

## Verwandtschaft, Sorge, Technologien. Medikalisierte Beziehungen im Alltag Kinship, Care, Technologies. Medicalized Relationships in Everyday Life

WB



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Verästelungen – Verflechtungen – Verwirrungen, aufgenommen von Janina Kehr in der Nähe von Straßburg im November 2019.

Ramifications—Entanglements—Confusions, picture taken by Janina Kehr near Strasbourg in November 2019.

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## Mental Health in Developing Countries. The Past, the Present, the Future

Report on the 10<sup>th</sup> International Symposium “Global Mental Health—Mental Health in Developing Countries”, Munich, October 27, 2018

MAEVE COOK-DEEGAN & GABRIELE ESCHEU

This year marked the 10<sup>th</sup> anniversary of the International Symposium on Global Mental Health which took place in Munich at the end of October 2018. This year's theme 'Mental Health in Developing Countries: The past, the present, the future' attracted speakers and attendees from all continents who came together to reflect on their past experiences and their ambitions for the future. The symposium was hosted by the International Network for Cooperation in Mental Health (i.nez), the Center for International Health (CIH<sup>LMU</sup>) and the Global Mental Health Group from the Department of Psychiatry and Psychotherapy of the Ludwig-Maximilians-Universität (LMU) Munich. The event was stimulating—speeches took place throughout the day and were interspersed with workshops and a poster session.

The presenters progressively painted a picture of the state of mental health across the world. The global trend is shifting rapidly from infectious diseases toward non-communicable diseases. The Global Burden of Disease Study 2010 (GBD 2010) estimates that worldwide infections are still the most important cause for the burden of disease followed by injuries and then by mental, neurological and substance use disorders that accounted for 10.4% of global disability adjusted life years DALYs.\* Mental health can have devastating consequences for individuals and their families. In low- and middle-income countries (LMICs), the limited resources and trained professionals make treatment and care especially difficult. These were the kinds of problems that were presented in an effort to come together to motivate positive changes in the future.

In line with the theme ('the past'), Prof. Dr. Mohan Isaac (University of Western Australia) kicked off the day with an insightful talk about the history of mental health care over the last five decades. In 1975, an expert committee of the World Health Organization (WHO) on the "organization of mental health services" recommended that basic mental health care should be integrated with general health services and be provided by health workers at all levels of care. The general shift was from hospitals towards community-based settings. Mental health reform has undergone a major transformation over the past 50 years and moved from 'Lunatic Asylums' to 'Institutes of Mental Health' to 'Centres of Excellence' (in some countries). He shared specific examples of 'Mental Hospitals' in India, Taiwan and Sri Lanka which have transformed into 'Institutes for Mental/Behavioral Health'. This trend has been echoed across the world.

Prof. Dr. Andrea Winkler (Technical University of Munich, University of Oslo) and Prof. Dr. Murali Thyloth (M.S. Ramaiah Medical College, Bangalore) each built on this opening speech, discussing recent global trends and corresponding challenges for the future. Dr. Winkler drew the audience's attention to the aging population and consequent rise in neurological diseases which will inevitably increase over the next decades. She criticized the neglect of many neurological disorders which are often overlooked within the category of 'non-communicable diseases.' She reiterated the importance of adequate resources and training for responding to these trends. Likewise, Dr. Thyloth pointed to recent global developments that pose challenges for integrating people with mental illnesses into society. He noted the role of immigration, economic crises, natural disasters and the concomitant apathy towards mental health. The social issues compound to make the treatment of mental issues all the more difficult.

\* MURRAY CJ, VOS T, LOZANO R, *et al.* 2012. Disability-adjusted life years (DALYs) for 291 diseases and injuries in 21 regions, 1990–2010: a systematic analysis for the Global Burden of Disease Study 2010. *Lancet*. Dec 15, 380(9859): 2197–223.

He stressed that the process of rehabilitation must adapt to the social context. Unfortunately, Prof. Dr. Helene Basu (University of Münster) was sick and therefore unable to share her medical anthropological perspective.

