



**MMS Bulletin #142**

*La santé mentale – une facette oubliée des systèmes de santé*

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**Global Mental Health**

**Collaborating across sectors for sustainable development and wellbeing**

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*This article orients colleagues across sectors to Global Mental Health (GMH) and its relevance for the collective efforts to promote sustainable development and wellbeing. The authors include examples of GMH resources organized into 10 areas of "GMH Engagement". Colleagues are encouraged to connect and contribute to GMH as they consider the application of the materials featured in this article for their work.*



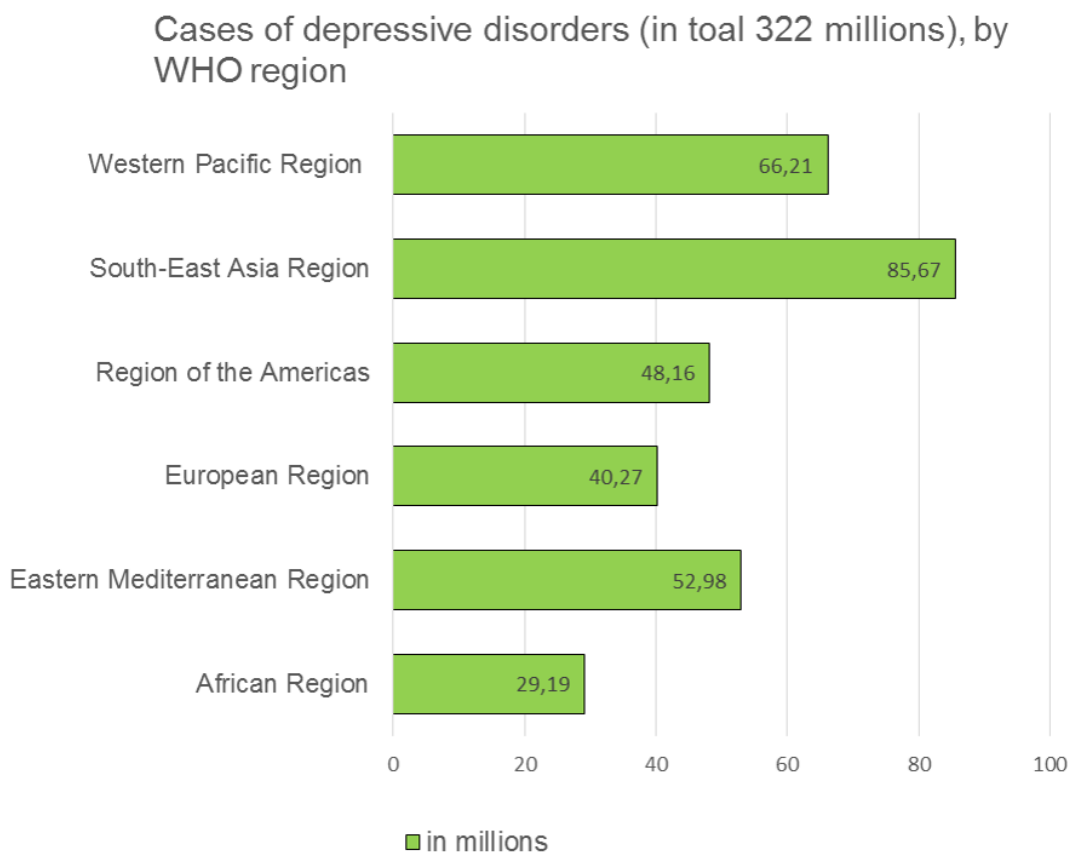
WHO's World Health Day Campaign 2017 "Let's Talk"

**Introduction**

Global Mental Health (GMH) is a rapidly growing domain, and there is increasing recognition of its important impact on sustainable development and wellbeing. Its extensive purview is reflected in this broad-based, inclusive definition:

*"GMH is an international, interdisciplinary, culturally-sensitive, and multi-sectoral domain which promotes human wellbeing, the right to health, and equity in health for all. It encourages healthy behaviors and lifestyles; is committed to preventing and treating mental, neurological, and substance use conditions especially for vulnerable populations (e.g., in settings of poverty, conflict, calamity, and trauma and in low- and middle income countries); and seeks to improve policies and programs, professional practices and research, advocacy and awareness, and social and environmental factors that affect health and wellbeing."* (O'Donnell, 2017)

Mental health affects and is affected by many crucial issues pertinent to global development, and quality of life, including poverty, food security, trauma, conflict, interpersonal violence, terrorism, gender equality, education, human security, natural disasters, and climate change. Mental health is a positive state that everyone has to a certain extent, and while it is often perceived as merely an absence of mental illness, people who experience mental illness still value their mental health and are active agents in protecting and promoting it. This said, mental ill health does contribute significantly to the total global burden of disease. Anxiety and depression for example, respectively affect an estimated 264 million and 322 million people and contribute to an estimated 3.4% and 7.5% of all years lived with disability. Depression is the single largest contributor to global disability. (WHO, 2017a)



Adapted from Depression and Other Common Mental Disorders: Global Health Estimates. Geneva: World Health Organization; 2017.

