World Health Day 2001 was celebrated in communities world-wide. All means were used to disseminate information about mental health. This photo shows a chalk board re-creating the WHO logo, the World Health Day slogan and relevant advice regarding the treatment and care of those suffering from epilepsy.

In 2001, WHO has increased its advocacy efforts to improve the mental health situation world-wide. A communications strategy to reach the public-at-large, policy-makers and professionals began with an important anti-stigma campaign for World Health Day in April, with awareness-raising at the 54th World Health Assembly in May and with the publication of this year’s World Health Report. On 7 April, communities around the world rallied around our call to end stigmatizing and discriminatory practices: “Stop exclusion” and to reduce the extensive gap between those in need and those receiving mental health care “Dare to care.”

The aim of World Health Day 2001 was to raise awareness, increase knowledge and change attitudes about mental health issues among the general public. The Day’s events also sought to challenge health providers and policy-makers to improve services as well as ensure access to and equity in care. The Day was used to dismantle taboos and misconceptions which have been generally accepted for too long. “Treatment is impossible; a mental disorder may be contagious; I cannot be affected; it’s all in your imagination; he is possessed by evil spirits; she should be locked up.” Such false beliefs are responsible for terrible shame endured by suffering individuals and their families and contribute to the low levels of treatment encountered today. Taboos surrounding mental illness prevent people from openly discussing the subject and further isolate individuals. At the turn of the century, citizens of the world are ready to confront fears with knowledge and revere the tide of disgrace that ensnares mental health problems.

Due to the relentless efforts of many over the last twenty years, mental health has been receiving increased attention. Significant endeavours have created an environment conducive to transforming public perception. The Global Burden of Disease Report released by WHO, World Bank and Harvard University in 1996 and the 1999 U.S. Surgeon General’s Report are heralded as important signposts for mental health awareness-raising world-wide. WHO’s 2001 World Health Report is the latest milestone focusing international attention on mental health.

The world community has now reached a crossroads where nations will no longer choose to sweep mental health under the carpet. Mental health cannot be ignored and WHO, joined by an impressive chorus of passionate mental health advocates, has expressly called on its Member States to actively improve mental health care around the world. On World Health Day, 155 countries responded positively and actions were carried forward with enormous enthusiasm both by governments and communities. This document describes a number of the contributions made on World Health Day. It would be impossible, however, to mention the countless organizations in countries around the world which have played a role in this process. It is the humble intention of this publication to honour the accomplishments of many unsung heroes who will recognize the endeavours described herein as similar to their own.

World Health Day harnessed international momentum and generated a multitude of activities for influencing public perception, strengthening professional networks, empowering consumer associations and raising awareness among decision-makers to result in improved services, legislation and policy. It is hoped that this document will inspire further enhancement of mental health services and sustained commitment to rendering such services accessible to all.

Address by Dr Derek Yach
Executive Director
Noncommunicable Diseases and Mental Health
Health, as defined in the WHO Constitution, is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity. This definition provides for three equal pillars on which health should firmly stand. Governments have often left mental health out of the equation.

The problem is important

Neuropsychiatric disorders account for nearly one-third of the disability in the world. One in four people will suffer from a mental or brain disorder at some point during their lifetime and no region is spared. Sufficient attention must be given to mental health. Yet, the 2001 WHO Project Atlas indicates that the majority of countries allocate less than 1% of their total health expenditures to their mental health budget. The Atlas is a baseline study of 185 countries designed to capture the current level of resources committed to mental health worldwide.

Latest data compiled for the 2001 World Health Report states that about 450 million people alive today suffer from mental or neurological disorders or from psychosocial problems such as those related to alcohol and drug abuse. Only a minority of those individuals receive appropriate treatment despite the fact that we have the means to treat many disorders and to help people alleviate their suffering.

Help is possible if we dare

The brain and mind are vital to human functioning. Yet, we have very often preferred to ignore the warning signs of psychological and emotional difficulty because of lack of knowledge and because of fear – fear that one cannot be treated or fear that the person will be labelled with an indelible mark of scorn or contempt. Myths and stigma are key reasons why many people today do not seek or receive mental health care or follow treatment. Other reasons include discrimination (on the job, by insurance providers, etc.), poverty, lack of essential drugs, lack of trained mental health professionals and a lack of skills at primary health care level. Misguided priorities that favour inappropriate psychiatric institutions rather than community-based services also prevent people from getting the care they need. Furthermore, many nations display an absence of rational and comprehensive policies and legislation. More than 40% of WHO’s Member States surveyed for the 2001 Atlas publication reported having no mental health policy in place.

Challenging the status quo

WHO’s mental health advocacy efforts target the general public, health professionals and decision-makers.

