mhGAP Newsletter Mental Health Gap Action Programme



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WHO responds to mental health in emergencies

The word resilience describes the ability to bounce back after emergencies or other adversity. While most people are resilient, not everyone is. Many will require access to mental health and psychosocial support to get back on their feet.

For instance, in the typhoon-affected areas of the Philippines, it is likely that twice as many people will have a mild or moderate mental disorder as a result of the disaster. But those without mental disorders also need access to basic psychosocial support (see Nelly's story below).

To ensure more survivors have access to basic support, WHO facilitated a "training of trainers" session on 5 December in Manila for leading psychologists, physicians and psychiatrists. The session covered psychological first aid to local non-mental health professionals, such as aid workers, police officers, and general health staff.

Psychological first aid is the most basic and easy-to-disseminate intervention included in the new mhGAP Intervention Guide's protocol on Conditions Specifically Related to Stress (STR). The protocol covers acute stress, post-traumatic stress disorder (PTSD), and bereavement.



Building Back Better

Nelly Abiertas is a 37 year-old hotel receptionist in Tacloban, one of the worst-hit areas from typhoon Haiyan. Nobody in her family was hurt in the typhoon but her home was under knee-high water for more than five hours. Still, since the event, she refuses to go near the seashore, and she is scared when it rains or it is windy. Nelly doesn't want to think or talk about what happened during the typhoon. She wants to simply forget about it.

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Despite their tragic nature, emergencies provide unparalleled opportunities to improve the lives of large numbers of people through mental health services. The new WHO publication, Building Back Better: Sustainable Mental Health Care after Emergencies, shows how this was done in 10 diverse emergency-affected areas. Mental health is crucial to the overall well-being, functioning, and resilience of individuals, societies, and countries recovering from emergencies.

To access these new WHO publications: http://www.who.int/mental_health/resources/emergencies/en/



G8 Summit on Dementia: No time to waste

Imagine losing the ability to imagine, to recognize your family, or to eat. For more than 35 million people worldwide and counting, this is not a rhetorical situation. It is a day-to-day reality.

Leaders at the ground-breaking G8 Summit on Dementia which took place in London, UK on 11 December 2013, signed a declaration calling for greater innovation to improve the quality of life for people with dementia and their carers while reducing the emotional and financial burden; identifying a cure or a disease-modifying therapy for dementia by 2025; developing a coordinated international research action plan; and enhancing global efforts to reduce stigma, exclusion, and fear.

"Dementia is a costly and heartbreaking epidemic with an immense impact, medically, psychologically, emotionally, and financially,"said WHO Director-General Dr Margaret Chan in her opening remarks at the Summit. "To defeat dementia ... we cannot afford to waste resources, duplicate efforts, or lose time."

Dr Chan's speech:

http://www.who.int/dg/speeches/2013/ g8-dementia-summit/en/

G8 Summit dementia declaration:

https://www.gov.uk/government/publications/ g8-dementia-summit-agreements

Partners commit to Mental Health Action Plan

When the Mental Health Action Plan was adopted as a resolution at the Sixty-sixth World Health Assembly in May 2013, it provided a roadmap for the next 8 years.

As the WHO Director-General Dr Chan emphasized during the launch of the Action Plan at the annual mhGAP Forum in Geneva on 7 October 2013, "The action plan calls for change. It calls for change in the attitudes that perpetuate stigma and discrimination. It calls for change in the way services are delivered." Representatives from 48 missions took part in the discussions, which focused on how WHO, Member States, Civil Society, WHO Collaborating Centres and other academic institutions will implement the actions identified in the Plan, which resources are needed to do so, and how change will be measured.

Change isn't just a concept or a catchphrase. For the millions of people with untreated mental health conditions worldwide, change, and the Mental Health Action Plan, are the promise of a longer, better life.



"Hidden Pictures"

Watch this 5-minute film "Hidden Pictures" produced by filmmaker, Delaney Ruston, uncovering the personal stories of those struggling with mental illness in different countries around the world.

Film "Hidden Pictures": <u>http://www.youtube.com/watch?v=dv_exaj2ofg&feature=youtu.be</u>





>>> mhGAP training can change lives

A 14-year-old girl living in Osun State, Nigeria has had epilepsy for nine years, suffering three to five seizures a day, sometimes while in school.

Her teachers believe she is possessed by evil spirits and have asked her to stop coming to school for fear she would contaminate other students with her disorder – a common belief in most parts of Africa. Her parents spent a huge amount of money per month for treatment from traditional healers, but saw no change in her condition.