Despite the fact that there are hundreds of millions of people experiencing a mental, neurological, or substance use condition, the attention paid to these conditions has been scant historically. Even in high income countries only 35-50% of the people with severe mental disorders receive treatment, and in low income countries the vast majority, typically 76-85%, receive little or no effective care (WHO, 2013, p. 8). In sub-Saharan Africa, governments spend only around 1% of their health budgets on mental health, a number that is very similar to the proportion of international development assistance for health dedicated to mental health (Gilbert, Patel, Farmer, and Lu, 2015)

Further, the extreme neglect, human rights abuse, and social exclusion of people with mental illness means that they could be seen as the epitome of people who are “left behind.”

*Achieving the ambitious targets of the 2030 Agenda requires a revitalized and enhanced global partnership that brings together Governments, civil society, the private sector, the United Nations system and other actors and mobilizes all available resources.*

*Sustainable Development Knowledge Platform, United Nations (2017)*

## **Mental Health in the UN Agenda 2030**

Mental health is explicitly prioritized in Sustainable Development Goal 3 as part of the overall commitment “to ensure healthy lives and promote wellbeing for all at all ages.” In addition, there are three targets under Goal 3 that have important implications for not just mental health but overall health and sustainable development themselves:

1. By 2030, reduce by one third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being (3.4)
2. Strengthen the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol (3.5); and
3. Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all (3.8). (United Nations, 2015)



Excerpt of WHO Mental Health Action Plan cover

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

*"[The Mental Health Action Plan] takes a comprehensive and multisectoral approach, through coordinated services from the health and social sectors, with an emphasis on promotion, prevention, treatment, rehabilitation, care and recovery. ...The action plan has, at its core, the globally accepted principle that there is "no health without mental health." (Mental Health Action Plan 2013-2020, World Health Organization, WHO, 2013, p. 6)*

Currently the foundational document guiding the world community's multi-sectoral efforts to improve and provide mental health for all is the World Health Organization's *Mental Health Action Plan 2013-2020* (WHO, 2013). This widely endorsed *Action Plan* aims 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" (p. 9). Its four main objectives are to:

- I. strengthen effective leadership and governance for mental health;



2. provide comprehensive, integrated mental health and social care services in community-based settings;
3. implement strategies for promotion and prevention in mental health;
4. and strengthen information systems, evidence and research for mental health” (p. 10).

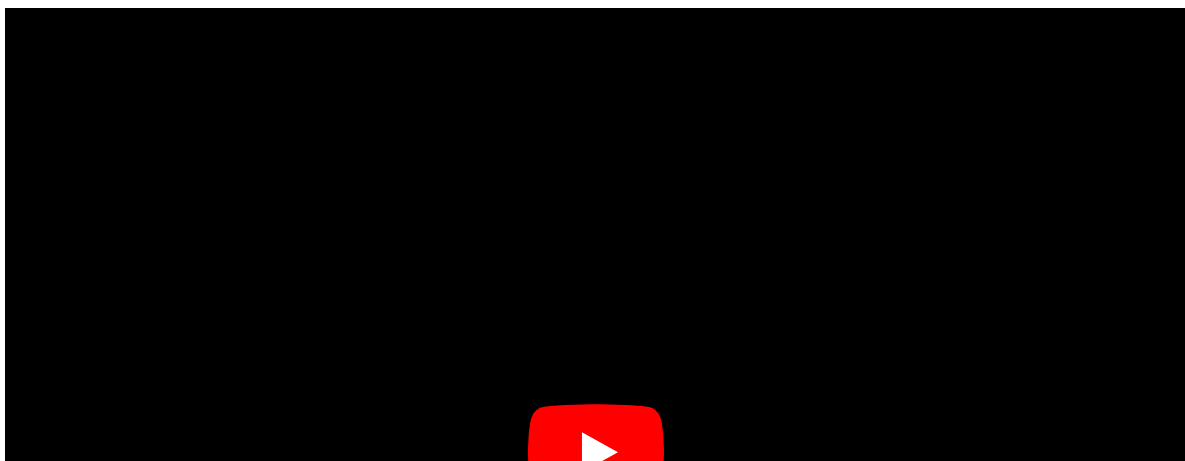
## ***GMH Engagement: Connecting and Contributing Across Sectors***

