Book review

Patel Vikram, Minas Hayy, Cohen Alex, Prince Martin J. (eds.). *Global Mental Health: Principles and Practices*. **Oxford, Oxford University Press, 2014 (512 pages). ISBN 978-0-19-992018-1**

Since the 1980s, the World Health Organization (WHO) and the Pan American Health Organization (PAHO) have promoted the development of mental health systems within a public health approach. Governments, policy makers and civil society have all proposed numerous strategies to make mental health more accessible to the broadest possible sectors of the population, particularly in countries where specialised services are scarce and concentrated in urban areas. However, by the late 1990s, these strategies seemed to have reached an impasse. Models based on volunteers from the community proved to be unsustainable and it appeared that to create public mental health systems without large economic resources and strong political commitment was very difficult. The Global Mental Health (GMH) movement appeared as one response to this impasse. GMH has become popular because it defines an area of research and practice that places a priority on making mental health available worldwide through trying to challenge and change classical paradigms within the provision of services.

This book by Patel, Minas, Cohen & Prince is more than a simple update on this young, yet, rapidly growing process. The editors have managed to place most of the pieces of the puzzle on the table by commissioning reviews of each key aspect. The reader has, at times, the feeling of old wine in new bottles, but this may be unavoidable in a process that is just beginning. The book contains real gems. Chapter 3 clearly outlines the cultural challenges of a future GMH, and specifically includes the complex relationship between culture and social determinants of mental health. The authors ask, not without a certain level of scepticism, if this move will be yet another manifestation of homogenising, capitalist globalisation, or if it will be part of the construction of a new scenario of equity of access and social justice? They, and others in the book, sketch the paradox of GMH: in order to respond to unmet needs on a large scale, policy makers need standardised, evidence based processes. However, the processes are only possible if communities and users are involved through participatory actions that are based on culture, local conceptualisations of mental illness and resilient resources of communities, families and individuals.

The book reviews in-depth data on the prevalence of severe mental disorder and the burden of mental disease (chapters 5–6), social determinants of mental health (chapter 7) and the status of mental health services in the world (chapter 9). These are necessary chapters, and an excellent source of data, mostly around the comparative studies by WHO.

The next group of chapters focus on theoretical considerations. Lund, Stansfeld & De Silva debate, for instance, the inconsistent relationship between poverty and common mental disorder. Data show that the best way to break the cycle of poverty-mental illness-poverty is by providing treatment and rehabilitation for people with mental illness, rather than targeting poverty as a risk factor. Chapters 9 and 10 describe resources in Global Mental Health: the WHO Atlas and the WHO AIMS Projects that provide a macro-level view of services around the world, and the *Human Resources for Health*

Action Framework as Applied to Mental Health on how to scale up human resources. Chapter 11 is one of the little gems in the book, offering ideas on the prevention of adult mental disorders with early childhood interventions that foster emotional and neurocognitive development and resilience. The chapter offers a theoretical framework, data and ideas that might inspire field workers.

The first section of the book ends with a review of evidence based interventions for common mental health disorders according to *mhGAP Best Evidence Reviews* and *Packages of Care* published in the PLOS Medicine Series (Dua, Barbui, Clark, Fleischmann, Poznyak, et al., 2011). As the authors point out, there is strong evidence of the cost benefits of these interventions, but the recommendations are still consensus based and, therefore, data on the most effective, equitable, feasible, acceptable and affordable interventions in different health systems and socio-cultural settings are scarce.

The second section of the book addresses practical aspects within the delivery of care. Chapter 13 on *Mental Health Development policy* reflects the ideal situation in which a government wishes to implement a national mental health policy, allocates funds and is open to advice from international experts. The chapter describes the process in post tsunami Sri Lanka as a model of cooperation between government, international nongovernmental organisations and WHO that managed to downsize large psychiatric hospitals in Colombo and lay the foundations of a decentralised system of community mental health across the country. This chapter could be read jointly with chapter 20 on generating commitment for mental health system development in Belize. The experiences of Sri Lanka and Belize show the need to progress from local pilot experiences to nationwide programmes. This is addressed in Chapter 14 on *Scaling Up services*. The approximately 40 pages of this chapter, with more developments, could have been published as a small book in itself. Step by step, with numerous

diagrams and examples, the authors thrash out, in a clear and didactic way, most of the challenges and decisions that stakeholders must face for scaling up pilot experiences to plans and programmes. A great compilation of good ideas, extremely useful for those working in the field. Finally, four specific cases are addressed: programmes for children and adolescents (chapter 15), programmes targeting specific problems of women (chapter 16), working in emergency and disasters (chapter 17) and working with the challenge of the stigma attached to mental illness (chapter 18). Especially interesting to me personally was chapter 16, in which the authors analyse the challenges of GMH from a gender perspective, including: social determinants, risk factors and special violence (trafficking, genital mutilation, rape etc). The chapter highlights the need to specifically target human rights issues linked to gender discrimination and gender based violence.

These chapters are the core of a section devoted to proposals and programmes, consisting of data and lists of problems and challenges. Perhaps it is precisely in this second section where it is more evident where the GMH movement is: too young to (yet) make recommendations to health planners The volume has an encyclopaedic structure and could become a young classic, as much of the relevance for the authors may be found in the depth and extent to which the topics are covered. The nearly 500 pages have unfortunately been published in very small print and the text sometimes is difficult, if not impossible, to read. Overall, it masterfully manages to collect information and data that are dispersed among multiple sources, and makes a coherent product in which the reader can easily perceive the excellent editing work of Patel, Minas, Cohen & Prince.

There are criticisms that GMH is really just about the globalisation of a western model of psychiatry and the scaling up of the pharmaceutical industry (Fernando, 2014; Mills,

2013). In the end, the reader is clear that this is not the position of this book. The editors make a clear commitment to a global reduction of inequalities and to address the causes of mental health problems. There is a strong focus on human rights, and the book leads the reader to conclude that we need to develop methodologies for local, reality based approaches, with strong cultural, social and political components.

References

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