At the 54th World Health Assembly in May 2001, WHO put mental health on the agenda of governments and decision-makers. The 132 Ministers of Health participating...
BRINGING ABOUT A CHANGE IN ATTITUDE

On World Health Day 2001, millions of people declared that they would “dare to care”. Three goals were achieved:

- bringing about a change in attitude;
- strengthening professional networks and empowering consumer groups; and
- exerting influence to change policy, legislation and services. Activities to reach these aims were organized in 155 countries.

World Health Day events were conducted on both large and small scales. Nationwide mass rallies and contests were held, leaders and activists spoke out and national pledges were made. Community football tournaments, conferences, theatrical presentations, round table discussions, art exhibits, open houses and concerts drew large audiences in districts, cities and towns around the world. Media coverage of the events was a primary vehicle for generating debate and informing the public about mental and brain disorders. Events were both of mass appeal and targeted to special audiences.

Many large-scale, general public events included mental health service-based activities in order to inform about the realities of psychiatric institutions and community-based care facilities. WHO advises its Member States to establish mental health services in community-based health clinics and provide psychiatric beds in general hospitals to allow individuals to remain close to their families. Many countries chose to put the World Health Day slogan into action and demonstrate their commitment to WHO’s goals by inviting the public into these facilities.

People on all continents made the effort to look inside psychiatric institutions, entering these generally hard to reach places. In many cases, these establishments were far from public view and traditionally served the purpose of keeping individuals hidden away, out of sight and out of mind. Advocates in many countries used World Health Day to draw attention to inadequate conditions and human rights abuses in some institutions. Visits to rehabilitation centres, exhibitions of patients’ work and dialogue on World Health Day has led to a better acceptance that individuals suffering from a mental disorder can lead productive lives and participate in everyday activities. Open houses in these often unknown establishments were greeted with enthusiasm by the general public.

A few examples of mental health care facilities opening their doors across the globe include:

- Garrahan General Hospital for Children (Argentina)
- Aarhus Centre with visits to the old psychiatric hospital & renovated ward (Denmark)
- St Mary’s Psychiatric Hospital (Eritrea)
- Ammanuel Hospital, the oldest and only psychiatric hospital in the country (Ethiopia)
- “Pink House”, part-time therapeutic centre in Marseille (France)
- The work centre of the Philippine Mental Health Association

Case study: Pavillon E at the National Hospital of Niamey, Niger

“Niger was no exception to the massive response to World Health Day. As in some other countries, the organizing committee was struck by one concern at the outset of their preparations. The sanitary conditions of the psychiatric unit at the national hospital were not considered to be up to standard to say the least. Not only were the facilities old and run down, but the Pavillon E was particularly littered with assorted rubbish and filth with little maintenance undertaken since 1996. The immediate response was to find a way to restore the basic human dignity to the patients living in this unit. Corrective means were implemented under the guidance and funding of WHO’s country office in Niger and the Rotary Club. The local fire squad was called in to clean and paint the facility. Medicine, bedding and basic toiletries were purchased; patients were fed and clothed. Niamey National Hospital was the site of an official ceremony on World Health Day in the presence of the Minister of Health who toured the renovated Pavillon E during the event. Other actions to benefit the patients in the hospital and those who have found themselves on the streets are being planned in Niamey. The creation of an association called “Friends of Pavillon E” was proposed during the round table session on World Health Day in Niger.

Item 1 of the 1991 United Nations resolution 46/119 “Principles for the Protection of Persons with Mental Illness and for the Improvement of Mental Health Care” requires that all persons with a mental illness, or who are being treated as such persons, shall be treated with humanity and respect for the inherent dignity of the human person.”
BRINGING ABOUT A CHANGE IN ATTITUDE

Public events throughout the world included:

- Display stand in Hobart City Mall (Australia)
- Exhibition of children's drawings and paintings during a public event in a major shopping mall (Bahrain)
- 10 kilometre walk for mental health (Botswana)
- Educational campaign featuring a mental health exhibition which will travel to public venues such as hospitals and mosques (Brunei)
- Forum on homelessness and mental health in Ottawa (Canada)
- A rally with speeches by officials, religious leaders, traditional healers and school teachers (Chad)
- "Health Alley" festivities with exhibition of arts & handicrafts (Georgia)
- Free medical consultations provided for one week (Guinea)
- Event at Westend City Centre, the country's biggest shopping centre where over 15,000 people heard about mental health (Hungary)
- Performance of "Mind Matters" specially commissioned play portraying the journey through a person's mind in Chennai (India)
- Free medical check-up and treatment offered for one month in Vadodara (India)
- "The Hidden Artist" exhibition of paintings by persons with mental illness from Israel (Switzerland)
- Information stands throughout the city of Barcelona (Spain)
- Mental Health Fair at the University of South Dakota (USA)

Mass events such as concerts, theatrical presentations, art exhibitions, sporting matches, rallies and marches were carried out in local communities and in national capitals. People were given the opportunity to have free diagnosis or consulting services at many health stands, information booths, and over special telephone lines via call-in radio programmes. Lectures, conferences and debates televised nationwide created useful opportunities to inform and educate the public on warning signs for mental or brain disorders and on ways to prevent them.

