The contribution of psychiatry to primary health care

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... to renew a commitment to primary health care to achieve universal health coverage and the Sustainable Development Goals
Declaration of Alma Ata WHO 1978

• Primary health care strategy for
  • Achieving health for all by the year 2000
  • Providing a comprehensive, universal, equitable and affordable health care service for all countries

• Health for All
  • 10 Sections
Declaration of Alma Ata 1978

• **I:** Health as the state of complete physical, mental and social wellbeing

• **II:** Health inequities are unacceptable, especially between developed and developing countries

• **III:** Economic and social development is necessary for health

• **IV:** There is a right and duty for lay participation in planning and implementing health care
Declaration of Alma Ata 1978

• V: Governments are responsible for providing primary health care and for measuring health and social wellbeing.

• VI: Primary health care is the local, universally available, essential first point of contact with the health system.
  • Practical, scientifically sound, socially acceptable
  • Technology at a cost the community, country can afford
  • Community participation
From Health for All to Universal Health Coverage
Universal Health Coverage

WHO strategy for

• Access to good quality needed services
  • Prevention, promotion, treatment, rehabilitation, palliative care

• Financial protection
  • No-one faces financial hardship or impoverishment by paying for needed services

• Equity
  • Everyone, universality
Inspiration: Influencing the determinants of women’s mental health in the perinatal period
Perinatal mental health globally

• The mental health of mothers is a serious public health problem
  • Depression symptoms are common in pregnant women and new mothers in all types of countries
• Socially determined
• Consequences for the health and development of their children
  • *Lancet* 2015
Mental health of women in the perinatal period

• The **violence** experienced in everyday life by a high proportion of women worldwide
  • Associated with perinatal mental health problems including in low-income settings
  • ‘It is clearly essential .. to address emotional, physical and sexual violence perpetrated by an intimate partner (IPV) in any strategies to reduce the risk of perinatal mental health problems in women’ (Fisher 2013)
Protecting the mental health of women in the perinatal period

• The risk of perinatal depression may be reduced by
  • Protecting women from human rights abuses
    • Preventing IPV
    • Addressing insecurity and poverty
  • Early support for parents who have experienced complex trauma
  • Early identification and treatment of depression and other mental disorders and problems
Early identification of depression in the perinatal period

• Increasing the capacity to prevent, recognise and treat the common perinatal mental disorders in primary care

• Two effective ways to achieve this
  • Participatory approaches to health
  • Delivery of mental health interventions by supported non-specialists
Early identification of depression in the perinatal period

• Increasing the capacity to prevent, recognise and treat the common perinatal mental disorders in primary care

• Two effective ways to achieve this
  • Participatory approaches to health
    • Collaboration with women and their families
  • Delivery of mental health interventions by supported non-specialists
    • Trained and supported by psychiatrists and mental health practitioners in primary health care, maternal health services
Psychiatry for the future and primary health care
Looking ahead: The WPA Vision

A world in which people live in conditions that promote mental health and have access to mental health treatment and care that meet appropriate professional and ethical standards, integrate public health principles and respect human rights.
Psychiatry for the future

Strategy for

• Expanding the contribution of psychiatry to improved mental health worldwide
• Reaching people who face adversity and disadvantage

Based on

• Collaborating successfully with primary health care, other groups, organisations
• Psychiatrists using their expertise in a range of community settings
The needs and strengths of disadvantaged children and young people are central to each of the population groups.

The three dimensions of psychiatry for the future.

- Education
- Service Development
- Awareness/Advocacy
- Research and Publications

Enabling Activities

Population Groups

Partnerships and Collaboration

- Women and girls
- People living with long-standing mental illnesses and psychosocial disabilities and their caregivers
- People under extreme stress
Building on previous work
Partnerships in mental health

• Service users and family carers
  • Essential contribution to improving mental health in any country
  • Unmet needs

• Recommendations for the international mental health community about best practices in working with consumers and carers
Partnerships in mental health

10 recommendations

• (1) Respecting human rights is the basis of successful partnerships for mental health

• (2) Legislation, policy and clinical practice relevant to the lives and care of people with mental disorders need to be developed in collaboration with service users and carers

• Recommendations included in WPA’s Declaration of Madrid in 2011
Partnerships for better mental health worldwide
World Psychiatry (2011) 10(3):229-36
On-line curriculum on responding to gender based violence