Since its inception as an emerging domain, GMH has been a collaboration between academia, civil society (including NGOs and people with psychosocial disabilities arising from mental illness), multilateral agencies like the WHO, those involved in emergency response and development, and governments. The non-governmental/civil society sector is specifically referenced in the Action Plan as having an important contribution to make to achievement of its objectives. Historically this sector has been an important provider of health care, education, and social protection, and while continuing to do this, is increasingly aligning itself to both national policy and plans, and global initiatives like the WHO *Mental Health Action Plan*.

In this next section we aim to orient colleagues from different sectors to several representative, recent GMH resources. We have organized the resources into 10 overlapping areas of GMH Engagement. “These materials have been identified through searches of both peer-reviewed literature databases, and grey literature available through emerging networks joining academia, civil society and advocacy organizations in Global Mental Health (see ‘networks’ below). Our goal is for colleagues across sectors to get a quick overview of the GMH domain and to consider opportunities for integrating GMH into their work towards sustainable development and wellbeing. For more GMH resources see O’Donnell and Lewis O’Donnell (2016).

### ***GMH Engagement I: Overview.***

Watch the 12 minute the TEDTalk (2012), *Mental Health for All by Involving All*, by Vikram Patel. This inspiring and informative presentation highlights serious issues in GMH and the strategic use of trained community members to help people with mental disorders. For a summary of some of the concerns associated with GMH, such as the cultural relevance of diagnoses and treatments, see Kirmayer and Pedersen (2014).





TED Talk Mental Health for All by Involving All (2012)

### ***GMH Engagement 2: Human rights.***

QualityRights (2017b) is a major initiative by the World Health Organization to educate and advocate for the rights and wellbeing of people with mental and psychosocial disabilities. A major part of this initiative is “a comprehensive package of training and guidance modules. The modules can be used to build capacity among mental health practitioners, people with psychosocial, intellectual and cognitive disabilities, people using mental health services, families, care partners and other supporters, NGOs, DPOs and others...” (quote from website). The first two modules, for example, are Understanding Human Rights (2017) and Promoting Human Rights in Mental Health (2017).

One of the foundational human rights documents that includes human rights for people affected by mental conditions is the Convention on the Rights of Persons with Disabilities (2006). Its purpose is to “promote, protect and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities, and to promote respect for their inherent dignity. Persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others.” See also the recent UN Human Rights Council’s, Resolution on Mental Health and Human Rights (2016) co-sponsored by over 60 countries as well as the Report of the Special Rapporteur on the Right of Everyone to the Enjoyment of the Highest Attainable Standard of Physical and Mental Health (United Nations, 2017).

### ***GMH Engagement 3: Networks and knowledge exchange***

The Movement for Global Mental Health (MGMH) is a premier network connecting the diversity of GMH colleagues. It was launched in 2008 and currently has around 200 organizational members and 10,000 individual members. The MGMH compiles regular newsletters with updates and information and offers various resources on its web site.

In addition, the Mental Health Innovation Network (MHIN) provides not only access to resources and updates from practitioners and other stakeholders, but platforms for communication.

## **GMH Engagement 4: Evidence compilations**

There are a growing number of special journal issues and edited textbooks focusing on GMH. The journals, *Global Mental Health*, *International Journal of Mental Health Systems*, *BJPsych International*, and *International Perspectives in Psychology* are examples of specific GMH-related journals, but there is also an increase in publications in more generic journals that reflect the increased interest in this area. Two of the first compilation-textbooks are *Global Mental Health: Trauma and Recovery* (2011) edited by Richard Mollica; and *Global Mental Health: Principles and Practice* (2013) edited by Vikram Patel, Harry Minas, Alex Cohen, and Martin Prince. The most recent is *The Palgrave Handbook of Sociocultural Perspectives on Global Mental Health* (2017), by Ross White, Sumeet Jain, David Orr, and Ursula Read.

