

# Mental Health: A Global Perspective

Problems, challenges and ways to move the agenda forward through advocacy

**28 October 2009, 13.00 - 15.00**

**Venue:** Room 7.0.34, Centre for Health and Society (CSS), Øster Farimagsgade 5, Copenhagen

A joint seminar by the Copenhagen School of Global Health, Enreca Health – Danish Research Network for International Health, and the Danish Society for Tropical Medicine and International Health.

## Programme

- 13:00 – 13:10      Welcome  
Professor Flemming Konradsen, Director, Copenhagen School of Global Health
- 13:10 - 13:20      *Global mental health challenges*  
Marianne Kastrup, Dr. Med., Head, Centre for Transcultural Psychiatry
- 13:20 – 13:50      *Mental health and suicide: extent of the problem with a focus on priorities for low income countries illustrated with the case of pesticide self-harm*  
Professor David Gunnell, Department of Social Medicine, University of Bristol, UK
- 13:50 – 14:00      Q & As
- 14:00 – 14:30      *Programmatic experiences from the field: support and care to patients and their families*  
Peter Yaro, President, Basic Needs, Ghana
- 14:30 – 14:40      Q & As
- 14:40 – 15:00      Debate, lessons for the future

**Chair:** Marianne Kastrup, Dr. Med., Head, Centre for Transcultural Psychiatry

**Registration:** Send an email to Pia P. Toft at [ptoft@sund.ku.dk](mailto:ptoft@sund.ku.dk) before 27 October 2009



COPENHAGEN SCHOOL OF  
GLOBAL HEALTH



DANISH SOCIETY FOR  
TROPICAL MEDICINE &  
INTERNATIONAL HEALTH

# Mental Health: A Global Perspective

## Problems, challenges and ways to move the agenda forward through advocacy

28 October 2009, 13.00 - 15.00

### Background

The burden of mental health disorders and suicide in low income countries has for a long time been underestimated. However, recent evidence from WHO gives reasons to believe that the number of DALYs (12%) lost to mental health problems surpasses those due to HIV and AIDS and other much more profiled health problems. Yet, as many as 75% of people suffering from mental health problems receive no support or treatment at all. On the contrary, they are very often stigmatised, suffering from discrimination and belong to the most vulnerable groups in society. Thus, these people at the margin of the health care systems are almost invisible to programmatic efforts and most low income countries lack policies, programs, medicines and capacities to address mental health challenges and the prevention of suicide. Research to document the extent of mental health disorders, the epidemiology of suicide and the impact of various interventions are significantly lacking in low income settings. Likewise, advocacy to highlight the problem is much needed to influence public opinion, government policies and the priorities of non-governmental organisations.

### About the key note speakers

**Peter Yaro**, Country Programme manager, Basic Needs, Ghana, an NGO established in 1999 which has pioneered a way of working with people with mental disabilities by addressing both their illness and their poverty.

**David Gunnell**, Professor of Epidemiology, Department of Social Medicine at the University of Bristol. Professor Gunnell has a longstanding interest in suicide epidemiology and prevention in the UK, Chile, Nordic region and increasingly looks at the differences in the epidemiology of suicide between Asia and the west.

### For more information

*MILLIONS WITH MENTAL DISORDERS IN THE DEVELOPING WORLD ARE DEPRIVED OF NECESSARY TREATMENT AND CARE* - WHO News Release, 9 October 2008:

[http://www.who.int/mental\\_health/mhgap/press\\_release\\_mh\\_mhgap\\_10\\_2008.pdf](http://www.who.int/mental_health/mhgap/press_release_mh_mhgap_10_2008.pdf)