

Mental health: A call to action

Book review

Desjarlais, R, Eisenberg, L, Good, B & Kleinman, A (1995) **World mental health: Problems and priorities in low-income countries**. New York: Oxford University Press. Pp. vii, 382. ISBN 0-19-509540-5 hbk.

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I begin this review of **World mental health: Problems and priorities in low-income countries** where the book ends, in "A call to action". I do this because this volume is not another academic book on mental health; in its content, its tone and its structure, it is a tool for mobilisation towards better mental health in developing countries. It is not surprising that the authors have launched the book by convening regional conferences and workshops to promote mental health and to facilitate country processes of mental health policy development. This said though, the book is not "unacademic". The authors are exceptional scholars and this volume is by far the most comprehensive collation of academic material in public mental health yet published. It is clear though that the book has been written to be "used" rather than merely read.

While public health (including epidemiology and health economics) has matured over the past two decades and has had an important impact on health policy, public *mental health* has been neglected - together with low priority for mental health problems in service provision. The report pulls together in summary much of what is currently known in public mental health, documenting the global burden of mental health and behavioural problems; addressing the social, political and economic forces that contribute to this problem and makes recommendations to improve well-being. The authors are clear though that this book is by no means the final word, but rather a focus for debate and a rallying point for improved mental health in low-income countries.

The book is the result of a two year collaboration of researchers and advisors from around the globe - the authors themselves are associated with the Department of Social Medicine, Harvard Medical School. This project was clearly a massive venture. In addition to the four authors, there was an advisory team of 32 international experts (from both developed and more developing countries) and some 80 consultants to the project. (The one South African represented was Dr Mamphela Ramphele, now Vice Chancellor of the University of Cape Town). It is not surprising therefore that the book is highly informative, up to date and filled with diverse illustrative examples. The empirical information is wide ranging. For example there are figures on the relative

burden of mental health measured in Disability Adjusted Life Years (DALYs); the global prevalence of a number of disorders; psychiatrist and bed to population ratios in various countries; estimates of the percentage of the health budget which goes on mental health in certain countries; suicide rates by age; rates of alcoholism and drug dependence; numbers of refugees worldwide and their mental health status; rates of mental retardation; rates of violence against women in different countries; presence of dementia amongst the elderly and so on. The book also has “boxes” with stories about real people or projects. Through this the authors ensure that depersonalized facts and figures come alive. One such story is about a 12 year old in New Crossroads in Cape Town dealing with a violent society. Another is about a group of women in Mexico City who mobilised against women abuse. It is worth noting that there are close to 800 articles, books or reports referenced. Both the book and the references are thus highly useful resources for anyone needing public mental health data and/or analysis.

The fact that this book is a collaborative effort across medicine and the social sciences is evident throughout. The authors comment that their approach is to avoid both the “brainless” social psychiatry of the 1950s as well as “mindless” biological psychiatry. While a large proportion of the book is used to locate mental health problems within social, economic and political contexts, simple causal explanations are avoided. The authors refer to “clusters” of problems which interact and intensify each other’s effects on behaviour and well-being. The clusters are Social pathologies (Substance abuse, Violence, Abuses on women, Child abuse), Health problems (Heart disease, Depression, Stress-related conditions, Behaviours contributing to chronic illness), and Exacerbating conditions (High unemployment, Poverty, Limited education, Stressful work conditions, Gender discrimination). This framework is carried through the book and the reader is constantly reminded of the highly complex nature of well-being and illness. It is acknowledged that mental health workers cannot be responsible for addressing all the elements impacting on mental health, however the authors argue that the connection between public health and social context must be acknowledged and studied, and may act as a base for guiding interventions. The importance of mental health workers co-operating intersectorally is also stressed.

Though the authors are Harvard based , they exhibit strong empathy with the mental health problems of the developing world and for a problem which gets at “what is most at stake in being human”. The role of culture in the development, course and prognosis of illness as well as the importance of culturally appropriate interventions is never lost. In the “story boxes” cultural diversity is particularly clear. The need for more ethnographic research so that interventions can be based on local problems, perspectives, social realities and resources and the local assessment of technologies and treatments is recommended. So too is the inclusion of traditional helpers and methods. The strong anthropological background of the authors is not co-incidental.

In addition to an introduction and a final call to action the book has twelve chapters. These cover the context of well-being; a range of mental health and behavioural problems including psychiatric illnesses, suicide and substance abuse; more serious social phenomena impacting on mental health (violence and dislocation); and some of the problems of special populations (women, children and the elderly). The final two chapters look at what can be done in practical and research terms. In 300 pages it is not possible to do full justice to so many issues, yet I believe that the book has

succeeded in bringing together the most important public mental health issues and creating both an impetus for further study and a framework in which this can be done.

The book should become standard for students studying to become psychologists, psychiatric nurses or psychiatrists. Up to this point there has been very little teaching in public mental health in South African universities and colleges. This may in part have been because there was no text or adequate framework - this rationale can no longer be used. Whether the book should be used at under or post-graduate level will, I think, depend on how much public health has been previously taught. Given that at present for most post-graduates the field and the information in the book would be relatively new, I would have no hesitation in building a course around this text - while introducing more South African and more in-depth examples. There is no reason however why this book could not be used in the later under-graduate years. For researchers in diverse areas, this book is an excellent start. For example if one is researching women and mental health, information can be found on prevalence of disorder, social origins of distress, hunger, work, sexual and reproductive violence, domestic violence, women and development and recommendations of what could be done. While this information may prove superficial, the book will point you to over 80 references.

So what are the faults of the report? The book is written for anyone "from ministers of health to officials of nongovernmental organisations to participants in international policy discussions and to citizens broadly". I have questions around whether the book should not have been more focused, with possibly summary reports for targeted groups or people such as Health Ministers or citizens with little mental health background. Perhaps I am unfair in thinking that health ministers in developing countries are unlikely to read a book of this magnitude or that it would be an unusual Jane Citizen who would make the effort, but this is certainly my suspicion. As a result of the broad target audience some professionals may find aspects of the book trite or frustrating. For example the authors write "a seizure (fit) ..." or "the schizophrenias are a group of severe mental disorders that first appear in late adolescence or early adulthood". It would indeed be a pity if professionals did consider the book to have been written for a more lay audience. For the most part it is highly relevant and (at times) challenging.

In a book covering so many issues, there are bound to be gaps. For example at the Southern African launch of the book, it was pointed out that the issue of "language and translation" is never mentioned. From a South African perspective the book may also stand accused of not having enough South African information or examples.

Finally, the authors could have used the opportunity in writing a book on priorities and problems in low-income countries to "empower" researchers by having co-authors from developing countries. (Empowerment aside, if well chosen, researchers from developing countries could only have added to the book). It is fact that researchers in universities such as Harvard have many more resources and much broader scope to carry out research and to write books than their counterparts in developing countries. Given this, and the subject of this book, it would have been appropriate to have had not only advisors and consultants from low-income countries but equal co-authors as well. While my sense from reading the book is that the authors are genuine and sincere in their endeavours to promote mental health in developing countries, and their efforts to help policy development through the use of this book add to this belief, writing with co-authors from low-income countries may have put to rest any suspicion, by perhaps

oversensitive critics, that personal careers may have been as much at stake in writing this book as promoting mental health in developing countries.

In summary **World mental health: Problems and priorities in low-income countries** deserves much praise. The initiative, the content and the call to action must be commended. It is now up to us in developing countries to develop plans of action and policies which will promote well-being!