

EDITORIAL

ACCESS TO QUALITY OF MENTAL HEALTH CARE: A GLOBAL PRIORITY

ACCESO A LA CALIDAD DE LA ATENCIÓN DE SALUD MENTAL: UNA PRIORIDAD GLOBAL

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The need for access to quality mental health care is an urgent and growing global public health issue. Worldwide, one person dies every 40 seconds from suicide¹. In 2012, suicide was the second leading cause of death internationally among 15-29 year olds and 15th leading cause of death across all age groups². In 2014, there were 7.7 nurses working in mental health per 100,000 population³ and approximately 17.5 beds per the same population available in mental/psychiatric hospitals⁴. The burden of mental illness around the world has reached new heights during the 21st century, making mental illness and substance abuse the leading cause of disability worldwide⁵. The global burden of years lived with disability is largely attributable to mental illness (32.4%) compared to other conditions⁶. Estimates of economic global burden of mental illness are projected to increase from \$2.5 trillion in 2010 to \$6 trillion by 2030⁷. Contributing to this are critical social determinants of mental health, with poverty found to be an associated antecedent as well as a consequence of living with mental illness⁸. Other populations at increased risk of developing mental illness include victims of violence and neglect, minority groups, indigenous populations, victims of natural disasters or other humanitarian emergencies, and LGBT populations, among others⁹.

Despite the increased incidence of mental disorders, health systems worldwide have failed to respond appropriately to the demands of mental illness. As a result, “between 76% and 85% of people with severe mental disorders receive no treatment for their disorder in low-income to middle-income countries”⁹. In high-income countries, between 35-50% of people do not receive adequate treatment⁹. Many issues are begging to be addressed including barriers to equitable care (such as cultural, social, and economic vulnerabilities), development of new models of treatment, bridging the gap between mental health needs and clinical capacity, and creating a focused and relevant research agenda¹⁰. Furthermore, the engrained and damaging worldwide stigma associated with persons suffering from mental illness, as well as with their families and mental health providers, is a moral barrier to improving access to quality mental health care¹⁰. The deleterious interaction between health, economic growth and development has called for a commitment by governments, civil society, and private sector to ameliorate mental illness⁷.

In 2013, the World Health Organization released its Mental Health Action Plan 2013-2020⁹. Commendably this plans puts forward a comprehensive strategy to address the growing global burden of mental disorders. The document outlines four key objectives, namely 1) to strengthen effective leadership and governance for mental health, 2) provide comprehensive, integrated and responsive mental health and social care services in community-based settings, 3) implement strategies for promotion and prevention, and 4) stren-

gthen information systems, evidence, and research⁹. While midstream in this strategic effort, for which the outcome remains to be seen, this plan is important for many reasons. Noteworthy, this plan is one of the first of its kind to attempt to actualize the widely held belief and value that “there is not health without mental health.” It recognizes that knowledge alone, for example-- about social determinants of health, is not sufficient for optimal and sustained change. Rather, the plan is created on a foundation of co-existing principles including universal health coverage, human rights, evidence-based practice, a life span approach, multi-sectoral public and private partnerships, and empowerment of persons with mental disorders and psychosocial disabilities⁹. Armed with these principles, the plan advocates for development of strong leadership, partnerships, and resources needed to implement and sustain access to quality mental health care.

Building upon the call for improved global mental health, the World Health Organization (WHO) and World Bank co-hosted a recent landmark two-day event in April 2016, titled “Out of the Shadows: Making Mental Health a Global Development Priority.” This initiative brought together ministers of finance, researchers, clinicians, and public and private sector agencies from around the world to address the global development priority of mental health (live stream available at live.worldbank.org/out-of-the-shadows-making-mental-health-a-global-development-priority). In addition to the personal suffering endured by individuals and their families, this convened group also explored the societal economic and development impact of mental illness. Discussed was a recently published study by Chisholm et al. (2016) supporting the need for investment in mental health, showing a significant global return on investment for every dollar spent on scaling-up treatment coverage for depression and anxiety¹¹. The researchers estimated cost of lost work productivity due to depression and anxiety disorders during the period of 2016-2030 across 36 countries is US\$925 billion (> 50 million years of work)¹¹. On the other hand, if the same countries invested funds to “scale-up” during 2016-2030 (a present day cost of US\$147 billion), the return on investment would be approximately 43 million extra years of healthier life over the same period or an economic value of US \$310 billion¹¹. Such data provide reaffirming grounds for investing in access to quality mental health care to address the current global crisis.

Each nurse has a social responsibility to improve the plight of individuals and their families, as well as society-at-large, from the detrimental effects of mental illness. Nursing’s role is clear--“the protection, promotion, and optimization of health and abilities, prevention of illness and injury, alleviation of suffering through the diagnosis and treatment of human response, and advocacy in the care of individuals, families, communities, and populations”¹². Think about how you can play a role in improving access to quality mental health care. What opportunities exist for you to influence policies and regulations related to mental health? How will you stop stigma in its tracks? What new models can be proposed to provide comprehensive, integrated and responsive mental health care? Where in the community should services be provided? What opportunities lie ahead for innovations in promotion and prevention as well as information systems, evidence, and research? There are many questions in need of answers; and answers in need of action to avoid the untold human suffering from mental illness.

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