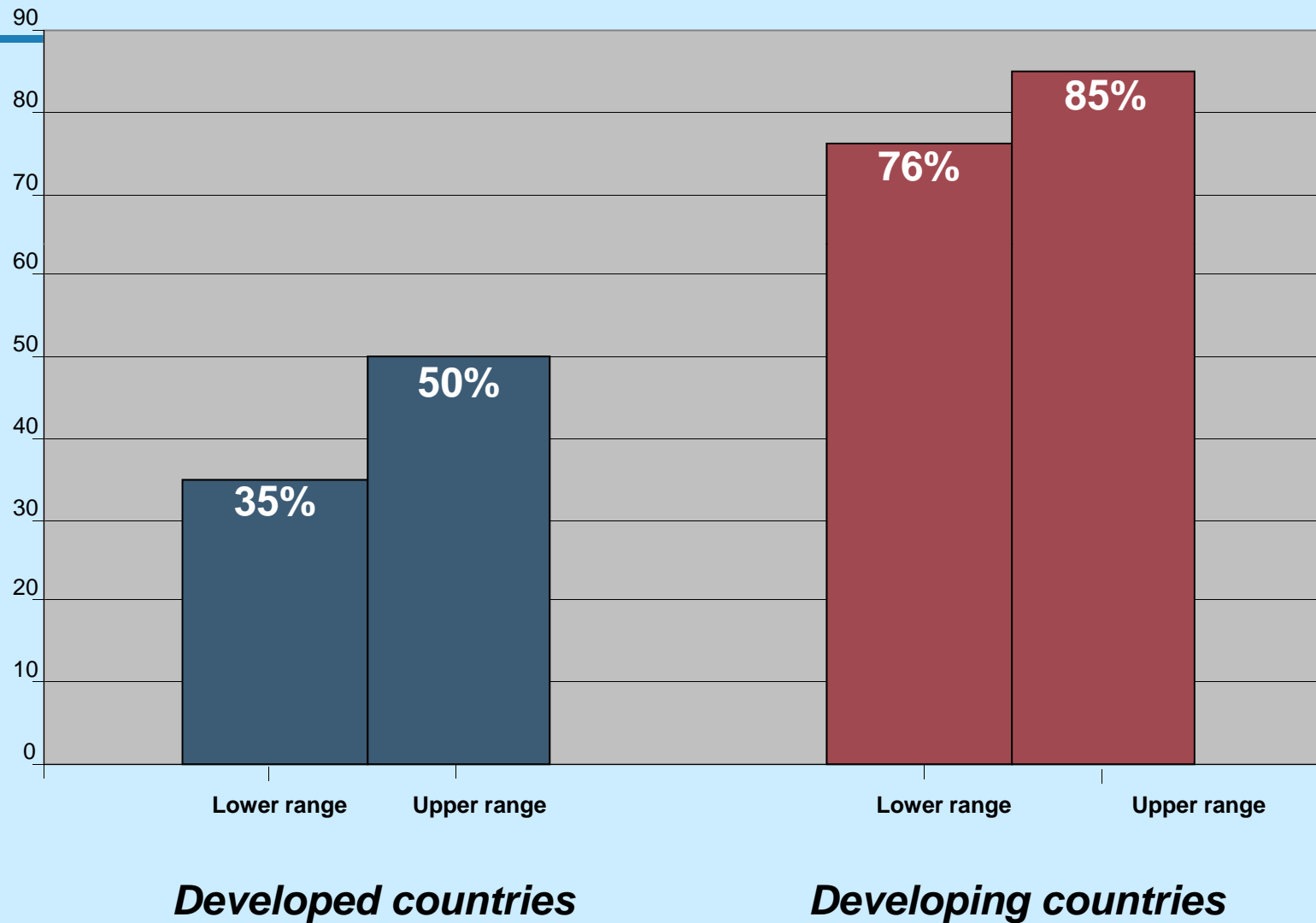


# INEFFICIENCY

Globally, 62% of psychiatric beds are located in mental hospitals.



