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My Number: DMH/B/43/2009
Ministry of Health,
385, Ven. Baddegama
Wimalawansa Thero Mawatha,
"SUWASIRIPAYA"
Colombo 10
17th September, 2012

All:

Provincial Health Secretaries,
Provincial Directors of Health Services,
Regional Directors of Health Services,
Directors of Teaching Hospitals,
Medical Superintendents of Hospitals,
Heads of Institutions,

World Mental Health Day 2012

Depression: A Global Crisis

World Mental Health day which falls on 10th October raises awareness on mental health related issues. The Day promotes open discussion of issues related to promotion, prevention, treatment, rehabilitation services, and stigma. This year's theme focuses on "Depression: A Global Crisis".

Depression can affect anyone. According to the World Health Organization, unipolar depressive disorders were ranked as the third leading cause of the global burden of disease in 2004 and will move into the first place by 2030.

World Mental Health Day 2012 aims to encourage you to address depression as a widespread illness that affects individuals, their families and their peers, and to recognize that it is a treatable condition. People should be alert to the early signs of depressive disorder.

It has been identified that many patients suffering from chronic illnesses also suffer from depression (Eg. 50% of diabetic patients are having depression). Therefore please give special attention to the people with chronic illness, as depression is a major cause for suicide among them.

Kindly make arrangements to emphasize the theme with active participation of all relevant stakeholders. More information can be obtained from consultant psychiatrists, focal point medical officers (Mental Health) in your district and from the Directorate of Mental Health, Ministry of Health (mhusrilanka@gmail.com) and also from www.wfmh.org.

In summary;

1. All PDHS/RDHS should supervise the activities/programmes conducted on their respective districts in relation to World Mental Health Day.
2. Consultant psychiatrists, MO/MH focal point, MO/MH and MOH are expected to work together to create awareness among all health staff about this year's WMHD theme.
3. Develop appropriate health messages, leaflets, flyers etc.
4. Organize programmes with relevant target groups; Schools, Sports clubs, Community organizations, civil societies etc.
5. At least one suitable activity should be conducted at the level of the Medical Officers of Health (MOOH).
6. MO (Mental Health)- Focal points are expected to forward a detailed report of the activities conducted by your institution/area to mark the WMHD 2012 by 30th November 2012 to the Director/Mental Health in order to make a consolidate report on this year's WMHD celebrations.



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CALL TO ACTION

World Mental Health Day 2012

One of the annual goals of World Mental Health Day is to encourage and promote informed advocacy and action for the improvement of services to those with mental and behavioral disorders, to promote mental health and wellbeing, and to prevent mental disorders.

Recommendations are stated here as a reminder of the unfinished work of mental health advocates worldwide. WFMH encourages mental health associations, professional associations, consumer and family organizations, and individual citizen advocates to consider how they can incorporate these recommendations into their annual advocacy and policy agendas.

- **Provide Treatment in Primary Care:** The management and treatment of mental disorders in primary care is a fundamental step that would enable the largest number of people to get easier and faster access to services. Many are already seeking help at this level. In order for this model to be successful, however, general health personnel need to be trained in the essential skills of mental health care. Mental health should be included in training curricula, with refresher courses to improve the effectiveness of the management of mental disorders in general health services.
- **Make Psychotropic Medications Available:** Essential psychotropic medications should be provided and made constantly available at all levels of health care. Such medicines often provide the first-line treatment, especially in situations where psychosocial interventions and highly skilled professionals are unavailable.
- **Give Care in the Community:** Community care has a better effect than institutional treatment on the outcome and quality of life of individuals with chronic mental disorders. Shifting patients from mental hospitals to care in the community is also cost-effective and respects human rights. This shift towards community care requires health workers and rehabilitation services to be available at community level, along with the provision of crisis support, protected housing, and sheltered employment.
- **Educate the Public:** Public education and awareness campaigns on mental health should be launched in all countries. Well-planned public awareness and education campaigns can reduce stigma and discrimination, increase the use of mental health services, and bring mental health and physical health care closer to each other.
- **Involve Communities, Families and Consumers:** Communities, families and consumers should be included in the development and decision-making of policies, programs and services. Interventions should take account of age, sex, culture and social conditions, so as to meet the needs of people with mental disorders and their families.
- **Establish National Policies, Programs and Legislation:** Mental health policy, programs and legislation are necessary steps for significant and sustained action. These should be based on current knowledge and human rights considerations. Mental health reforms should be part of the larger health system reforms and health insurance schemes should not discriminate against persons with mental disorders, in order to give wider access to treatment and to reduce burdens of care.

- **Develop Human Resources:** Most developing countries need to increase and improve training of mental health professionals, who will provide specialized care as well as support the primary health care programs. Most developing countries lack an adequate number of such specialists to staff mental health services. Once trained, these professionals should be encouraged to remain in their country in positions that make the best use of their skills.

- **Link with Other Sectors:** Sectors other than health, such as education, labor, welfare, and law, and nongovernmental organizations should be involved in improving the mental health of communities. Nongovernmental organizations should be much more proactive, with better-defined roles, and should be encouraged to give greater support to local initiatives.

- **Monitor Community Mental Health:** The mental health of communities should be monitored by including mental health indicators in health information and reporting systems. The indices should include both the numbers of individuals with mental disorders and the quality of their care, as well as some more general measures of the mental health of communities. Monitoring is necessary to assess the effectiveness of mental health prevention and treatment programs, and it also strengthens arguments for the provision of more resources. New indicators for the mental health of communities are necessary.

Support More Research: More research into biological and psychological aspects of mental health is needed in order to increase the understanding of mental disorders and to develop more effective interventions. Such research should be carried out on a wide international basis to understand variations across communities and to learn more about factors that influence the cause, course, and outcome of mental disorders. Building research capacity in developing countries is an urgent need.

“On an individual, community, and national level, it is time to educate ourselves about depression and support those who are suffering from this mental disorder.”

“This year’s World Mental Health Day provides us with an opportunity to think about the practical things that we can do. Doing nothing is not an option.”

Dr Gabriel Ivbijaro