## BRIDGING GAPS IN MENTAL HEALTH: AN AGENDA FOR ACTION

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### **ABSTRACT**

Mental disorders are highly prevalent and cause considerable suffering and disease burden all over the world. To compound this public health problem, many individuals with psychiatric disorders remain undiagnosed and untreated although effective treatments exist. The public health impact of mental disorders is profound as the estimated disability-adjusted life-years attributable to mental disorders have been shown to be very high.

Despite the growing evidence about the impact of mental illnesses, mental health services continue showing big gaps. There are clear differences in the practice of psychiatry around the Globe but the low income and developing countries witness more visible gaps in many areas of mental health care. Less number of mental health professionals, scarcity of mental health resources & now often facing additional problems of migration of trained psychiatrists and mental health professionals to the already resource rich countries, the situation gets even worse.

This paper presents an overview about the mental health gaps and their impact on the delivery of services. It is argued that there is no health without mental health and innovation, networking and basic training as well as better models of care using simple but effective paradigms need to be put in place for better health service.

**Key Words:** Mental health; Psychiatry; Mental disorders; Mood disorders; Life Stress; Suicide.

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## INTRODUCTION

Health being a very broad, extensive & wide ranging subject is gaining a significant importance in current national and international priorities for developing policies & planning services at different levels of care. Definition of health has however been debated and contested over many years. WHO's proposed definition (1948) of heath is generally accepted as an idealistic approach rather than a realistic goal as it defines health as "a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity". However this definition is not without criticism as one can argue that health cannot be defined as a state at all, but

should be seen as a process of continuous adjustment to the changing demands of living and of the changing meanings we give to life.<sup>2</sup>

Since the introduction of this definition, there have been many modifications in this proposed concept of health. Concerns have been raised about the absoluteness of the word "complete" in relation to well-being and also noting a change in the prevalence and incidence of illnesses that have modified the nature and patterns of many illnesses. Shifting of the burden of many diseases from acute needs to chronic needs (with the effects of longevity of life in present age) has also changed outcome variable for many diseases. Whereas the disease patterns are changing with early recognition, improved treatment modalities, refinement in early diagnosis & availability of new intervention techniques, the concept of cure to care is also adding the cost of well-being & thus accounting for increasing expenditures of the healthcare system in all countries. Furthermore new emerging specialities and innovation in service delivery in medical practice are posing further challenges in understanding about the health related boundaries.3,4

Health in general terms also includes mental well-being. Mental health thus constitutes an essential component of overall well-being and is seen as an integral part of general health systems. As per popular slogan that there is no health without mental health, there is a worldwide recognition about the forgotten needs of mentally ill.5 Mental health covers a number of concepts comprising of a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community. While mental health problems can range from day to day normal stresses & impaired functioning associated with distress to diagnosable mental disorders, mental illnesses are also associated with poor physical health, increased risk behaviours, social deprivations and many other adversities that affect quality of life across different dimensions of functioning.<sup>6</sup> Similarly the mental health problems of people are determined & influenced by a multiplicity of factors, including biological (e.g., genetics, gender), individual (e.g., personal experiences), family and social (e.g., social support) and economic and environmental factors (e.g., social status and living conditions).

#### **GLOBAL TRENDS**

Current epidemiological evidence points out towards an increasing and rising number of mental health problems all over the globe.7 Recent epidemiological data confirms these trends and mental illnesses are emerging as a major public health issue leading to one of the largest single source of burden of disease.8 Mental health problems are highly prevalent in general population and affect a large number of people with variable impacts. WHO's 2001 World Health Report<sup>9</sup> was devoted entirely to mental health and looking at the economic impacts of mental illnesses, a number of other reports have also emphasized better mental health as part of the strategy to improve disadvantaged economies around the globe.<sup>10</sup>

Mental health is central to the functioning and well-being of all citizens.<sup>11</sup> World's mental capital, including the potential of the emotional, cognitive and intellectual abilities of general public, is one of the needed resources for sustainable and justifiable growth of all the countries. Mental health is equally important for learning, working, social development and the social cohesion of societies. Without mental health, the potential for economic & financial growth is limited and at a time when the aims of increasing productivity and reducing social and health inequalities go hand in hand, there is an urgent need to reduce the human, societal and economic costs of mental health problems by way of effectively implementing modern policies and practices.12

The general statement that one in four people experience a significant mental health problem during their lifetime is getting a worldwide recognition but despite this importance the 'treatment gap' between the needs and provision of appropriate mental health services remain deficient. There is an ample evidence that mental ill health causes significant losses and burdens to the economic, social, educational as well as criminal and justice systems. Similarly stigma, discrimination and non-respect for the human rights and the dignity of mentally ill and disabled people continue challenging the core values of modern living.