# Gap in treatment: Serious cases receiving no treatment during the last 12 months



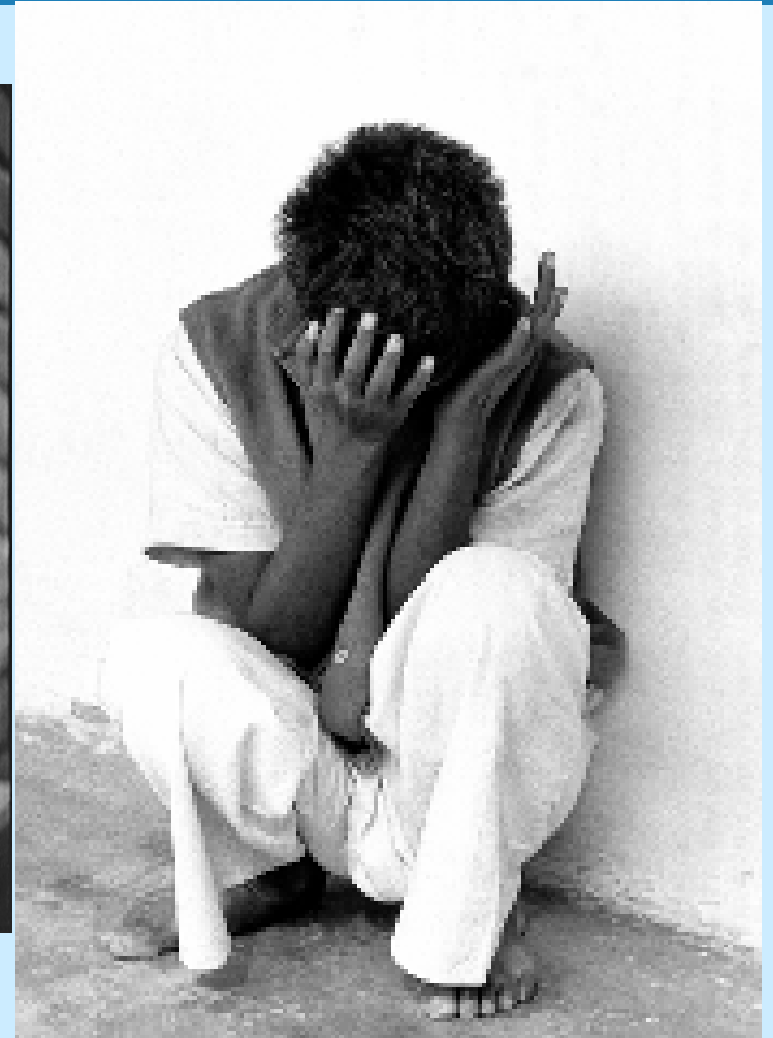
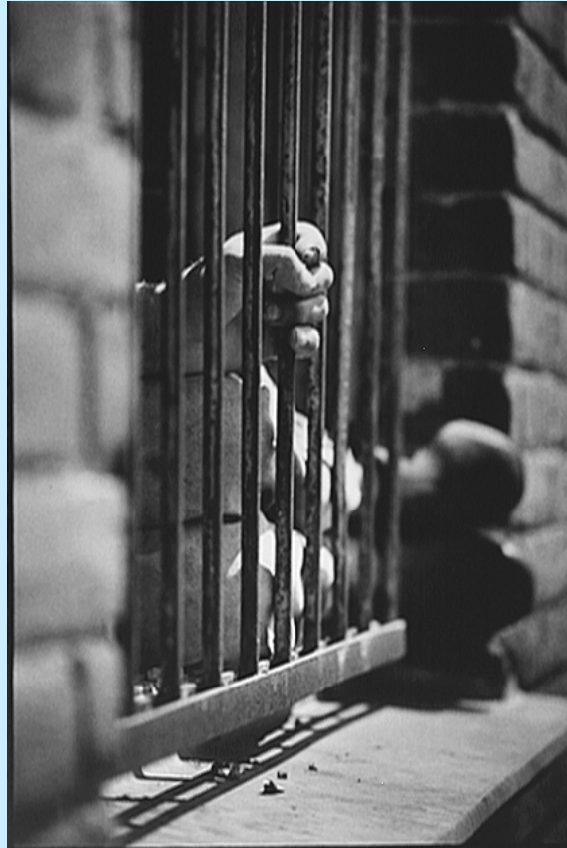
*Developed countries*

*Developing countries*

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



# Human Rights Abuses



# The Lancet Series on Global Mental Health 2007





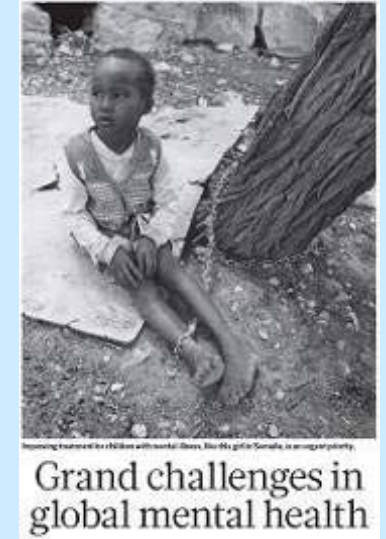
# The Lancet series on Global Mental Health 2011

