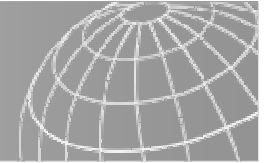


# Can Mental Health play a role in Development Cooperation?

Strengthening Mental Health Systems in Low and  
Middle Income Countries

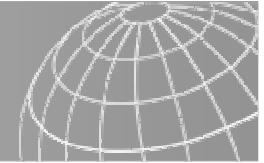
Rimini, 21.04.2009

Berit Kieselbach – [berit.kieselbach@gtz.de](mailto:berit.kieselbach@gtz.de)



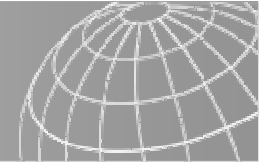
# Mental health and the development agenda

- Double burden of disease: high mortality and morbidity due to communicable diseases, increasing rates of noncommunicable diseases incl. mental health
- Mental health still not in the focus of development agenda
- **What are the reasons?**
  - Narrow focus on MDG indicators
  - Changing aid modalities (SWAPs, basket funding)
  - Focus on aid effectiveness: increased demand to show results (mortality), quick wins instead of lifelong interventions, evidence-base of mental health activities
- **What can be done about it?**



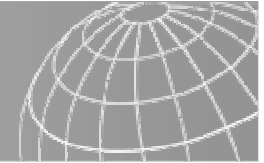
## Mental Health not reflected in the MDGs

- 3/8 goals, 8/16 targets, 18/48 indicators relate to health, however health goals entirely ignore NCDs and mental health
- Narrow focus on MDG indicators
- Direct links with mental health
  - **Poverty**: recognized risk factors for mental disorders and more likely to be experienced by poor people, persons with mental disorders are more likely to drift into poverty
  - **Child mortality**: correlation between malnutrition and maternal mental disorders
  - **Maternal mortality**: maternal depression



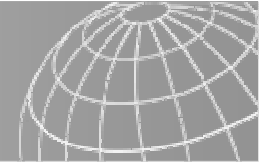
# Mainstream mental health into priority areas of development cooperation!

- Enhance effectiveness of existing programmes
- **HIV/AIDS, TB** -> adapt existing structures for screening and treatment of NCDs and MH
- **Gender / Sexual violence** -> strengthen mental health system through vertical programme
- **Social health protection**: target pro-poor activities such as social cash transfers, community health funds, or voucher schemes to persons with mental disorders
- **Injecting drug use**: increase effectiveness of methadone programme through complementary psychosocial interventions
- **Countries in crises**: promote multi-sectorial systematic approach (IASC) instead of stand-alone psychosocial activities



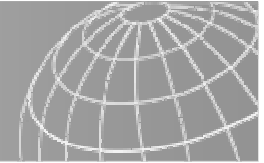
# Changing aid modalities

- Paris Declaration
  - Ownership of development partners
  - Alignment national objectives
  - Harmonization of donor countries
  - management for results
  - Mutual accountability between donors and partners
- Increased focus on sector-wide approaches (SWAps), TA-Pooling, basket funding, sector budget support, general budget support
- In practice harmonization efforts focus rather on regional distribution



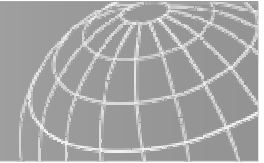
## Adapt to new aid modalities!

- Mental health often lives from lighthouse projects and programmes
- Make sure Mental health is included in PRSPs and national health sector strategies
- Joint action plans and work plans
- Include indicators on non-communicable diseases into joint reviews
- Budget perspective: include Mental Health in joint budget planning



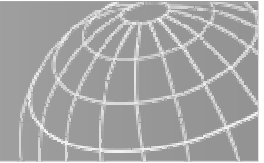
# Accountability for results and aid effectiveness

- Financial insecurity -> increased accountability for tax payers contributions
- Proof relation between intervention and outcome -> focus on easily understandable facts and figures (mainly mortality data)
- Mental health and chronic diseases require long-term interventions, long impact chain -> limited potential for quick wins
- Do we focus on the right interventions? Are available resources used efficiently? Fragmented interventions, lack of evidence-base (focus on specific disorders, training, targeted interventions)



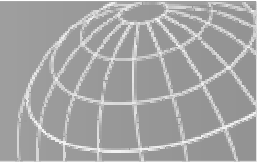
## Focus on outcomes!

- WHO-AIMS powerful tool not only to assess gaps but to show effects on health system strengthening
- Promote cost-effective mental health interventions
- Build capacity in development agencies / donors to implement evidence-based interventions



# Neglected tropical diseases: a success story?

- 13 parasitic and bacterial infections
- Similarities with mental health
  - Mainly affects poor people
  - Lead to long-term disability
  - High burden of disease / disability
- Success factors
  - Strong partnerships: research, development agencies, industry
  - Perceived as quick win in reducing disease burden
  - Clear messages and strategies



Thank you!