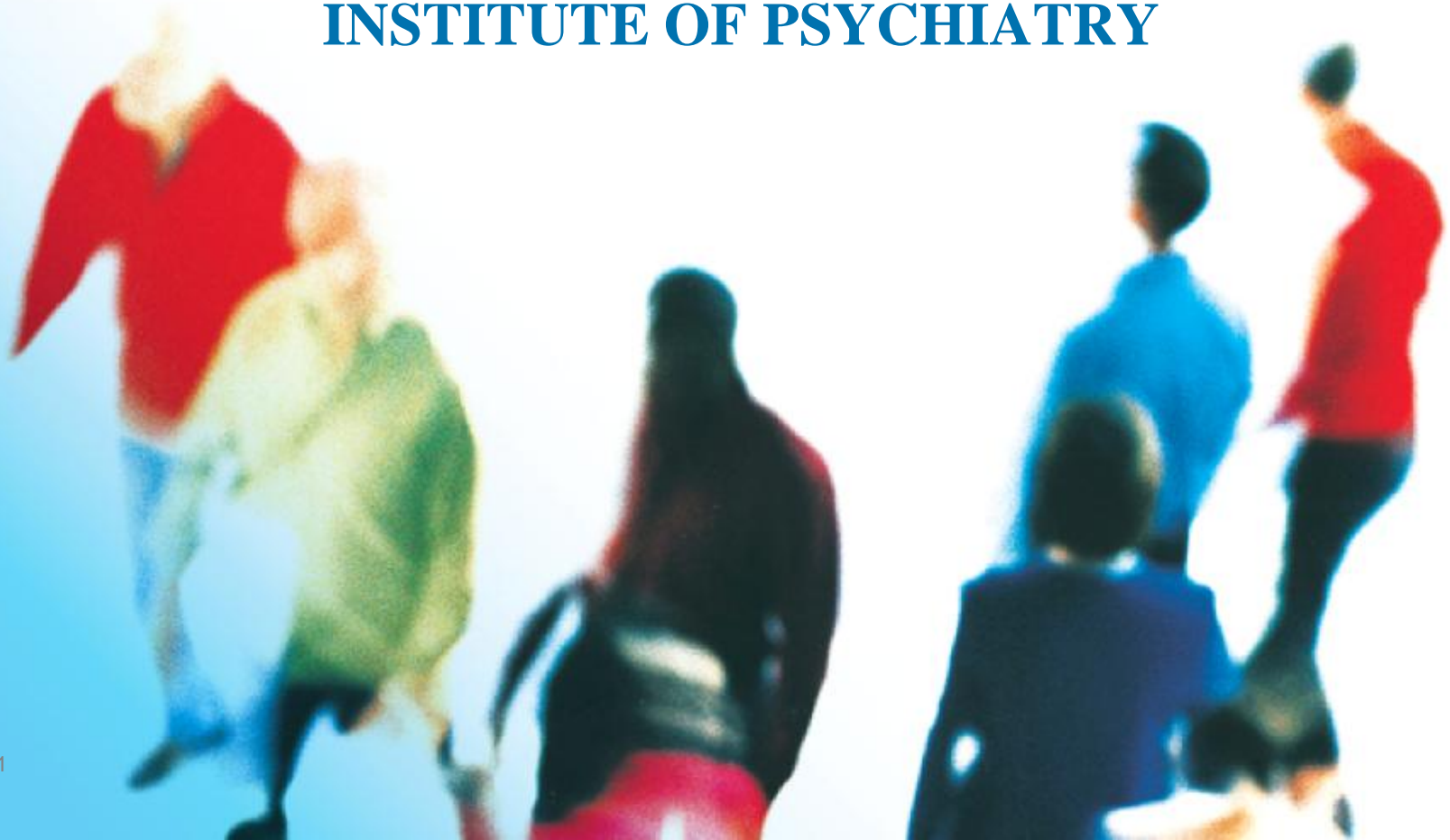
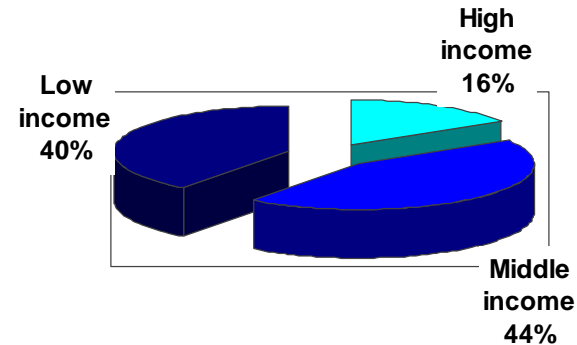