## Global Mental Health 4

### Scale up of services for mental health in low-income and middle-income countries

*Julian Eaton, Layla McCoy, Maya Semrau, Sudipto Chatterjee, Florence Baingana, Ricardo Araya, Christina Ntulo, <sup>a</sup>Graham Thornicroft, <sup>a</sup>Shekhar Saxena*

# 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

# Mental Health Gap Action Programme (mhGAP)

## WHO's Flagship Programme for Mental Health



**mhGAP** Mental Health Gap Action Programme

Scaling up care for mental, neurological, and substance use disorders



**mhGAP** Programme d'action Comblant les lacunes en santé mentale

Élargir l'accès aux soins pour lutter contre les troubles mentaux, neurologiques et liés à l'utilisation de substances psychoactives



**mhGAP** Programa de Acción para Suplen las Brechas en Salud Mental

Mejora y ampliación de la atención de los trastornos mentales, neurológicos y por abuso de sustancias

(Versión provisional en español)



**mhGAP** برنامج العمل لأرب الفجوة في الصحة النفسية

النهوض برعاية الاضطرابات النفسية والعصبية والاضطرابات الناجمة عن معاقرة مواد الإدمان





# Mental Health Gap Action Programme (mhGAP)

- To achieve significantly higher coverage with key interventions for priority mental, neurological and substance use conditions in resource-poor settings



# Mental health services organized rationally

Scaling up care for mental, neurological, and substance use disorders



mhGAP Mental Health Gap Action Programme

World Health Organization

World Health Organization

World Health Organization

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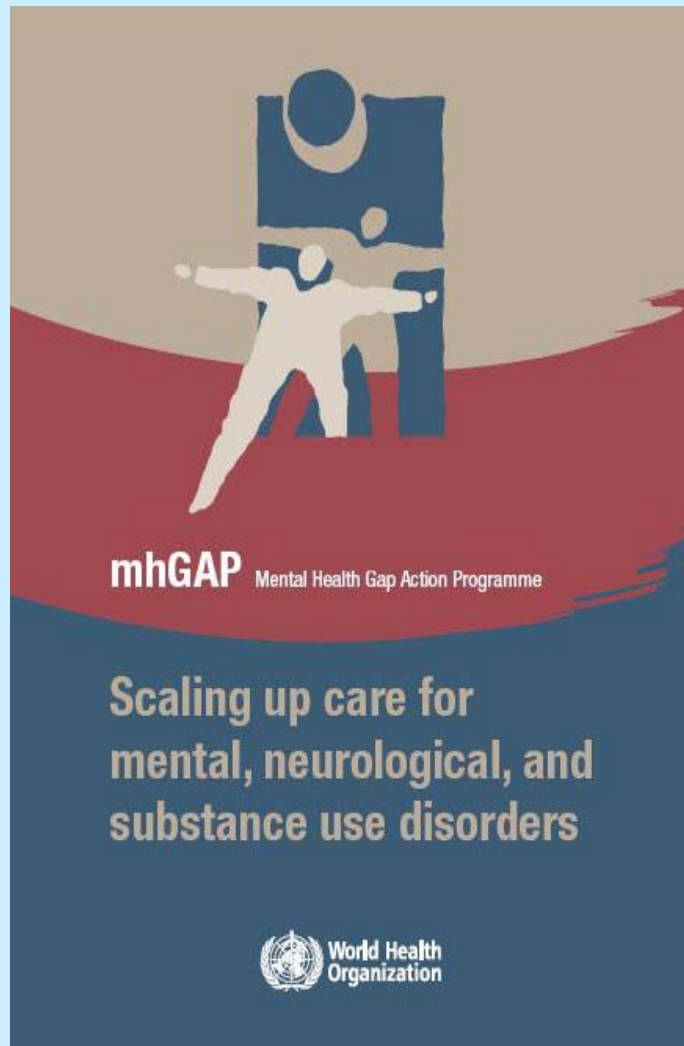
World Health Organization

World Health Organization

World Health Organization



# mhGAP priority conditions



## Priority conditions:

- Depression
- Psychoses
- Suicide prevention
- Child mental disorders
- Epilepsy
- Dementia
- Disorders due to use of alcohol
- Disorders due to illicit drug use