"I ... appeal that everyone, according to their responsibilities, should commit themselves to defend the dignity and the rights of the mentally ill. No-one should remain indifferent..."

Pope John Paul II on the occasion of World Health Day 2001

Case study: A comprehensive awareness-raising programme in Italy

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"I ... appeal that everyone, according to their responsibilities, should commit themselves to defend the dignity and the rights of the mentally ill. No-one should remain indifferent..."

Pope John Paul II on the occasion of World Health Day 2001

Like other communities, the municipality of Rovigo in Italy designed a full calendar of events from April to December to commemorate World Health Day. Round tables, open days in therapy centres, literature conferences, theatrical and dance events, poetry and visual arts exhibitions as well as sporting events were all used as means of raising awareness among various groups with the message that those suffering from mental illness are also citizens of the community and deserve the same respect as others.

The organizers teamed up with other established city programmes to highlight mental health in their events. For example, in the July "Vetrina danza" festival, artists performed a show representing the creative aspects of psychic suffering. The choreographer and audience discussed the presentation and audience reactions. In collaboration with the "Opera Prima" festival during June, performers gave guided tours of a facility that once was a psychiatric hospital. They portrayed themes of psychic suffering and prejudice toward mental illness throughout the tours. The "Blues in the Piazza" music festival hosted a conference with blues musicians, creative writers and journalists to discuss music as a means for fighting against psychic suffering and exclusion. The RoWoodstock music festival in November welcomed bands that have composed songs dealing with uneasiness and stigma.

Member of Parliament Lady Carol Kidu of Papua New Guinea participating in the World Health Day march with popular entertainer Kanage and hundreds of residents of Boroko.
World Health Day events were supported by a wide selection of educational and promotional materials produced by WHO and national governments. WHO drafted a global brochure “Mental health around the world” that provides the facts to dispel common myths and inform the public about principal disorders, general movements in mental health policy and actions to be undertaken by all levels of society. Several regional brochures were produced to highlight the details of specific mental health strategies. In addition, many governments and national associations created pamphlets and brochures on national facts and mental health resources, as well as posters, hats, pins and other mementos.

For example, the China Health Education Institute distributed over 30,000 posters and leaflets and 10,000 brochures. 40,000 publicity leaflets were sent to the general public for epilepsy events in China organized as part of the Global Campaign Against Epilepsy on the occasion of World Health Day. In Chile, advocacy materials were distributed to 170 organizations participating across the nation, a record involvement. In Spain, over 4,000 posters were distributed in the single province of Catalunya.

Audiovisual materials were also developed by many groups to focus on specific themes of relevance in their communities. A video “7 Days, 7 Faces” was produced by the WHO Regional Office for the Eastern Mediterranean. The WHO Regional Office for the Americas (PAHO) created public service announcements that have been aired on major networks, including CNN. WHO Headquarters Office commissioned several videos to demonstrate the role of family seen from an NGO perspective in India, provision of mental health care in community-based services related by the city of Trieste, Italy and provision of care in impoverished settings as demonstrated by the psychiatric services in Tanzania.

Websites added another powerful mechanism for spreading the messages of World Health Day. WHO Headquarters created a site in six languages (www.who.int/world-health-day) and informative sites were also hosted by each WHO Regional Office. National efforts brought the messages of World Health Day to the internet public in many languages including Czech, Turkish, Italian, Portuguese and Spanish. Furthermore, several events were broadcast on internet through live chat sessions such as those organized by the World Assembly of Youth and by CNN with Dr. Bernard Aarons, Director of the Center for Mental Health Services of the U.S. government.
Many communities recognized the importance of targeting activities specifically for the younger generations. Some events included:

- A series of theatrical presentations for high school students by the company “Théâtre de Jade” in France.
- Regional workshop for high school students entitled “Mental Health is a social relationship”, Italy.
- Football matches and a championship tournament among youth with teams wearing World Health Day uniforms in the main square of Berbera, Somalia.
- “Healthy minds for a healthy generation” workshop conducted for youth in cities on 4 continents.

BRINGING ABOUT A CHANGE IN ATTITUDE

WHO initiated a massive activity involving youth from ages 6-18 in a classroom-based contest challenging them to depict their understanding of mental health through drawings and written essays.

The Global School Contest for Mental Health

About one in five of the world’s youth under the age of 15 suffers from mild to severe mental disorders. However, despite the need for early intervention in childhood, most treatments are geared towards adults. The global school contest on mental health therefore was a way to reach young people and their families and to develop a better appreciation of mental health. It encouraged schools to initiate or reinforce efforts to promote mental health education in the school health curriculum. Mrs Rosalynn Carter, former US First Lady, described the contest as a “fruitful exercise” for children of the world to spend time contemplating in a caring way those who suffer with mental illness.

