

28 January 2011

Mr Sandy Hollway AO
Chair
Independent Review of Aid Effectiveness
GPO Box 887
Canberra ACT 2601

Dear Mr Hollway

AusAID and International Mental Health

We are delighted to provide a submission to your review panel and stress the importance of supporting work in mental health in international development. Here at the University of Melbourne we have an extremely active coordinated and integrated international mental health stream in the Nossal Institute of Global Health that encompasses the well-known work of Asia Australia Mental Health, Centre for International Mental Health, Centre for Women's Health, Gender and Society, WHO Collaborating Centre in Mental Health and other groups active in the international mental health arena. All of these groups undertake extensive work in various Asian countries in terms of mental health resource development, research, clinical training and government mental health policy development.

We all believe that the WHO proposition that there can be "no health without mental health" is critical and that AusAID should certainly consider funding endeavours into improving mental health as mental illness contributes to over 27% of all non-communicable diseases and is estimated to affect over 450 million people in the Asia-Pacific region; by 2030 it is projected that mental illness will affect approximately 238,000,000. Despite such a high burden of mental illness the amount of funding dedicated to public education, prevention, recognition and treatment to improve mental health remains minimal and is dwarfed by the resources provided for physical disorders. However mental and physical disorders often go hand-in-hand. Recently mental health promotion is being used by Professor Herman in our group as a deliberate strategy to prevent HIV infection and Professor Fisher's research on maternal mental health in low income settings is informing strategies to make pregnancy safer. Further in order to effect change we have invested in long term relationship building with governmental and non-governmental agencies, as we have found that sustained engagement and the shared experience of close cooperation is the key to aid program effectiveness. For example the collaboration between Asia Australia Mental Health at the University of Melbourne and the Peking University has led to the development of protocols for psychosis treatment and management and mental health human resources building through the China-Australia Health and HIV/AIDS Facility (CAHHF), which is now a leading example in implementing national mental health reform in China. Another example is **The Movement for Global Mental Health**, which was established by the Editor-in-Chief of The Lancet, Dr Richard Horton, in 2007, with the core group being the authors of the first Lancet series on global mental health. Three Australians are members of the 44 international members of the Movement's Advisory Group, and two academic staff of the Centre of International Mental Health at the University of Melbourne are members of the group. In December the Movement's Advisory Group invited the Centre for International Mental Health to host the Movement's Secretariat from 2011-2013. We will assume responsibility for the broad direction of the Movement for the next three years, including the planning of the Second Global Mental Health Summit, in Cape Town, in October 2011. We are engaged also in writing for the second Lancet global mental series which will be launched at the summit.

We strongly believe that working in partnership with various governments to improve mental health is essential to maximising the gains made in most areas of development especially in making inroads to addressing perpetuating factors of poverty cycles; for citizens to develop their full potential to participate in society, and for disaster-afflicted communities to build essential capacities for recovery. Mental health and poverty are reciprocally related. Mental health is worse in people who are unable, including because of gendered role restrictions, to generate an income and people with mental health problems can find it difficult to participate economically and socially. This leads to the huge loss of their contributions to society and the economy. However, while epidemiological data of people with mental disorder/illness including post

traumatic responses are available, the documentation of socioeconomic and development costs and the burden of care are under-researched and under-recognised.

The global significance of mental illness was very recently recognised in the statement A/65/L.27 on 1 December 2010 from the **UN General Assembly** headed "Global Health and Foreign Policy" which makes a number of points that are supportive of our proposal to AusAID. The most important of these for our purposes is a clear statement on the importance of mental health, as part of a broad approach to global health and foreign policy: "*Recognizing* that mental health problems are of major importance to all societies and are significant contributors to the burden of disease and the loss of quality of life and have huge economic and social costs, and welcoming the 2010 report of the World Health Organization on mental health and development." Further, the statement: "*Encourages* Member States to consider the close relationship between foreign policy and global health and to recognize that global health challenges require concerted and sustained efforts...*Acknowledges* that progress in global health is dependent primarily on national policies and actions and on international cooperation and partnerships...*Underscores* the urgency of strengthening of health systems...*Stresses*... The need to build sustainable national health systems and strengthen national capacities...*Encourages* Member States, the United Nations system, academic institutions and networks to further increase their capacity for the training of diplomats and health officials..."

In conclusion we would respectfully recommend that in the panel's review of **AusAID's development effectiveness** it is critically important that the relationship between universities and AusAID be strengthened, in pursuit of Australian international development assistance objectives and especially in the area of mental health. Our specific proposal that will significantly assist AusAID effectiveness is for significant support for an Asia Pacific Mental Health Systems Research, Education and Development Network as improving mental health will also improve physical health and such a mental health system is fully aligned with, and in many respects has anticipated, the directions in which AusAID is moving and the UN General Assembly statement on global health and foreign policy.

Yours sincerely



Ian Paul Overall MB ChB (Hons) PhD, FRCPsych., FRCPsych. FRANZCP
Cato Professor and Head of the Department of Psychiatry
Director of International Mental Health Stream Nossal Institute for Global Health
University of Melbourne

On behalf of

Professor David Castle, Chair of Psychiatry St Vincent's Health
Professor Graham Brown, Director, Nossal Institute for Global Health
Professor Helen Herrman, Centre for Youth Mental Health
Associate Professor Harry Minas Head of Centre/Unit, CIMH & VTPU
Centre for International Mental Health (CIMH)
Associate Professor Chee Ng, Director International Unit St Vincent's Mental Health
Ms Julia Fraser, Associate Director, Asialink