



FREQUENTLY

Asked Questions

Why is WHO focusing on mental health on World Health Day?

- Mental and physical health must be given equal importance. This has not been the case. Mental health has been neglected. Mental and physical health are inseparable. The World Health Organization defines health “as a state of complete physical, mental and social well being and not merely the absence of disease.”
- Five of the ten leading causes of disability are mental disorders: schizophrenia, manic depression (bipolar disorder), depression, substance abuse and obsessive-compulsive disorder.
- Health measurements now take into account disability as well as death; a clearer picture exists of the links between mental health and overall quality of life and productivity.
- Mental health is deteriorating, meanwhile physical health is overall improving throughout the world. More people are living longer. More people will develop mental disorders in their lifetime due to social, biological and environmental factors.

How many people are affected by mental health problems in the Western Pacific Region?

- Worldwide, more than 400 million people suffer from mental disorders, including epilepsy, and intellectual disability.
- This number is based on health surveys which consistently show that common mental disorders such as depression and anxiety occur in about one in five of the population every year.
- In addition, psychosocial problems closely related to mental health include alcohol and drug abuse and dependence. These are common, especially in young men, in many societies throughout the Region (over 10% of the overall population is affected).
- Two in a hundred people during their lifetime will experience schizophrenia or manic-depressive (‘bipolar’) disorder. Two to three percent of all families will have a member affected by intellectual disability.

How much money are countries spending on mental health?

- Mental health is the lowest budget priority for most countries and areas in the Region. Half of the countries in the Region spend less than 1% of their health budget on mental health, only a few spend 5 to 10%.

Are there more mental health problems in poor, underdeveloped countries or rich countries?

- Mental illness and psychosocial problems are common across the Region in both developed and developing countries.
- Social and economic deprivation and disruption will affect the occurrence of some disorders such as anxiety and depression, and the likelihood of alcohol and drug abuse. People in poorer communities will have less access to treatment. This will increase the levels of persisting disability in those affected.

- Social and environmental factors also play a major role in mental disorders. For example, the Region's mega cities will continue to expand; a lack of services and affordable housing will create psychological strains on poorer, migrant communities living in overcrowded conditions. Birth rates in poorer developing nations will continue to rise; malnourished expectant mothers and inadequate pre-natal and perinatal care will increase the risk of children born developmentally delayed and with brain disorders.

Do most countries have the resources to deal with mental disorders?

- There are many tools to end the suffering of millions of people: medication is available; trained mental health professionals can provide counselling and rehabilitation; and a greater awareness exists of the role families and communities play in promoting positive mental health and delivering health care services.
- The challenge is access to these tools. Some people have more access to these tools than others. Governments are providing too little money for mental health within their overall health budgets.

What are the strategies the Region should consider to improve treatment of mental disorders?

- More emphasis on care in the community as an effective way to improve treatment of mental disorders.
- An increase in the number of community health care workers with training in psychiatry at the primary health care level to improve the diagnosis and treatment of mental disorders. Better access to basic medicines and counselling for those affected, closer to where they live and where they work.
- Greater awareness of community and family members of mental disorders in order to improve their role as caregivers to affected persons and a reduction in the negative perceptions of people living with mental disorders.
- These approaches are cheaper and more effective than constructing new hospitals and psychiatric wards.
- Increasing the number of psychiatric beds does not usually translate into better treatment for those living with mental disorders. It may even translate into unnecessarily restricted and outmoded treatment practices.

What can WHO do to help improve the mental health picture?

- WHO can work as a catalyst.
- It can work with Member States and the international community to create a more supportive environment so that the needs of people with mental disorders and their families can be met. This means drafting laws and policies to ensure appropriate funds are allocated to mental health care, ensuring the rights of those affected to dignified and quality care, and providing training in mental health to health care workers.
- WHO can assist those who work with communities to encourage greater awareness and understanding of mental health.
- WHO can support those who work with families in the recovery and rehabilitation of an affected family member and provide support to the families for their own health and well being.