The contest was also promoted by UNESCO and a variety of national level partners. Schools submitted one winner for each of the three categories to the WHO Country Offices for judging. National winners were chosen, and their entries were transmitted to WHO Regional Offices for the selection of the six regional winners. A jury of representatives from WHO Headquarters, NGOs, the education and artistic communities chose three global winners on 7 April.

The finalists, Mr Dhruv Suri of India, Ms Tang Shu-wei of China and Ms Bibbie Kumangai of Palau, were flown to Geneva to share their experience with ministers at the 54th World Health Assembly in Geneva. With over 80 countries participating in the Global School contest, an estimated half a million children and adolescents were made aware of the importance of mental health and the need to do away with prejudice and discrimination. The works of the national winners will be compiled into a book dealing with stigma and mental health issues for kids, school teachers and professionals.

The school contest was well prepared on the local level. The St Nicolas Child and Adolescent Psychiatric Clinic (Sofia, Bulgaria) organized an information session in January for the city’s students participating in the contest. The Mental Health Centre for Adults and Day Care Centre held a meeting with teachers at the town hall in Granollers (province of Barcelona, Spain) to explain the meaning of the World Health Day theme to assist in the development of their lesson plans. Full page advertisements to promote the contest were placed in the national newspapers of several countries including Algeria, India and Sri Lanka.

Argus Seder, national winner of the age category 15-18 years, reads his essay at the World Health Day celebration in Hungary.

I understood very well that alcoholism was a disease that mined not only the life of (my father) but also the lives of many who loved him, especially the family... I understand now that the (he) could not have helped himself without our help. I have learned to respect and understand those who are different from us in order to help them. Sometimes that’s all it takes.

Bibbie Kumangai addressing the 54th World Health Assembly at the United Nations in Geneva, Switzerland.

“Kids on the block” puppets engaging children during an educational segment of the awareness-raising event at the Pan American Health Organization.

Lao Theatre Group

Case study: Lao Youth Theatre Group
BRINGING ABOUT A CHANGE IN ATTITUDE

Targeted events for health professionals

Conferences, symposiums and seminars were held in many countries on World Health Day. While some were geared toward the general public, others were tailored toward raising awareness among health professionals. General practitioners, nurses and even psychiatrists and psychologists hold biases and myths about mental illness. Stigmatization of the profession has led to a low level of skilled professionals both in the number of specialists and the capacity of primary health care to respond to mental health problems. Many administrations used World Health Day to convene training courses and seminars for professionals in an attempt to both improve knowledge and reduce prejudice within the medical community.

Case study: Mental Health Symposium results in the launching of a mental health network

A few examples of meetings attended by health professionals around the world include:
- Training conference for psychiatrists in Asia (Australia)
- Training course on epilepsy & dementia at Fudan University (China)
- Conference entitled “From exclusion to mental health systems of care” in Cairo (Egypt)
- Workshop on stress management for health workers (Guyana)
- Conference “Strategy to take measures against stigma and bias for people with mental illness” in Seoul (Republic of Korea)
- Six-month series of conferences on topics including problems of modern psychiatry, current state of causation, dementia and infantile autism (Russia)

Joint session of pediatricians, general physicians and nurses entitled “Alarm signals among the young population to detect psychological pathologies” (Spain)

Meeting of doctors “Without a fear from mental disorder patients” (Yugoslavia)

Workshop series on rehabilitation issues and development of programmes at Boston University (USA)

We must continually assess the number and distribution of qualified practitioners and look for ways to form partnerships with international colleagues to increase the number of trained practitioners and researchers in mental health.

David Satcher, MD, PhD, U.S. Surgeon General from JAMA Editorial, 4 April 2001, Vol. 285, No. 13, 1697

Follow-up activities and concrete results from professional seminars as well as public events were reported by organizers in many countries.

Publication in scientific journals is a crucial part of shifting the opinion of health professionals, both in the public and private health sectors.

This activity was keenly supported by all offices of the World Health Organization. Many renowned experts submitted compassionate contributions to the editorial pages of leading international journals, respected regional publications and national bulletins. Well over 25 major specialized periodicals published commentaries on the occasion of World Health Day including:
- Acta Psychiatræa Scandinavica
- American Journal of Public Health
- Indian Journal of Psychiatry
- Journal of the American Medical Association
- Journal of the College of Physicians and Surgeons Pakistan
- Lancet
- Neurology and Public Health
- South African Medical Journal
Many associations, professionals and public servants were quick to seize the opportunity provided by World Health Day to reach out to key decision makers in their communities. In Angola, a meeting between parliamentarians, members of the government, NGOs and religious leaders was convened to sensitize law-makers about mental health issues. Special parliamentary sessions on mental health and substance dependence were held in Poland, Slovakia, Sweden and Thailand, to name only a few countries.

