

MENTAL HEALTH PROMOTION AND MENTAL ILLNESS PREVENTION:

*Lessons Learned from Other
Countries*

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CONTEXT

- ▶ Relationship between health and wealth
- ▶ Impact of globalization
- ▶ Increase in health inequities

PROPOSED ACTIONS

- ▶ Strengthen good governance
 - ▶ Support healthy cities and communities
 - ▶ Strengthen health literacy
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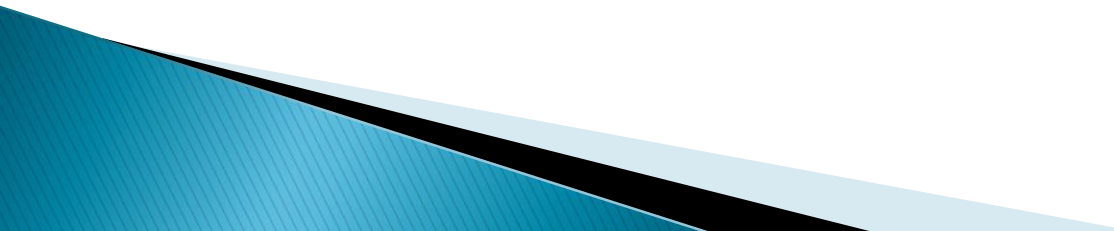
WORLD MENTAL HEALTH DAY

October 11, 2016

THEME: Psychological First Aid

PURPOSE: Used following crisis events to support people in distress

WHAT IS PSYCHOLOGICAL FIRST AID?



MENTAL HEALTH ...

... is a state of wellbeing in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively, and is able to make a contribution to his or her community.

- ▶ More than absence of mental disorder
- ▶ Integral to health
- ▶ Determined by socioeconomic, biological and environmental factors
- ▶ Cost effective strategies exist to promote mental health

(WHO, 2001)

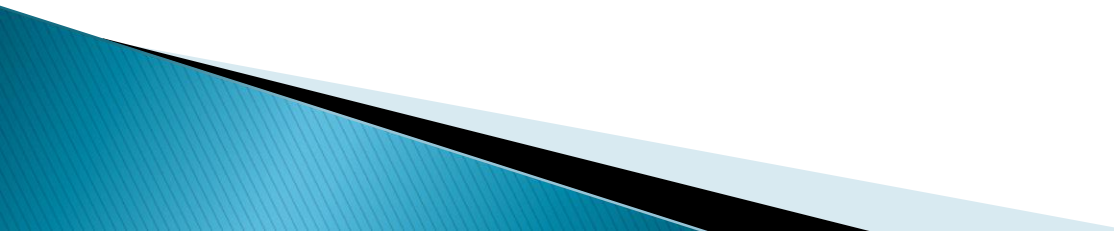
MENTAL HEALTH PROMOTION STRATEGIES

- ▶ Early childhood intervention
- ▶ Support to children
- ▶ Empowerment of women
- ▶ Targeting vulnerable populations
- ▶ Support for elderly
- ▶ MH promotion in schools
- ▶ MH promotion at work
- ▶ Housing
- ▶ Violence prevention
- ▶ Community development
- ▶ Poverty reduction
- ▶ Anti-discrimination
- ▶ Rights promotion


Strategies are intersectoral

Strategies involve a “whole of government” approach

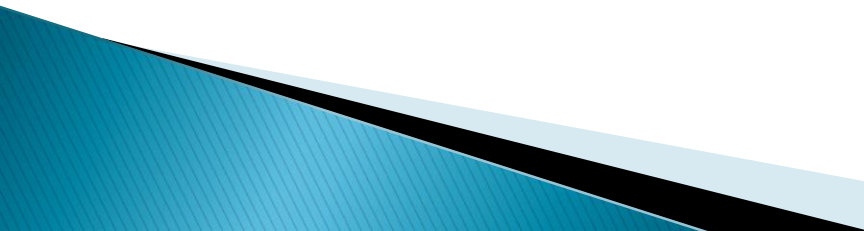
COMMON CHALLENGES

- ▶ Prevention and promotion as a policy priority
 - ▶ “Fit” with larger health promotion/prevention
 - ▶ P&P as part of the “mental health” service array
 - ▶ Workforce and training
 - ▶ Roles and responsibilities of individual agencies
 - ▶ Effectiveness / impact
 - ▶ Sources of funding
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COUNTRY EXAMPLE: *AUSTRALIA*