After the break, Dr. Andrea Jobst presented the experiences that she and Dr. Kristina Adorjan (both from the Ludwig-Maximilians-University Global Mental Health Group) have had as a part of the partnership between LMU and Jimma University (JU), a cooperation which has been ongoing since 2010. As a part of this attempt to support JU as a center of academic competence, they launched a successful Master's program (MSc) in Integrated and Community Mental Health. The goal has been to train health workers who in turn can become trainers in the field. They have also been partners on many epidemiological and biological research projects. From these experiences, they have learned the importance of finding strong leaders and the benefits of both regional and trans-continental collaborations. Next, Dr. Herbert Steinböck finished the morning session by moving into more theoretical territory about the ethical considerations of mental health. He examined the principles and methods of bioethics in mental health care, discussing the need to transfer these lessons to the Global South. There are many major questions in this field, including: is there a 'right' to madness?, what constitutes 'informed consent', etc. As mental health care expands, so too should the attention to ethical considerations.

Before the final speeches, there was an interactive poster session in which a diverse group presented on an array of topics. Dr. Anke Felicitas Böckenforde and her colleagues presented 'Where there is no psychiatrist?' which gave an overview of the situation of mental health on Flores Island in Indonesia. Additionally, Mr. Asfaw Baye and colleagues presented their poster 'Experiences of Psychotherapists Working with Refugees' which uses the experience of psychotherapists in Germany to make recommendations for future work with refugees. Another poster was presented by Charlotte Salmen and her colleagues, entitled 'The multiple burdens of raped women in the Democratic Republic of the Congo: The effects of social disapproval and shame on mental health and functioning.' It highlighted how sur-

vivors of sexual violence are affected in terms of their mental health and that shame and social disapproval are exacerbated by mental health problems. Finally, the 'Global Mental Health Research Project' poster, from the department of psychosomatic medicine and psychotherapy at the University Medical Center in Freiburg, gave an overview of their ongoing research, training, achievements and collaborations.

The workshops took place after the lunch break and brought new energy to the day. The workshops were divided into broader topics, ranging from 'Restraints and Mental Disorders' to 'Supply of essential drugs to treat mental disorders' to 'Mental health research in developing countries' and 'Management of epilepsy in developing regions'. This latter workshop brought together people who have diverse experience in epilepsy management, ranging from work in LMICs to refugees in Germany. The group discussed their different experiences and exchanged their opinions, for example, on the utility of using Phenobarbital to treat epilepsy in different populations. After the thorough discussions, representatives from each of the groups shared their experiences and there was a round of questions.

The final speeches of the day looked toward the future of mental health care. Prof. Dr. Markos Tewfaye, who has been involved with an ongoing collaborative mental health training program between Jimma University (Ethiopia) and LMU, described the mental health scene in Ethiopia. He established specific goals for the integration of care and made clear what changes he would like to see in the country for the improvement of mental health services. This was followed by a passionate speech by Dr. Afzal Javed, the president elect of the World Psychiatric Association, who commented on the challenges that face the field. He made note of the massive treatment gaps— in high income countries 65% of all physical disorders are treated in comparison to 23% of mental disorders (53% to 8% in LMICs). He further highlighted the societal and economic benefits of shifting policies in favor of better care, while making other constructive criticisms for a better future.

Dr. Wolfgang Krahl (i.nez e.V) who has organized the symposium since its inception, wrapped up the day with a reflection, assisted by many pictures, on the lessons that he's learned working

with patients with mental disorders during his nine years of professional placements in Malaysia and his continuous teaching assignments across Africa. This was a topical ending for the event— in many ways the richness of his experiences were derived from cross-cultural exchange and a drive to improve mental health care in the Global South, two driving forces behind the symposium.

The 11<sup>th</sup> International Symposium “Global Mental Health—Mental Health in Developing Countries” with the main topic: “Global Mental Health and Human Rights” will be held in Munich on Saturday 24<sup>th</sup> October 2020.



**MAEVE COOK-DEEGAN**, MSc recently completed her master's studies in Health Science at the Technical University of Munich. Her thesis took place within the context of the Mental Health in Refugees and Asylum-seekers (MEHIRA) project, a German multi-center randomized control study, that is evaluating mental health interventions for refugees and asylum-seekers. Her bachelor's studies at the University of St Andrews in International Relations and Psychology have fueled her ongoing interests in both global politics and psychology. American-born, Maeve is now residing in Germany, with plans to develop her professional career in health.

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