The World Health Organization (WHO) defines health as, “a complete state of physical, mental, and social well-being; not merely the absence of disease or infirmity.” Mental health is, therefore fundamental to total health and wellbeing. There is no health without mental health...!

Health is a right to be enjoyed by all regardless of creed, nationality, economic status or diagnosis. In the early 21st century most mental disorders are diagnosable and treatable. Yet more than 500 million people around the world suffering from mental disorders are still being challenged by shame, stigma and discrimination; by lack of access to care; by inadequate resources allocation commensurate with the burden of diseases represented by mental disorders; by the lack of primary prevention; by fragmentation of care and the lack of integration in treatment; and by policy decisions that regrettably perpetuate this violation of human rights.

The United Nations General Assembly High-Level Meeting on Non-communicable Diseases (19-20 September 2011) raised the expectation that health had reached, at long last, one of the highest levels of policy decision-making. Non-communicable diseases, in aggregate, represent the highest burden of disease, and strain health systems and countries’ economies. They include cardiovascular disease, cancer, chronic obstructive pulmonary disorders and diabetes. However the UN session disappointed by omitting mental health from its ambitious agenda. This exclusion was incredible – mental disorders are among the most prevalent non-communicable diseases, affecting more than 500 million people worldwide, with a global burden of disease of approximately 14% and a global burden of disability of 30-45%.

A robust advocacy campaign for the inclusion of mental disorders on a par with other non-communicable diseases, involving print and electronic media as well as direct appeals to the Executive Committee and General Assembly of the World Health Organization resulted in the WHO General Assembly Resolution (May 2012) that included mental disorders along with other non-communicable diseases, with a recommendation for a global mental health action plan. That plan became a reality in 2013, when the WHO launched its Global Mental Health Action Plan 2013-2020, including the collaboration and integration of mental health and primary care.

By virtue of mental disorders being diagnosable and treatable, we have now the ability to return people to productive lives and positive relationships in the majority of cases. The main barriers to successful treatment – lack of access to care, shame, stigma, and discrimination – prevent individuals in all countries from seeking treatment on a timely basis, particularly in low- and middle- income countries.

Mental illnesses often co-occur with other non-communicable diseases such as diabetes and cardiovascular disorders. Ideally, the treatment of comorbid conditions should be well coordinated and integrated. Existing health systems’ fragmentation, along with lack of integration, makes current health systems unsustainable. Enhancing primary and secondary prevention (including access to care and care integration) must be one of the highest priorities for 21st Century health systems. This priority is essential for diminishing the global burdens of disease and disability and their economic consequences for all nations.
The response to these challenges must begin with a paradigm shift in 21st Century health systems – from 19th/20th Century hospital-specialty based models to collaborative-integrative team models, across disciplines, working together, well-connected through information and communication technology, and in a shared location. Primary care, mental health, and public health integration is an essential dimension of the paradigm shift that will enhance access, quality, and affordability, and reduce shame, stigma and discrimination.

*Achieving total health for all in the 21st Century* requires adopting this paradigm shift with these key components:

- Education for health and wellbeing and the integration of health, nutrition, and fitness across generations and systems (families, educational systems, workplaces, and health systems)
- A public health, primary prevention, health, and wellbeing strategy, focusing on health promotion, health protection, and illness prevention across the lifecycle, with a robust beginning in the perinatal phase of life
- Primary care, mental health, and public health collaboration/integration
- A global health policy of parity, non-discrimination, and dignity for all

The World Psychiatric Association addressed these issues at its Bucharest meeting on 24-27 June 2015 and issued a Statement on Collaborative and Integrated Care urging that:

“United Nations member states adopt collaborative and integrated care as a means toward *achieving total health for all in the 21st Century*, and be it further resolved that

This goal be included in the updated United Nations Sustainable Development Goals; and be it further resolved that,

United Nations member states allocate the necessary human, financial, and technological resources for training, education and implementation of this resolution.”

References

2. WPA (2015) Bucharest Statement on Collaborative and Integrated Care

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