At national and local level, many efforts were made to educate and persuade legislators and government officials to devote energy and resources to protect the mental health of their citizens. Proclamations were signed at all levels of government. A few examples include:

- President, Central African Republic
- Prime Minister, India
- Minister of Health and Social Welfare, Lesotho
- Minister of Health, Myanmar
- President and Chief Executive, Pakistan
- Deputy Mayor of Cape Town, South Africa
- President, Sri Lanka
- Prime Minister, Thailand
- Mayor of Washington, D.C., USA

The French city of Lille joined the world in celebrating mental health on 7 April 2001. Among various activities, the Mental Health Public Service identified the necessity to ensure a strong political commitment for securing their citizens’ mental health. The signature of proclamations by the mayors of twenty-two cities and towns comprising the Lille metropolitan area* has been an important action for raising awareness among government officials of the following key mental health concerns for the local community:

- Mental or brain disorders affect a good number of France’s citizens of all ages in both large cities and rural towns, as in the rest of the world;
- Such disorders have a great impact upon quality of life and an individual’s functioning in society;
- Services must be improved and made accessible to all;
- Individuals suffering from a mental health problem and their families risk not being able to benefit from the health services to which they are entitled.

Ensuring political will is a major element of a successful advocacy campaign and can have a marked influence on reducing stigmatization faced by those suffering from a mental illness and their families.

Case study: Securing political will in France

* World Health Day Proclamation signed by the elected officials of Lille, Marquette, Fretin, Mouzoux, Neuville en Famen, La Chapelle d’Armentières, Comines Belgique, Tourcoing, Halluin, Houplines, Armentières, Mons en Baroeul, Marcq en Baroeul, Lezennes, Ronchin, Faches-Thumesnil, Frelinghien, Helfemines, Hericaches, Comines, Nieppe as well as the North Lys Metro Regional Union and the Directors of all Mental Health Service Units of each district.

"For too long mental health problems have been treated as dirty secrets instead of challenges like any others, to be faced and dealt with by individuals, families and communities."

Oscar Arias, Former President of Costa Rica and 1987 Nobel Peace Laureate
Hundreds of newspapers carried articles about World Health Day and the mental health situation of their nation or local community. All major news wires and international newspapers as well as local media covered mental health issues extensively. In some cases, regular mental health columns were established as a result of World Health Day. Television and radio stations were very active in launching a mental health debate on the occasion of World Health Day. In-depth reports have been initiated to investigate human rights abuses in mental institutions, to track the progress of legislative efforts to revise law or analyse the service capacity of nations, states, cities and towns.

A key partner for disseminating information and influencing opinion, the media have proven willing and eager to explore mental health in more detail. A few examples of the variety of radio programmes, television debates between professionals, patients and the public, editorials, reporting and investigative journalism which took place in all countries:

- National contest for best radio and TV broadcast for healthy lifestyle against alcohol and drugs (Belarus)
- National television discussion programme on the prevention of mental disorders in children and adolescents (Czech Republic)
- Question & Answer call-in show on adolescent mental health problems on All-India Radio (India)

From 1-3 April, a number of prominent mental health and media professionals from Egypt, Lebanon, Iran, Morocco and Pakistan gathered in Cairo to discuss strategies for the launch of an anti-stigma campaign.

Media can contribute to public education, improvement of psychiatric services, advocacy of community-based interventions, protection of patients’ rights and reduction of stigma. The group discussing these points agreed that as media exerts a powerful influence on our perceptions, attitudes, emotions and behaviours, media professionals have an immense responsibility to avoid the pitfalls of sketchy coverage, misinformation and sensationalism.

The group shared examples of positive media coverage in their own countries and identified the barriers they face in attempting to provide an accurate and open flow of information. They proposed a strategy to tackle the menace of stigma and discrimination based on the following actions: 1. Develop a coherent and consistent policy framework for ensuring access to mental health services within general health care; 2. Develop guidelines for media reporting with built-in mechanisms of monitoring the implementation; 3. Develop training workshops for media personnel to enhance their capacity for reporting about mental health issues; 4. Develop protocols to study the impact of media campaigns on public attitudes in both short and long term, and incorporate the changes required in the campaign strategy based on the evidence generated; and 5. Encourage and empower self-help and family groups to monitor and expose discriminatory practices against mentally ill persons.

The WHO Regional Office for the Eastern Mediterranean plans a second instalment of this “Media and Mental Health” meeting in the fall of 2001. (Adapted from an article appearing in Dawn, Pakistan, 2 May 2001)
STRENGTHENING NETWORKS

World Health Day provided an incentive for professionals and patients to improve their knowledge on mental health and a motive for fostering networks of continuous learning. The power of advocacy is increased through the "strength in numbers" effect of grouping concerned individuals. Their messages are more easily heard by decision-makers and their collaboration can lead to more widespread circulation of information and best practices.