INTERNATIONAL MENTAL HEALTH AT THE INSTITUTE OF PSYCHIATRY



OVERVIEW

- Burden of psychiatric disorders in low and middle income countries; urgent need to improve coverage of effective interventions
- Examples of our research, links with clinical care, teaching, training and policy



The Lancet Global Mental Health Series

1. No health without mental health
2. Scarcity, inequity, inefficiency
3. Evidence base for mental health interventions
4. Resources for mental health care
5. Barriers to progress
6. A Call for action

THE LANCET

Global Mental Health · September, 2007

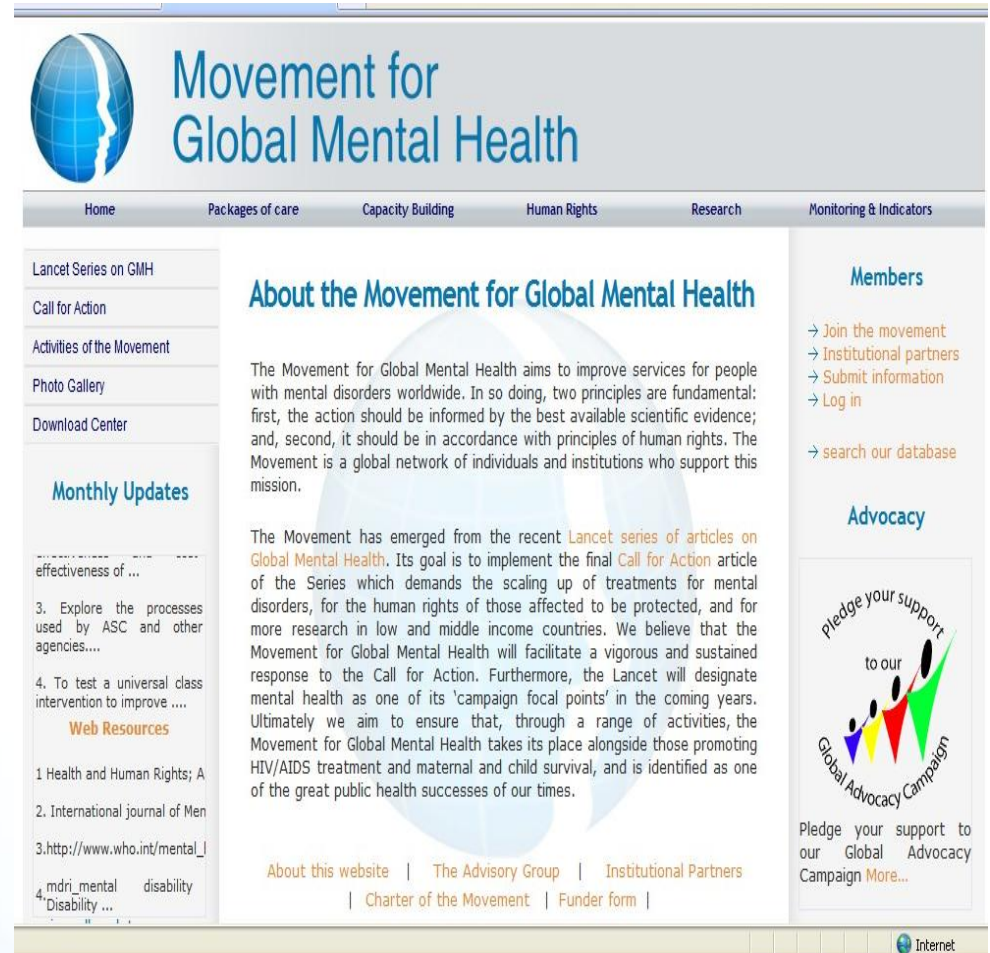
www.thelancet.com

“Mental health awareness needs to be integrated into all aspects of health and social policy, health-system planning, and delivery of primary and secondary general health care.”

Global Mental Health

Developments from Lancet Series

- Launch at KCL by Jeffrey Sachs; endorsement by Ban Ki-moon and Margaret Chan
- WHO Mental Health GAP initiative
- PLoS Medicine series on packages of care for mental disorders



Movement for Global Mental Health

Home Packages of care Capacity Building Human Rights Research Monitoring & Indicators

Lancet Series on GMH
Call for Action
Activities of the Movement
Photo Gallery
Download Center

Monthly Updates

effectiveness of ...