- ▶ Eight autonomous states; national health insurance
 - ▶ National Action Plan for Promotion, Prevention and Early Intervention for Mental Health
 - ▶ Groups across the lifespan (e.g. infant and perinatal, elderly, rural, Aboriginal tribes, strategic priority groups)
 - ▶ Suicide prevention; school-based early intervention
 - ▶ Mental health first aid
 - ▶ Link with national preventive health initiatives
 - ▶ Strengthening ethnocultural identity, community integration, political empowerment
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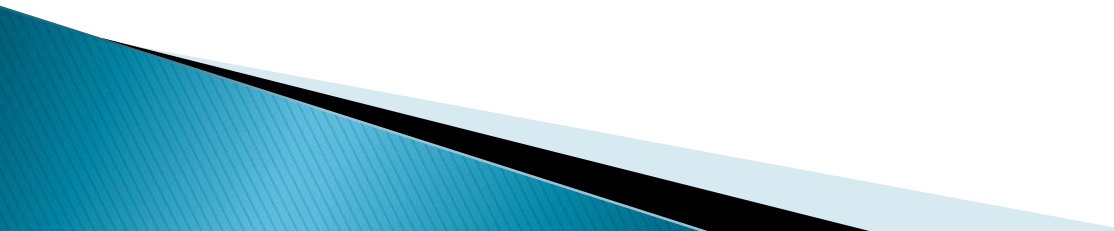
COUNTRY EXAMPLE: *FINLAND*

- ▶ Social welfare model
 - ▶ Kaste Program: goals to promote social inclusion and reduce inequities in wellbeing and health
 - ▶ Priority on mainstreaming mental health in primary care: reducing alcohol consumption; children, children of parents with MH/SA problems
 - ▶ “Communality”: for adults, linked to influence in workplace
 - ▶ “Effective Health Center” initiative
 - ▶ Masto Project: wellbeing of labor force
 - ▶ Special programs: efficient families, focus on unemployed, young men
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COUNTRY EXAMPLE: *SCOTLAND*

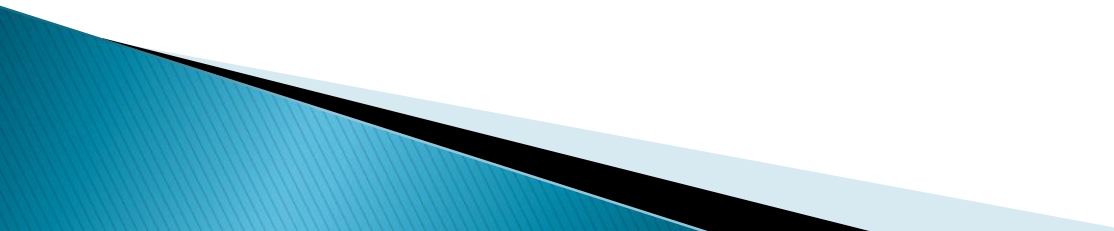
- ▶ *Towards a Mentally Flourishing Scotland: National Plan*
- ▶ Priorities: infants; children, and young people; later life; communities; employment and working life; suicide/self-harm, quality of life of persons with MH/SA problems
- ▶ Local community health partnerships
- ▶ Local interventions and approaches
- ▶ Media campaigns: “*See me*”; “*Living Better with Mental Illness*”; “*Choose Life*”
- ▶ Role of non-governmental sector (NGOs)

Mental Health Promotion and Mental Illness Prevention: *RATIONALE*

- ▶ Prevalence and social burden
 - ▶ Relationship of NCDs and mental health
 - ▶ Evidence base of effective interventions
 - ▶ The “economic” case
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Mental Health Promotion and Mental Illness Prevention as a Policy Priority:

COMMON APPROACHES

- ▶ Vision tied to societal problems and goals
 - ▶ A “whole of government” approach
 - ▶ “Champions” at different levels
 - ▶ Strategic action plans
 - ▶ Local ownership and flexibility
 - ▶ Training, TA and research infrastructure
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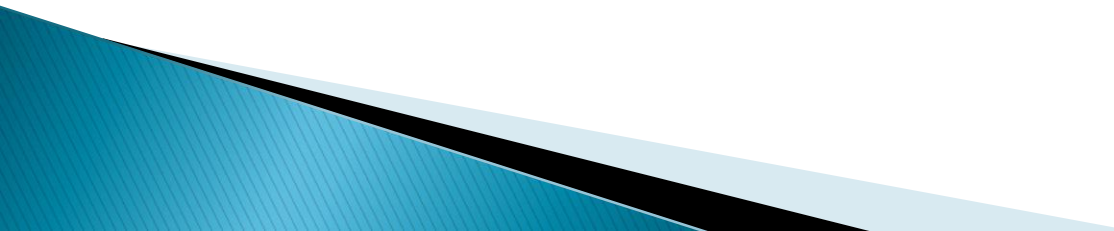
Mental Health Promotion and Mental Illness Prevention as a Policy Priority:

FACTORS RELATED TO SUCCESSFUL IMPLEMENTATION

- ▶ Collaborative structures for implementation
- ▶ FUNDING!

COLLABORATIVE STRUCTURES:

Success Factors

- ▶ Not all sectors will collaborate equally
 - ▶ Leadership for initiatives may be outside MH sector
 - ▶ People in recovery are some of the best champions
 - ▶ “Innovation” and incentive funds help
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FUNDING:

Success Factors

- ▶ Continually need to “make the case” and prove payoffs and successes
 - ▶ Innovation and incentive funds for local authorities and providers
 - ▶ Finds for training and technical assistance
 - ▶ Funding for ongoing communication and coordination events
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