Mental health problems can affect people at any stage of their lives. Mental disorders often have their onset at a young age and there is a strong relationship between poor mental health and social deprivation, with the causal influences working in both directions. In addition, mental health problems are associated with physical diseases and early mortality. Suicide, for example, is one of the top ten leading causes of premature death & linked to mental disorders that continue adding more importance to the needs for improving mental health in almost all cultures & all settings.<sup>14</sup>

In terms of worldwide epidemiology, every year up to around 25% of the population will suffer from some form of mental disorder, and at least two-thirds of those who suffer would receive inadequate or no treatment, even in countries with the best resources. Whereas strong evidence is available for effective and efficient interventions to protect mental health and to prevent and treat mental disorders, most people at risk of suffering from mental health problems do not receive any form of intervention. The treatment 'gap' gets bigger and bigger in many countries and despite the great attention given by WHO and other international health organizations, most countries pay less attention to such needs leaving mental health not only neglected but also deeply stigmatized.<sup>13</sup>

### **MANAGEMENT**

The issue of manpower development and capacity building in mental health remains a forgotten area all over the world. As per WHO's description the number of mental health professionals is far below the desired strengths and looking at the number of psychiatrists the situation even gets worse in most of the countries. Finding from recent WHO data emphasizes this point as less than one psychiatrist is available per one million population in many countries. Similar picture emerges about other mental health professionals including nurses, social workers, psychologists and community mental health workers.<sup>15</sup>

The physical health of people with mental illnesses is remarkably neglected. Mentally ill have a higher prevalence of major physical diseases and a higher mortality for natural causes than the general population.<sup>16</sup> They are also deprived for access to physical health care and the quality of the physical care they receive is even poorer as compared with the general A recent publication clearly population. documents the gap between availability of services for physical and mental disorders and states that only a minority of even severe cases of mental disorder receive treatment as compared to severe physical disorders. As per this paper, seriously disabling mental disorders were only about half as likely to be treated as seriously disabling physical disorders (35.3% vs. 77.6%) in developed countries, while only about 20% likely to be treated as comparably severe physical disorders in the developing countries (11.9% vs. 64.0%).17 This low treatment rate is consistent with the low rate of recognition and general awareness about the importance of mental health and its significance to general well being in primary care, especially if comorbid with physical disorders. In combination with the burden of disability that mental disorders produce, the low treatment rates call for more attention to mental disorders.

More than 85% of the world's population lives in low- and middle-income countries, with most

of these countries allocating very limited financial resources and clearly inadequate manpower and infrastructure for mental health. These neglected aspects are connected with many other adversities thus adding more problems and increasing burden on the health systems in these countries. Many low- and middle-income countries lack mental health policy and legislation and this comes up as a strong barrier affecting the development of mental-health programmes and services. 12,15

Despite the importance of mental health it is a pity that this aspect of health is not getting its due recognition. WHO has repeatedly argued about the positive dimensions of mental health but the fact remains with clear gaps in mental health at all levels of policy, man power development, capacity building and service provisions. The theme for 2015 World Mental Health Day, observed on 10th October, was "Dignity in mental health". It was again highlighted that millions of people with mental health conditions are deprived of their human rights & not only discriminated against, stigmatised and marginalised but are also subjected to emotional and physical abuse. It has been argued and debated with a strong conviction that people with mental health conditions should live with dignity and through human rights oriented policy.

It is true that while there is a growing emphasis and stress on global improvement of general health services, mental health is still neglected and has not been given due attention in our health sector priorities. It is the right time that we add mental health as an achievable & a desirable goal in our health policies and support the slogan that there is no health without mental health. There is a strong need that the subject of mental health should be given due importance in the study of health sciences. The curriculum for undergraduate medical education in particular needs inclusion of mental health as an essential subject that needs to be highlighted in the teaching and training programmes for future doctors.18

Mental health promotion & strategies aiming for prevention of mental & behavioural disorders can also enable people to increase their awareness to improve their general health.<sup>19</sup> This should not be just the responsibility of the health sector, but needs to be acknowledged for an agreed action at all levels of social and medical care. We must emphasize that changes in life style can help in leading a happy and relaxed life. Health promotion interventions can therefore target different aspects of health and well-being<sup>20</sup> & there is convincing evidence that promotion of good mental health and strategies to highlight the importance of good mental health are cost effective & can lead to massive savings in the health costs.<sup>21</sup>

#### **SUMMARY**

There is no doubt that improving personal, psychological and social resources can ensure both physical & mental well-being and while health is conceptualised as a broader resource for everyday life, it would be expected that mental health will also be promoted as a positive concept.<sup>19</sup> The growing trends of human rights, equality and parity certainly correspond more with mental health & there is also a need to encourage patients to contribute to the planning and development of health services. In most of the developing world involvement of patients is central to efforts to improve quality of health care with an underlying belief that involving patients leads to more accessible and acceptable services and improves the health and quality of life of patients.22

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