*The Lancet* journal has been a consistent supporter of GMH, with the 2007 Lancet Series on GMH laying out the key rationale and setting the agenda, followed by a second series on GMH (in 2011). The latter features six articles summarizing research on mental health and poverty, child and adolescent mental health, mental health in humanitarian settings, scaling-up mental health services, human resources for mental health and human rights. *The Lancet* is to publish a special Commission on GMH, this time focusing more on preventing and addressing the underlying causes of mental ill health and promoting a more holistic view of the role of mental health in achievement of global development objectives.

Cochrane Global Mental Health, launched in 2017, aims to support the production, dissemination and implementation of systematic reviews relevant to mental health in low- and middle-income countries (LMICs).

In terms of setting a research agenda, the Grand Challenges in Global Mental Health (*Collins et al*, 2011) article in *Nature* identifies 25 research priorities for GMH (e.g., integrating mental health into primary health care, reducing cost and improving supply of effective medications, providing community-based care, improving children's access to care in low-middle income countries, and strengthening mental health training for all health personnel).

## **GMH Engagement 5: Humanitarian and developmental assistance**

The Inter-Agency Standing Committee (2007) *Guidelines for Mental Health and Psychosocial Support in Emergencies* is the standard practical guide. *The Sphere Project: Humanitarian Charter and Minimum Standards in Humanitarian Response* (2011), which includes guidelines for mental health assistance in emergency-humanitarian settings, is currently undergoing a major update (publish date early 2018). *Mental Health and Psychosocial Support for Persons of Concern* (2013a) and *Mental Health and Psychosocial Support for Staff* (2013b) are by the United Nations High Commissioner for Refugees (UNHCR). Both are global reviews of how the UNHCR is integrating mental health and psychosocial support (MHPSS) into its programs for refugee assistance and staff care as well as issues that hinder MHPSS and recommendations for

improving MHPSS. *Psychological First Aid: Guide for Field Workers* (WHO, World Vision, War Trauma Foundation, 2011) is the most widely used resource for helping front-lineworkers to provide psychosocial support to people and communities affected by distressing events.

See also *The Impact of Mental Health and Psychosocial Support Interventions on People Affected by Humanitarian Emergencies: A Systematic Review* (Oxfam, 2017); and the *mhGAP Humanitarian Intervention Guide: Clinical Management of Mental, Neurological, and Substance Use Conditions in Humanitarian Emergencies* (WHO and UNHCR, 2015).

The journal *Intervention*, specifically focuses on the area of mental health and trauma, and the Mental Health and Psychosocial Support Network, is the main online resource platform and network.



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## **GMH Engagement 6: Training**

The *Centre for Global Mental Health (CGMH)* at the *London School of Hygiene and Tropical Medicine* and the *Institute of Psychiatry, Psychology and Neuroscience* in London launched a MSc course in GMH in 2012, the first of its kind. In addition, there are individual GMH-related courses taught as part of graduate studies programs (e.g., Duke University, Yale, George Washington University, Columbia University, Fordham University, and Johns Hopkins University) and opportunities for doctoral research related to GMH. Other formal training programs (degree and certificate) include the International Masters in Mental Health Policies and Services, NOVA University of Lisbon; and the GMH: Trauma and Recovery Certificate



Program, Harvard Program in Refugee Trauma. Brief Mental Health Leadership courses in India, Nigeria and Egypt provide up-to-date public mental health knowledge and skills focused on the needs of their specific continental contexts.

## ***GMH Engagement 7: Advocacy***

World Mental Health Day (WMHD) takes place each year on 10 October and is one of the most visible and widespread advocacy efforts for mental health. Spearheaded by the World Federation for Mental Health (WFMH) and in association with many other organizations around the world, it promotes mental health and creates awareness about the issues associated with mental illness. This year's theme for 2017 is Mental Health in the Workplace. For a listing of the previous WMHD themes since 1992 see WMHD: 25 Years (GMH-Map website, homepage) and for a short overview of its history see the WMHD overview (WFMH website).

Many other organisations provide effective advocacy on various elements of global mental health, such as FundaMentalSDG (focusing on the Sustainable Development Goals), and iFred (changing perceptions of depression).

## ***GMH Engagement 8: Personal stories and user perspectives***

Hidden Pictures: A Personal Journey into Global Mental Health (Ruston, 2013) is a widely acclaimed feature film on GMH. Filmed in four continents, it presents the experiences of different people who struggle with mental illness, including the film producer's (Delaney Ruston) own experience of her father's struggles with schizophrenia.



## HIDDEN PICTURES: A Personal Journey Into Global Mental Health (Trailer of Delaney Ruston's film)

Patient Voices is a special part of the Health section in the online *New York Times*. It includes audio files and photos of people discussing their experiences with chronic diseases and mental health conditions. Listen to the short personal accounts. Have a look also at the stories from various sources on the GMH Voices section on the GMH-Map website.