• International Competency-Based Curriculum for Mental Health Care Providers on Intimate Partner Violence and Sexual Violence against Women
  
  • Donna E Stewart, Toronto, Canada
  • Prabha S. Chandra, Bangalore, India
  
  • Available www.wpanet.org in several languages
Partnerships in Action: Priorities for community orientated psychiatry
Human rights and psychiatry

Work with partners in education to

• Improve practice, conditions, care and links with community supports in institutional and other settings
  • For people with long-standing mental illnesses and disabilities and their carers
Enhanced primary care for young people

• Safe spaces
  • Primary health care practitioners, social service, substance abuse and mental health workers in a safe space
  • Early intervention, especially for high prevalence mental health problems (anxiety, depression, substance abuse)
Core competencies in mental health for family doctors

• An initiative of the World Association of Family Doctors (WONCA) in consultation with WPA

• **Values:** Consider mental health to be important

• **Communication skills:** Adopt person-centred approaches

• Assessment

• Management

• Collaboration and referral

• Reflective practice
Community orientated psychiatry
Responses

• There is gradual reform in mental health care
  • New knowledge about the causes of mental disorders
    • Vulnerability, protective factors, complex interactions
  • New approaches to treatment and recovery
    • Supported decision making by people with lived experience
• An international debate, including people with lived experience and family carers
Challenges and opportunities for psychiatrists

• Vital role for community-oriented mental health professionals in breaking cycles of disadvantage/addressing large-scale global challenges

• Common mental health problems prevent many of the world’s most disadvantaged people from healthy participation in social and economic life
  • Violence, gender, race discrimination, other adversity generate high risk for MH problems
  • MH problems in turn lead to added disadvantage
The challenge of community-oriented practice

• Aim: Strengthen the capacity of communities to respond to people’s mental health needs
  • Improve mental health in communities
  • Reduce the onset of mental health problems
  • Provide treatment and support for people living with mental ill health
    • Early intervention, treatment, support for rehabilitation and recovery
The challenge of community-orientated practice

- **Aim:** Strengthen the capacity of communities to respond to people’s mental health needs

- **Integrate MH awareness and support across sectors**
  - Education and training, awareness raising, family support, urban planning, policy reform, partnerships

- **Mental health professionals with the readiness for**
  - Community engagement
  - Teamwork
  - Systems thinking
Working for the future

• A program of capacity building to strengthen the contribution and availability of psychiatrists in responses to those living in poverty and other adversity

• WPA aims to work with partners to train and support psychiatrists to perform their roles with a special focus on human rights and cultural competencies, and on tackling stigma
Working for the future

• Aim to support psychiatrists to
  • Respond directly to mental health needs in complex situations
  • Train their peers and other clinicians and community-based workers
  • Contribute to the development of new and existing community-based care pathways
Community orientated psychiatrists: Knowledge, skills and attitudes

Role MH professionals: Medical management of the sick

- Broaden to include
- Mental health promotion
- Prevention, Early intervention, Treatment of mental illnesses
- Recovery, rehabilitation
Community orientated psychiatrists: Knowledge, skills and attitudes

Psychiatric training: Hospital and clinically based

• Broaden to include
• Exposure to community-based interventions
• Theoretical base needed to cover expanded role
Community orientated psychiatrists: Knowledge, skills and attitudes

Research: Most studies conducted in middle-high income populations

• Move towards

• Diversification of evidence base
Community orientated psychiatrists: Knowledge, skills and attitudes

System orientation: Siloed mental health sector

- **Advocate for** mental health integrated across sectors, such as:
- Primary health, Education, Vocation, Housing, Human services
Community orientated psychiatrists: Knowledge, skills and attitudes

Culture of mental health profession: Psychiatrists and hospitals at the top

• Engage in participatory approaches
• To incorporate the rights, knowledge, and strengths of people with lived experience of adversity
Conclusions
Community orientated psychiatry: Knowledge, skills and attitudes

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  - Engage in participatory approaches
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- **ADVANCE PSYCHIATRY AND MENTAL HEALTH**
Universal health and mental health coverage

- Psychiatrists can make a fundamental contribution to promoting and supporting universal health coverage (UHC)
- Through engaging primary health workers and communities in mental health work including early intervention
Primary health care and psychiatry

• Integrating mental health in universal health coverage
  • Collaboration with people with lived experience and their family supporters and with local communities
  • Creative engagement with primary health care
  • Early intervention as mental illnesses emerge