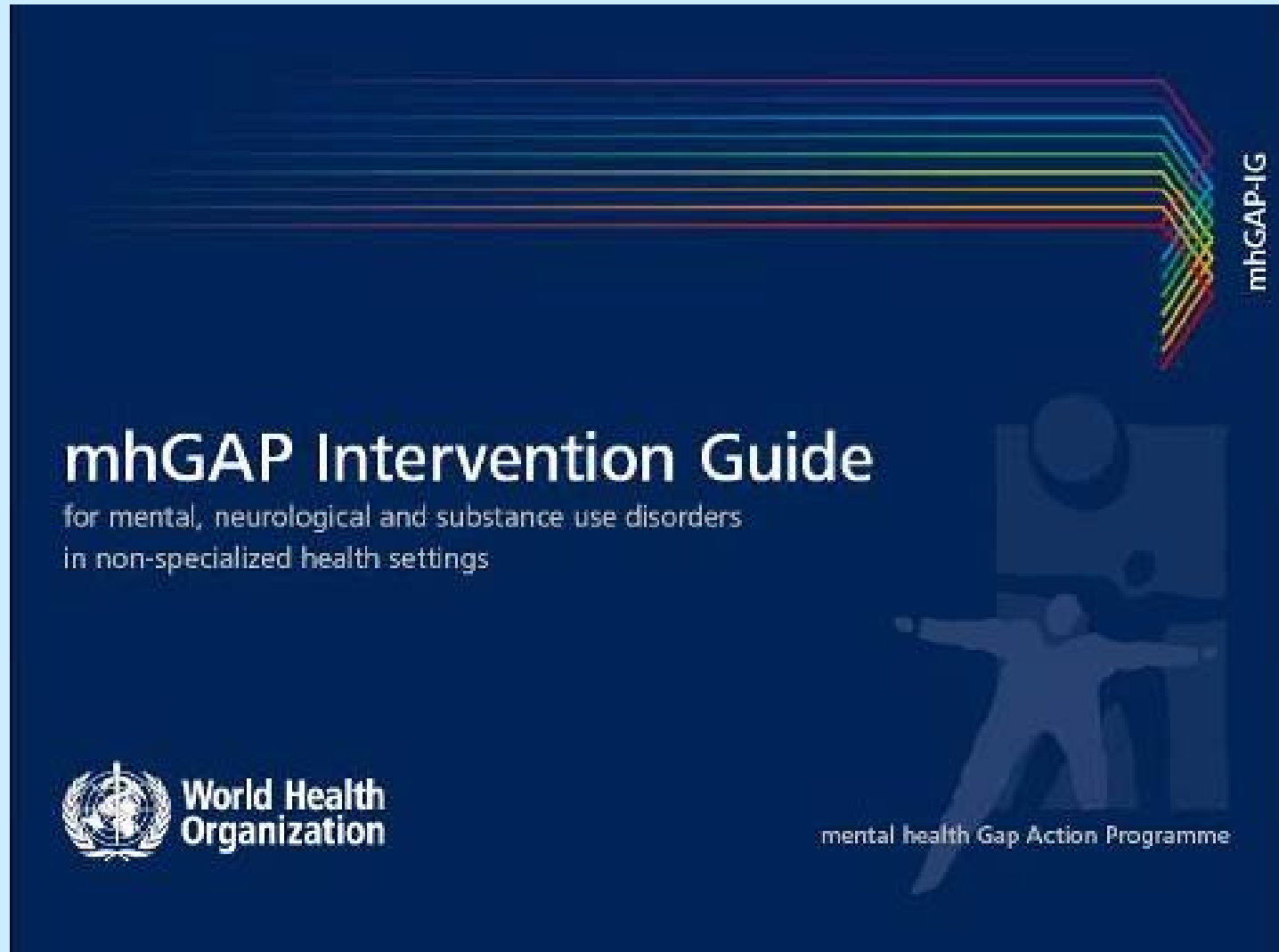
## Criteria:

- High burden (mortality, morbidity, disability)
- Large economic cost
- Effective intervention available

# mhGAP Framework for Action



# October 2010





# Implementation of mhGAP

- Well on their way-
  - Ethiopia, Jordan, Nigeria, Panama, Belize, Benin,
- Preparing for-
  - Brazil, India, Thailand, Uganda, Lao, Pacific islands,
- Many others are using the technical material

# Knowing more about mhGAP



# Global mental health: What should be done now?

- **Increase resources flowing into mental health**
  - From public as well as private sources
- **Use the knowledge that we already have**
- **Train manpower**
  - Specialist and non-specialist
- **Scale up services**
  - Delivering medicines and psychosocial care
- **Decrease human rights abuses**
- **Monitor the situation**