A variety of activities for building networks and for the exchange of information and experiences took place around the world.

A few examples include:

- "Developing and connecting networks for mental health", an international meeting of associations, held in Naples, to overcome social exclusion and guarantee the right to care (Italy)
- The creation of a Mental Health Resource Directory for the Province of Western Cape (South Africa)
- A meeting of women victims of violence bringing together for the first time women from two associations in Spain and Algeria.

Four research centres specializing in medical psychology, alcohol abuse and substance dependence at the universities of Brussels, Ho Chi Minh City, Varna and Vientiane have inaugurated a new "internet communications highway" on this year’s World Health Day. The launch of this site was suggested as a means of cementing their contacts into a more official and regular network that would examine different themes on a recurring basis.

A highly publicized first debate was planned to coincide with World Health Day, however, due to logistical difficulties, the first thematic discussion was not able to commence with the proposed Internet forum. Despite this initial setback, the organizers of this technology-based network for connecting researchers in four corners of the world have nevertheless laid some constructive foundations.

The first subject of discussion highlighted therapeutic approaches for young persons dependent on alcohol. The debate focused on the importance of the problem, potential links with socio-economic factors, useful prevention methods, specific treatments and collaborative efforts between those institutions involved in the network exchange. As a preliminary step, UBB (Université Libre de Bruxelles) has filmed consultations with consenting patients for use by professors in their classroom in Brussels. To expand the discussions, UBB is exchanging filmed consultations and student debate with classes at the University of Ho Chi Minh City. The non-confidential commentary created during these cultural exchanges is intended to be shared on-line, accessible to all through the Internet. It will certainly be interesting to witness the expansion of this collaboration and the benefits it can bring to other researchers, mental health professionals and the public-at-large through growth of the Internet-based activities of this network.

Website: http://www.ullb.ac.be/medecine/psych/accu/infonat.html

Case study: Linking together Belgium, Viet Nam, Bulgaria and Lao People’s Democratic Republic

Public opinion influences policy, law and the delivery of services. Creating informed public opinion that positively affects the quality and availability of mental health services is a critical step in an advocacy strategy. Around the globe, World Health Day 2001 sought to change public attitudes on mental health, strengthen networks and influence decision makers.

Many countries have embarked upon the path to review policies and implement comprehensive reforms as a means of marking World Health Day 2001.

- In Algeria, a national plan for mental health is currently being reviewed on the local level with the intention of presenting it to the government for adoption on 10 October, World Mental Health Day (annual event as decreed by the World Federation of Mental Health).
- In France, the Ministry of Health announced future policy changes, currently under deliberation, that will phase out psychiatric institutions in favor of community-based mental health services. A seminar with consumers was held on the occasion of World Health Day to provide the public administration an opportunity to listen to the basic concerns of those in need. Patients’ rights to access their personal medical files in cases of psychiatric illness and improved information for consumers on the nature of disorders were two topics of debate at this colloquium that generated valuable insight for the process of policy revision.
- In Liberia, a country with no mental health programme, a seminar helped build consensus on the development of a national programme with emphasis on short-term interventions. The resulting ten-point strategy encompasses the problems of stigma, the promotion of community-based mental health care, improved training and the particular challenge of dealing with trauma healing and reconciliation.
- In Syria, the creation of a new mental health unit in the Ministry of Health and an integral mental health programme were announced.
- In Ukraine, a national committee to monitor the state of human rights of mentally ill persons and their families was established.
Improvement of services was a central theme of the World Health Day advocacy campaign.

Both the importance of establishing services closer to one’s home as well as the creation of services for populations often forgotten such as children and adolescents or the elderly has been highlighted. Many new services were inaugurated during World Health Day celebrations to meet the needs of the concerned populations.

- A new adolescent day unit was created at Calvary Hospital (Australia)
- A new psychiatric unit was established at Belmopan General Hospital (Belize)
- A mental health centre “Chocekolубie” was opened in the town of Pazardjik (Bulgaria)
- A new facility managed by the National Federation of Patients and ex-psychiatric patients was opened in Paris (France)

Increased funding for mental health initiatives is the next logical step.

As reported in the Deccan Herald (17 July 2001) of India, governments are following suit by revisiting mental health care budgets. 30 million dollars (150 crore) will be used for collecting mental health data and extending the available services and facilities across the country.

