From: Kumar, Manasi
Sent: Wednesday, September 11, 2019 8:34 AM
To: MHconsultationSept2019
Subject: WHO: EB146 and WHA73: Development of a menu of policy options and cost-effective interventions to promote mental health and well-being - WEB-BASED CONSULTATION

Dear mh consultation

Please see my comments on the circulated draft

Thought that the LIC-LMIC and MIC-HIC- banding smoothened a lot of contextual differences. I did not sufficiently understand how individual and population level interventions were selected.

The universal and indicated school based ones were preventative in nature largely but appeared to target only those adolescents who’d be in schools. A large nos in LIC/LMICs would be left out. The suicide prevention through regulation of pesticides was interesting and it would have been interesting to see how that was disaggregated across LMIC/LIC countries.

I didn’t completely follow the bipolar management with lithium in LMICs as its mostly not regulated using lithium. For depression and anxiety – no differentiation was made on type or modality of intervention. Cost of training additional staff or task-sharing costs would have been good too.

Some disaggregation of MH funding and spending in the select 20 countries along with psychiatric morbidity and mortality would have been helpful too.

Re CAMH and adult interventions is the GCEA- models run $ similarly or is there a difference in adult or adolescent healthy life year in terms of time effectiveness?

Regards

Manasi