There are a number of global, regional and national service user organisations, or organisations of people with psychosocial disabilities. These include the World Network of Users and Survivors of Psychiatry, and the Pan-African Network of People with Psychosocial Disabilities. Their Cape Town Declaration is a powerful statement of the key role that people affected by mental illness have in global mental health.

### **GMH Engagement 9: Resources for practitioners and consumers**

The list of materials in this section, as in other sections, is virtually endless. One example which is widely used for both training and guidance is the *mhGAP Intervention Guide for Mental, Neurological, and Substance Use Disorders in Non-Specialized Health Settings* (WHO, version 2.0, 2016). The *Guide* offers materials for the integrated management of major disorders using evidence-based protocols for clinical decision making.

Other guidance can be found in compilations like the *PLoS Medicine Series on Global Mental Health Practice* (2012), and on *Packages of Care in Low and Middle Income Countries* (2009). *Where There is No Psychiatrist* (Patel, 2003) is a well-established basic field guide, and several research studies have produced helpful manuals, like *Thinking Healthy* (WHO, 2015), for care of mothers with depression.

### **GMH Engagement 10: Media matters**

Watch these two popular, animated videos: *I Had a Black Dog* (portraying an individual's struggle with depression, his symptoms, and suggestions for dealing with it) and *Living with a Black Dog* (portraying a caregiver/family member's perspective on how to help someone struggling with depression).

Madness Radio has over 150 archived radio programs online for free. The programs are diverse both in the subject matter and the perspectives shared on mental health. As an example of short films about mental health issues in different countries, see the Parivartan Trust's *Jagruti (Awakening)* and *Mann kiAankhe (Eyes of the Mind)* which focus on India (2017, in Hindi). Also see Promundo's short film on trauma care and recovery in the Democratic Republic of the Congo, *Living Peace* (2015).



Living Peace: The Story of Abby and Kyalu reports on the programme in the Democratic Republic of Congo "to assist participants in healing from their experiences of trauma by restoring social and partner relationships, and strengthening positive coping strategies that exclude all forms of violence." To learn more go to the Living Peace website.

### ***Staying the course for sustainable development and wellbeing***

Just like in any other domain, finding the most helpful information on GMH can be challenging, even daunting. GMH is growing fast, and it is easy to get lost or discouraged in the effort to meaningfully connect and contribute. In addition, not every colleague, organization or graduate program is oriented towards global issues and global applications of mental health. In spite of our increasingly globalized world, there are many challenges that keep us focused on our own immediate, nearby "worlds" not the least of which are the dangers and injustices that seriously affect the worlds of colleagues and fellow humans. Nonetheless, we also note of the increasing desire for people around the world to be involved in important issues, recognizing the role they can play in supporting fellow citizens. Regardless of challenges and risks, people want to use their training, passions, and resources to help make a positive difference in the quality of life for people, from the local through the global levels.

We want to encourage people across sectors to take the time to explore the GMH domain. A helpful way to do this is by reviewing the materials in this short article. Multi-sectoral GMH involvement and integration are not always easy. So persevere as you seek to connect and contribute in new ways on behalf of sustainable development and wellbeing for all.



*Dr. Kelly O'Donnell is a consulting psychologist based in Geneva. He is the CEO of Member Care Associates and focuses on global integration (linking our skills/values/relationships to promote wellbeing), personnel development, global mental health, and integrity/anti-corruption. Kelly lectures and consults internationally and is a representative for the World Federation for Mental Health at the United Nations. His publications include over 70 articles and five books in the member care and mental health fields. This article is the eighth in a series of articles authored or co-authored by Kelly which overviews GMH (O'Donnell, 2017). It expands and updates Global Mental Health: Finding Your Niches and Networks. E-mail*

*Julian Eaton, a British psychiatrist, is Assistant Professor at the London School of Hygiene and Tropical Medicine, and Senior Mental Health Advisor for CBM International. His work involves engaging with Governments and other service providers to strengthen mental health systems as well as broader civil society and service user organizations. He is currently leading on a research project integrating mental health into primary health care in Nigeria, and has published on issues relating to mental health in low income countries, and human rights. He is a member of the Lancet Commission on Global Mental Health, and is the strategic lead for the Mental Health Innovations Network. He recently returned from 13 years in West Africa, initially in Nigeria, and more recently in Togo, from where he worked in countries across the continent. E-mail*

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