3. Explore the processes used by ASC and other agencies....
4. To test a universal class intervention to improve

Web Resources

- 1 Health and Human Rights; A
2. International journal of Men
3. http://www.who.int/mental_
4. [mdri_mental Disability ...](#)

About the Movement for Global Mental Health

The Movement for Global Mental Health aims to improve services for people with mental disorders worldwide. In so doing, two principles are fundamental: first, the action should be informed by the best available scientific evidence; and, second, it should be in accordance with principles of human rights. The Movement is a global network of individuals and institutions who support this mission.

The Movement has emerged from the recent [Lancet series of articles on Global Mental Health](#). Its goal is to implement the final [Call for Action](#) article of the Series which demands the scaling up of treatments for mental disorders, for the human rights of those affected to be protected, and for more research in low and middle income countries. We believe that the Movement for Global Mental Health will facilitate a vigorous and sustained response to the Call for Action. Furthermore, the Lancet will designate mental health as one of its 'campaign focal points' in the coming years. Ultimately we aim to ensure that, through a range of activities, the Movement for Global Mental Health takes its place alongside those promoting HIV/AIDS treatment and maternal and child survival, and is identified as one of the great public health successes of our times.

[About this website](#) | [The Advisory Group](#) | [Institutional Partners](#)
| [Charter of the Movement](#) | [Funder form](#) |

Members

- [Join the movement](#)
- [Institutional partners](#)
- [Submit information](#)
- [Log in](#)
- [search our database](#)

Advocacy

Pledge your support to our Global Advocacy Campaign [More...](#)

Internet

Research capacity building

•WELLCOME TRUST FUNDED

•Tropical Medicine PhD

- Victor Doku (Ghana)
- Marcus Hughes (India)
- Charlotte Hanlon (Ethiopia)

•HCPC Postdoctoral

- Tawanchai Jirapramukpitak (Thai)
- Jianmin Zhang (China)

•HCPC PhD

- Vessily Senturk (Turkey)

•

•HCPC Masters

- Renata Souza (Brazil)
- Jothish Waran (India)
- Nicolai Ostrovschi (Moldova)
- Benedict Weobong (Ghana)

•PhDs via Other funding

- Carlos Lima (Brazil)
- Erico Costa (Brazil)
- Zhia Yi Wu and Vincent Chen (Taiwan)
- Farah Qadir and Murad Khan (Pakistan)
- Rosie Mayston (India)
- Samanthika Ekanayake and Sudath Samaweera (Sri Lanka)

•Wellcome Trust program and project grants

- Juan Llibre Rodriguez (Cuba)
- Mariella Guerra (Peru)
- Ana Luisa (Mexico)
- Zhaorui Liu (China)
- Souci Frissa (Ethiopia)
- Girmay Medhin (Ethiopia)
- Athula Sumathipala (Sri Lanka)

Partners

- Africa
 - University of Addis Ababa
 - Kintampo Health Research Centre, Ghana
 - Namdi Azikiwe University Teaching Hospital, Nigeria
 - MoH Kenya and Tanzania
- Thailand
 - Thammasat University
 - Mahidol University, IPSR
- India
 - Voluntary Health Services, Chennai
 - Sangath Goa - CMC Vellore
- China
 - Peking University, Institute of Mental Health - Zhejiang University
- Latin America
 - Medical University, Havana
 - Universidad Nacional Pedro Henríquez Ureña, Santo Domingo
 - National Institute of Mental Health , Lima
 - Universidad Central de Venezuela
 - University of Sao Paulo/ Escola Paulista/ FIOCRUZ, Belo Horizonte
 - National Institute of Neurology and Neurosurgery of Mexico
 - Other
 - International Organisation for Migration, Geneva/ Chisinau
 - Forum for Research and Development, Colombo
 - Alzheimer's Disease International
 - Basic Needs
 - INDEPTH network of demographic surveillance sites

Research themes

- **Ageing and dementia**
- **Maternal and child health**
- **Psychosis**
- **Gender disadvantage and women's mental health**
- **Migration and displacement**
- **Mental health and infectious disease**

The 10/66 Dementia Research Group Agenda

- Development and validation of 10/66 dementia diagnosis in 26 centres (Prince et al, Lancet 2003)
- Prevalence of dementia in n=15,000 in 11 sites in Latin America, India and China (Rodriguez et al, Lancet 2008)
- Ferri et al. Consensus estimates of global prevalence of dementia. Lancet 2006
- RCTs of caregiver interventions
- Risk factors for dementia, stroke and mortality
 - Cardiovascular risk factors
 - Micronutrient deficiency
 - African ancestry
- Chronic disease epidemiology in LAMIC



Interventions to support carers

- **‘Low level’ interventions**
 - Increase awareness and understanding
 - Develop/extend existing support networks
 - Basic management strategies in the home



RCT in India, Moscow, Dominican Republic, Mexico, Peru, Argentina, Venezuela and China

