Citing 'urgent, acute' mental health issues, especially in Africa, experts petition governments to act

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Calling global mental health problems "acute and urgent," 37 leading medical authorities from 11 countries have published a joint declaration calling for basic mental health care in Africa.

The experts also call for global [mental health](#) objectives to be included among the United Nations' post-2015 Sustainable Development Goals, for a special UN General Assembly High Level Meeting on Mental Health by 2017, and for efforts to end the stigma and [human rights violations](#) inflicted on mental health patients.

Published in the journal *[Global Health Action](#)*, the declaration was authored by 13 experts and others from eight countries including South Africa, Togo, Kenya, Mozambique, India, Sweden and Canada.

Adding their names to the declaration: 24 more authorities, from Nigeria, Tanzania, Egypt, Sweden and South Africa, site of a February meeting focussed on the mental health situation in Africa.

While action is needed worldwide, the experts say, nowhere is that need greater than in Africa, where [mental health disorders](#) account for "a huge burden of disease and disability, and where in general less than 1% of the already small health budgets are spent on these disorders."

African and other member nations of the World Health Organization

have adopted a Comprehensive Mental Health Action Plan, the authors say, and "Africa now has an historic opportunity to improve the mental health and wellbeing of its citizens, beginning with provision of basic mental health services and development of national mental health strategic plans (roadmaps)."

On 24 and 25 February 2014, a group of people with a common interest in mental health met at the Stellenbosch Institute for Advanced Study (STIAS) in South Africa at a roundtable meeting to address the topic: Mental Health Challenges in Sub-Saharan Africa: Moving to Implementation. Participants included representatives of persons with psychosocial disabilities, NGOs, policymakers, academics, research funders, service providers and others—from throughout Africa, Sweden, Canada, the US, Germany, and the World Health Organization (WHO).

"Mental, neurological, and substance use disorders constitute a very high burden of disease globally, and depression is the leading cause of disability throughout the world," says lead author Prof. Abdallah Daar of the University of Toronto, lead author of the paper and a member of the UN Secretary-General's Scientific Advisory Board.

"A growing body of scientific evidence shows that much can be done for treatment, at moderate additional costs, and with significant economic benefits to countries, while at the same time reducing suffering and improving, and often saving, the lives of those who are affected."

At a global level, the paper notes, the 194 member states of the WHO (including those from Africa) have adopted the Comprehensive Mental Health Action Plan (MHAP) with the objectives of advancing the mental health agenda in the world. This plan is supported by technical tools like the mhGAP Intervention Guide for non-specialist health settings, to assist in scaling up services. In Africa, these provide important opportunities for country-led intervention.

"We believe that action is urgently needed, not just by governments and other groups as set out below but also by international donors who contribute to health budgets and influence health policy, the mental health professional community, medical and public health schools, research institutions, and research funding bodies."

The group says an African National Mental Health Strategy and Plan (Roadmap) should, among other things, establish "parity in resources for mental and physical health alike"; integrate mental health care services into primary health care and provide resources for training, supervision and support for personnel dealing with the issue.

As well, the plans need to take a "life-course" approach, "recognizing that there are different needs at different stages in life such as pregnancy, infancy, childhood and older age, and that investment in early intervention can reduce later disability."

Targeted action is required to address specific needs of women, the very poor, the homeless, and other groups, many of them "historically neglected." "Such specific focus is necessary because these groups may have different risk factors, disease prevalence, and help-seeking behaviors."

Among other recommendations, national strategic plans should

- Be "person-centered and holistic, providing psychological and social care as well as improving access to biomedical services;
- Respond to the mental health consequences of violence in society, especially against women and children;
- Provide evidence-based and culturally appropriate care; and
- Pay particular attention to the link between mental health and other health and development priorities like HIV/AIDS and maternal and child health: "Integrating mental health into other

health and development initiatives provides an opportunity to improve outcomes in other sectors, while allowing efficient investment in mental health through these other programs."

- Ensure availability of essential mental health medications and basic services; and
- Develop robust legislation against inhumane practices, such as institutionalization, imprisonment, isolation, discrimination in access to public goods, and other violations of human rights.

Some countries—such as South Africa and Ethiopia—have made progress in developing national mental health policy frameworks and strategic plans, offering other African countries a useful model to adopt, complemented by the [WHO's Comprehensive Mental Health Action Plan](link).

The public may sign a petition based on the declaration at: http://www.ipetitions.com/petition/declaration-on-mental-health-in-africa-moving-to

Provided by University of Toronto