In Papua New Guinea, the government organized awareness-raising activities for a full month in all districts of the nation with cultural events, seminars and service-based activities. A new psycho-social rehabilitation centre was opened and the existing mental health ward in the general hospital was entirely renovated. The sixth annual national health expo focused on the stigma, exclusion and discrimination that surround mental disorders. Nationally-renowned comedian, Kanage, performed imaginative skits on drug abuse, child abuse and mental health at the site of the expo, the Sir John Guise Stadium. As the numerous articles report, the citizens of Papua New Guinea, with its population of 5.1 million, over 800 languages and only four psychiatrists, were given a wealth of information and deeper awareness of mental health issues.

The Health Department’s Mental Health division also used this occasion to embark upon a new mental health programme for members of the armed services. Confronting a traditional bastion where the “weakness” of a mental health disorder would seem impossible to admit in any nation, the Papua New Guinea team should be commended for their efforts. Mental health disorders generated by atrocities of a guerilla war were a “shamefully hidden secret” in the rank and file of their army. The objectives of the programme are to highlight the importance of mental health among the officers and staff as well as to focus on combat traumatic stress disorders, identification of common signs and symptoms of mental disorders and discussing better ways to manage these problems. Provision of appropriate mental health services to assist soldiers, sailors, airmen and civilian employees, covering all Defense Force establishments is now a reality in Papua New Guinea.

Case study: New mental health programme for members of the armed services

The National newspaper, Papua New Guinea, 20 June 2001

Other countries have used the months of preparation for World Health Day to ensure that acts, decrees and various legislation that were in the process of being up-dated, and sometimes stuck in endless debate, be voted into law.

- In Nigeria, new mental health legislation was sent to Parliament on 20 March to replace the Lunacy Act of 1914.
- In Thailand, a special session of Parliament was held in April for submission of the Mental Health Act.
- In Shanghai, China, the city legislature is currently drafting a law to protect the rights of mental patients and improve mental health services for submission to the Shanghai Municipal People’s Congress in late 2001.

After 12 years of debate, Brazil’s psychiatric reform law was approved and came into effect in April 2001. The Ministry of Health took advantage of World Health Day by organizing a ceremony on 6 April for the signing of this law and announcing its plans for other policy changes such as auditing of psychiatric hospitals.

The Brazilian law emphasizes community-based care and patients’ rights. About 90% of the mental health expenditure in 2000 was allocated to hospitals as much of the treatment in Brazil is still based on hospital care. There has been a gradual reduction in hospital beds for psychiatric patients although “there has not been a reallocation of resources to assist these people, and extra-hospital care numbers are much below what they should...,” said Valerim Gentil Filho of the University of São Paulo. “The law will have no impact in health care if it’s not followed by an increase in mental health care expenditure,” agreed Jair Mari of the Federal Universidade of São Paolo.1

Ordinance Eight of 2001, or the Mental Health Ordinance, proclaimed by the President of Pakistan, effective February 2001, consolidates and amends the law relating to people with mental disorders, the management of their property and other related matters and replaces the outdated Lunacy Act of 1912. The law covers the establishment of a federal mental health authority, assessment and treatment of mental disorders, leave and discharge from psychiatric services, judicial matters, financing of mental health services and protection of human rights.

These new laws in Brazil and Pakistan are milestones in securing human rights of persons with mental illness. They are also guarantees that resources will be utilized so as to ensure appropriate care in the best conditions possible. Other nations are following suit to respect internationally accepted standards as laid out in the 1991 United Nations resolution 46/119 “Principles for the Protection of Persons with Mental Illness and for the Improvement of Mental Health Care”. Principle 7 of this resolution states that every patient shall have the right to be treated and cared for, as far as possible, in the community in which he or she lives.

Case study: Adopting new legislation in Brazil and Pakistan

1. The Lancet, Vol 357, April 28, 2001
WHO has advocated for putting mental health squarely on the health, development and political agendas of all nations. On World Health Day, nations have declared that they will no longer settle for “throwing away” those with a mental illness. Countless individuals abandoned by society still suffer needlessly in many countries. World Health Day has shown that people are ready and willing to act. We must enable individuals suffering from a mental or brain disorder to participate in everyday life activities and allow them to be treated and rehabilitated. We must not exclude the medical professionals who are often treating these people in far-off places but integrate these services into general health care systems. We cannot continue to ignore treatments and solutions that exist.

Efforts to eradicate the stigma and subsequent exclusion associated with mental and brain disorders are far from over. WHO’s advocacy work will continue to shine the spotlight on areas of mental health that require attention. WHO’s Mental Health Programme is focusing its efforts in the areas of information, advocacy, policy and research.

Despite years of suffering, it is clearly a joyous occasion to stand proudly as a renewed citizen of our world. Examples of human rights violations perpetrated against those with mental or brain disorders can be found in many countries. The people helped by Mr. Ahongbonon hope their story will serve to help others.

Footnotes

Additional sources of relevant information from WHO include the 2003 World Health Report, Mental Health Call for Action by World Health Leaders, Atlas Mental Health Resources in the World, Mental Health Policy Project, Policy and Service Guidance Package, Executive Summary. A detailed report of World Health Day activities in the 155 participating countries can be reviewed at www.who.int/world-health-day. Consult WHO’s Mental Health Programme website at www.who.int/mental_health for further information.

