



## WORLD HEALTH DAY 2001 — 'MENTAL HEALTH'

For the first time in the history of the World Health Organisation, the Director-General has decided to devote World Health Day to Mental Health. World Health Day is one of the means used by the WHO to raise awareness about a major health hazard of worldwide significance.

Although some psychiatric illnesses, such as major depression and schizophrenia, carry a significant mortality rate, their main hazard lies in the extensive disability they cause.<sup>1</sup> Five of the 10 leading causes of disability worldwide (major depression, schizophrenia, bipolar disorders, alcohol use and obsessive-compulsive disorders) are psychiatric disorders.<sup>2</sup> In 1998, psychiatric disorders accounted for approximately 12% of all disability-adjusted life years (DALYs) lost.<sup>2</sup> All predictions indicate a dramatic increase in mental health problems in the coming years.

Why are psychiatric disorders so disabling? Partly because in many countries less than half of those suffering from severe psychiatric illnesses receive adequate treatment. Reluctance to seek treatment is one of the main reasons for this, due to the stigma that many attach to mental illness and to people who have mental illness. Not being adequately treated can be due to a variety of factors, including ignorance about the availability of effective treatments, inaccessibility of services, problems with the supply of medication, and poor medical practice. Given the prevalence of psychiatric disorders — at least one in four people will be affected across their lifespan, in both industrialised and developing countries — and given their tendency to recur or be life-long, the WHO rightly considers them to be a major public health hazard.

The severe disability caused by many psychiatric disorders is related to their frequent devastating impact on education, work, marriage, family relations and participation in social life. Depression has been ranked as the leading cause of disability worldwide in the 15 - 44-year age group.<sup>3</sup> Studies have shown that, in the workforce, the cost of depression in terms of loss of work days and disability is more than that for ischaemic heart disease.<sup>3</sup> Schizophrenia is also costly to society, in terms of both increased medical costs and lost productivity, and secondary mental health and medical problems affecting patients and their families. The suicide rate in schizophrenia is high, although less than that for depression.

For Mental Health Year, 2001, the WHO is highlighting six disorders: depression, schizophrenia, Alzheimer's disease, alcohol dependence, mental retardation and epilepsy. The



*Stop exclusion! Dare to care.*

mental health of children and adolescents is being included as a focus of attention. In South Africa these conditions are all recognised, or are emerging, as major mental health problems. Effective, evidence-based interventions have been developed for all of them, in the domains of prevention, medical treatment, psychosocial interventions or rehabilitation. What can be done to ensure that patients in South Africa with these disorders receive adequate treatment?

Most importantly, it needs to be acknowledged that mental health concerns are the responsibility of all health practitioners, not mental health professionals only. As long as the myth is perpetuated that general health practitioners have no psychological skills to draw upon, the stigma of mental illness will be reinforced. Everyone is a closet psychologist, and everyone has something special to offer the psychiatric patient. Not only should all practitioners make the mental health of their patients as much a focus of treatment as their general health, they must demonstrate that they are comfortable around the subject of mental health, including their own mental health. Practise what you preach!

To reduce the treatment gap, it is necessary in the general population to address the stigma and reluctance to come