Results

- Outcome 3-6 months – intervention vs. control
- **Caregiver**
- GHQ (Depression)** -1.1 (-2.1 to -0.2)
- Zarit (Strain) * -3.3 (-6.8 to +0.2)
- Distress due to behavioural
- disturbances ** -2.0 (-3.5 to -0.4)



Targeting dependency using a chronic conditions care framework

- **VERTICAL**
 - (HEALTH CONDITIONS)
 - e.g. Dementia, Stroke
 - Parkinson's disease, arthritis
- **HORIZONTAL**
 - (IMPAIRMENTS)
 - Communication
 - Disorientation
 - Behaviour disturbance
 - Sleep disturbance
 - Immobility
 - Incontinence
 - Nutrition/ Hydration
 - Caregiver knowledge
 - Caregiver strain

Indigo study

International Study of Stigma and Discrimination Outcomes



Global pattern of experienced and anticipated discrimination against people with schizophrenia: a cross-sectional survey

Graham Thornicroft, Elaine Brohan, Diana Rose, Norman Sartorius, Morven Leese, for the INDIGO Study Group*

Summary

Lancet 2009; 373: 408-15

Published Online

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6736(08)61817-6

See [Comment](#) page 362

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Background Many people with schizophrenia experience stigma caused by other people's knowledge, attitudes, and behaviour; this can lead to impoverishment, social marginalisation, and low quality of life. We aimed to describe the nature, direction, and severity of anticipated and experienced discrimination reported by people with schizophrenia.

Methods We did a cross-sectional survey in 27 countries, in centres affiliated to the INDIGO Research Network, by use of face-to-face interviews with 732 participants with schizophrenia. Discrimination was measured with the newly validated discrimination and stigma scale (DISC), which produces three subscores: positive experienced discrimination; negative experienced discrimination; and anticipated discrimination.

Findings Negative discrimination was experienced by 344 (47%) of 729 participants in making or keeping friends, by 315 (43%) of 728 from family members, by 209 (29%) of 724 in finding a job, 215 (29%) of 730 in keeping a job, and by 196 (27%) of 724 in intimate or sexual relationships. Positive experienced discrimination was rare. Anticipated discrimination affected 469 (64%) in applying for work, training, or education and 402 (55%) looking for a close relationship; 526 (72%) felt the need to conceal their diagnosis. Over a third of participants anticipated discrimination for job seeking and close personal relationships when no discrimination was experienced.

Interpretation Rates of both anticipated and experienced discrimination are consistently high across countries among people with mental illness. Measures such as disability discrimination laws might, therefore, not be effective without interventions to improve self-esteem of people with mental illness.

Millennium Development Goal 4 – Reduce child mortality



Maternal mental illness in industrialised countries known to be associated with serious adverse outcomes for children

- pre-term birth
- stillbirth
- low vaccination rates
- accidents and injuries

Maternal mental health and child outcomes in Ethiopia – fellowships and project grants

- Population-based cohort of 1070 women and their babies in rural Ethiopia
- Antenatal maternal depression associated with prolonged labour and delayed initiation of breastfeeding (Hanlon et al 2009)
- Extension tracks child growth and development to age 6
- Maudsley/IoP/ Toronto-Ethiopia Exchange to assist in training public health workers and psychiatrists



‘People on the move’

- **Asian Tsunami (Sri Lanka)**
- Effect of displacement on wellbeing and livelihoods
- **Rural-urban migration in Thailand and families left behind**
- **Infrastructure development (China)**
- Three Gorges Dam study
- **Trafficked women (Moldova)**



IoP WHO Collaborating Centre (Prof Rachel Jenkins)

- **Supporting mental health reforms in 11 countries including Russia, Pakistan, Tanzania and Kenya**
- **Input to revisions of International Classification of Diseases (ICD-10) and International Classification of Functioning, Disability and Health**
- **Primary Care training, for example 1500 primary care nurses trained in detection and basic mental health care in Kenya**

Major new joint initiative of IoP and SLaM to undertake teaching, training and consultancy related to clinical practice, policy and research in IMH.

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LONDON

Maudsley International



South London and Maudsley 
NHS Foundation Trust

Institute of
Psychiatry

at The Maudsley

FUTURE FOR INTERNATIONAL MENTAL HEALTH



- **Supporting the Movement for Global Mental Health priority research agenda**
- **Developing and evaluating packages of care for underserved regions**
- **RCTs in community mental health care (e.g. COPSI) and care of ageing populations**
- **Interface between mental health and priority issues for human health and development e.g. maternal and child health, infectious disease, migration and displacement**