Organizers have not been listed by name as this document is not intended to highlight individual efforts or specific institutions, governments or NGO’s but to demonstrate the level of commitment world-wide to improving the mental health situation.

Conclusion

Gregoire Ahongbonon, a concerned citizen with no special training, has taken it upon himself to rehabilitate many neglected men and women over the last years (photos on these pages). Mr. Ahongbonon described their stories to a captivated audience of international NGOs and UN Agencies during the World Health Day celebrations at WHO Headquarters in Geneva.
The following 155 countries have reported activities in celebration of World Health Day 2001

Albania
Algeria
Andorra
Angola
Argentina
Armenia
Australia
Austria
Bahamas
Bahrain
Bangladesh
Barbados
Bosnia and Herzegovina
Botswana
Brazil
Brunei Darussalam
Bulgaria
Burundi
Cambodia
Cameroon
Canada
Central African Republic
Chad
Chile
China
Colombia
Comoros
Congo
Cook Islands
Costa Rica
Croatia
Cuba
Cyprus
Czech Republic
Denmark
Djibouti
Dominica
Dominican Republic
Ecuador
Egypt
Eritrea
Estonia
Ethiopia
Fiji
Finland
France
Gambia
Georgia
Germany
Ghana
Greece
Guatemala
Guinea
Guyana
Haiti
Honduras
Hungary
Iceland
India
Indonesia
Iran (Islamic Republic of)
Iraq
Israel
Italy
Jamaica
Japan
Jordan
Kenya
Kiribati
Kuwait
Kyrgyzstan

Lao People’s Democratic Republic
Latvia
Lebanon
Lesotho
Liberia
Libyan Arab Jamahiriya
Lithuania
Madagascar
Malaysia
Maldives
Malta
Mauritania
Mauritius
Mexico
Micronesia (Federated States of)
Mongolia
Morocco
Mozambique
Myanmar
Namibia
Nauru
Nepal
Netherlands

Niger
Nigeria
Niue
Norway
Oman
Pakistan
Palau
Papua New Guinea
Paraguay
Peru
Philippines
Poland
Portugal
Qatar
Republic of Korea
Republic of Moldova
Romania
Russian Federation
Rwanda
Samoa
San Marino
Saudi Arabia
Seychelles
Sierra Leone
Singapore
Slovakia
Slovenia
Somalia
South Africa
Spain

Sri Lanka
Suriname
Swaziland
Sweden
Switzerland
Syrian Arab Republic
Thailand
The former Yugoslav Republic of Macedonia
Togo
Tonga
Trinidad and Tobago
Tunisia
Turkey
Uganda
Ukraine
United Arab Emirates
United Kingdom of Great Britain and Northern Ireland
United Republic of Tanzania
United States of America
Uruguay
Venezuela
Viet Nam
Yemen
Yugoslavia
Zambia
Zimbabwe
I don’t know what they’ve told you,
I don’t know what you’ve heard,
But if you care to hear my thoughts,
Please listen to these words.
I dream to bridge the distance,
And make ourselves aware,
That we must accept each other,
And erase these frosted stares.

You see a psychological problem,
Can make someone stressed,
They cannot find a healthy means,
Of putting thoughts to rest.
Neurosis and psychosis are,
Somewhat difficult to explain,
But to make it all sound simple,
They both affect the brain.

Problems sometimes manifest,
And cause people to believe,
That what they see is different,
From what someone else perceives.
This is part of mental illness,
Like personality disorders,
Where anxiety and insecurity,
May cause a lack of order.

Abnormal thought and behaviour,
Often leads to great confusion,
And all the answers can’t be found,
In mental institutions.
Caregivers must find tolerance,
To restore the health of mind,
Instead of isolating them,
And keeping them confined.

To not express frustration,
Cuts a person like a knife,
They sadly may blame themselves,
And attempt to take their life.
A person may withdraw,
From the world as we know it,
And it takes special love and care,
That can heal if we show it.

In some special cases,
Drugs must be used,
To bring about mental health,
And they mustn’t be abused.
For all the people who suffer,
There’s pain to be endured,
With all my heart I hope we find,
A solution or a cure.

Many families have been weakened,
Through sheer misunderstanding,
Of a mentally ill family member,
Whose needs are quite demanding.
But a problem in a family,
Is a problem to be shared,
Discussion speeds resolution,
And shows how much we care.

If you feel your life is empty,
And that the sun won’t shine,
Think of those who have fallen ill,
In emotion and in mind.
Then look beyond their misfortune,
And love them for they’re worth,
A place in our empty hearts,
A place upon this earth.

By Damien Ah Sam, International Secondary School, Fiji