Frustrated and discouraged, she went to a clinic in Osun in December 2012 and sought treatment from a non-specialist health care provider trained in the use of WHO's mhGAP Intervention Guide. After treatment on a single daily dose of phenobarbital, the number of her seizures decreased and became milder. The cost of this treatment to the family is less than 25 US\$ a month. She is now back in school and starting to live a normal life in her community.

Thanks to the collaboration of WHO and the Federal Ministry of Health, and to

>>> Epilepsy: Treat it. Defeat it.

Mozambique and Myanmar. Unlikely partners, perhaps, but thanks to the WHO Programme on Reducing the Epilepsy Treatment Gap, they are united in reaching hundreds of thousands of people with epilepsy who currently don't receive treatment.

Epilepsy causes an enormous burden on individuals, families, and countries. 70% to 80% of people with epilepsy can lead a normal life when treated. Yet, in some developing countries, up to 90% of people with epilepsy don't get treated because of lack of trained health service providers, difficulty in accessing medicines, or the fact that epilepsy is highly stigmatized.

In Mozambique, many people consider epilepsy as a curse brought on by evil spirits. In Myanmar, almost three quarters of the population objects to their children marrying a person with epilepsy, and 86% think persons with epilepsy should not work. In both countries, the only primary health care staff allowed to prescribe psychotherapeutic medicine are doctors, but very few of them were trained in epilepsy or even in mental health in the past five years.

It is possible and inexpensive to diagnose and treat most people with epilepsy at the primary health care level. In Mozambique and Myanmar, with the support of UCB, the WHO Initiative following the mhGAP Approach in partnership with the MoH will train non-specialist primary health care teams and raise community awareness so that people with epilepsy receive the treatment they need and are better integrated into their communities.





support provided by the European Union, she can avoid a lifetime of fear and discrimination, and she can look forward to a bright future.

Reaching the unreached in resource-poor settings in Francophone countries

In French-speaking countries in West Africa, fewer than 15% of people with mental health problems access the care they need. Use of the appropriate language and the availability of appropriate materials can improve treatment.

Along with WHO, the Government of Burkina Faso and CBM, leaders in mental health in West African Francophone countries met in Ouagadougou on 11-13 June 2013 to adapt the mhGAP Intervention Guide (mhGAP-IG) and its training package. These materials are now ready to be used in Benin, Côte d'Ivoire, Togo, Niger and Burkina Faso.

The growing network in the sub-Region is committed to work with WHO and international partners to improve human rights and access to good quality mental health services in these countries.

Intervention Guide: http://www.who.int/mental_health/publi-

cations/mhGAP_intervention_guide/en/



>>> MiNDbank ... mental health information at your fingertips

So you want to reform your policies, strategies and laws for mental health in your country in line with international human rights standards. Where do you start? WHO MiNDbank. Why? It's the only single point globally where users can access key resources from WHO, the United Nations and more than 150 countries.

WHO MiNDbank, More inclusiveness Needed in Disability and Development, is a new WHO online platform. It holds key international resources and national policies, strategies, laws and service standards for mental health, substance abuse, health, disability, human rights and development.

Launched on Human Rights Day, 10 December 2013, hosted by WHO and the Government of Brazil, as part of the "QualityRights" initiative, WHO MiNDbank is a practical QualityRights

tool that facilitates dialogue, advocacy and research to promote national reform and the rights of people with mental disabilities. MiNDbank exists thanks to countries sharing their national resources. Users are invited to keep this platform current by contributing relevant resources.

Read more:

http://www.who.int/mental_health/mindbank http://www.who.int/mental_health/policy/ quality_rights/en/

From attention to action: improving services for autism

World Autism Awareness Day has succeeded in calling greater international attention to autism spectrum disorders (ASD) and other developmental disorders that affect millions of people worldwide. It's time to transform this attention into action.

To this end, WHO convened a consultation in September 2013, with support from Autism Speaks, to identify priorities for research and action and strategies for strengthening capacities in countries. As a result of this meeting, a global network was established to strengthen efforts to improve services for ASD and developmental disorders.

Meeting report: http://www.who.int/mental_health/women_ children/autism_report/en/



Ms Robinah Alambuya, Uganda, received this year's award for "Outstanding Achievement in the Field of Mental Health Care" from The Swiss Foundation for World Health. Ms Alambuya, Chairperson of Pan African Network of People with Psychosocial Disabilities (PANUSP), campaigns for vulnerable groups and rights of persons with mental disabilities.

Visit: www.who.int/mental_health/mhgap/en/ Email: mhgap-info@who.int Department of Mental Health and Substance Abuse (MSD) World Health Organization © World Health Organization 2013

