BACKGROUND

Mental health is an integral part of health and health and social services provision, but has received inadequate attention by policy makers and also by society in general. Mental disorders impose an enormous disease burden and an increasing obstacle to development in countries around the world. Studies estimate that at least 10% of the world’s population is affected and that 20% of children and adolescents suffer from some form of mental disorders. In fact, mental disorders accounts for 30% of non-fatal disease burden worldwide and 10% of overall disease burden, including death and disability. Worsened by low levels of investment and effective treatment coverage, mental disorders also have serious economic consequences and may limit the effectiveness or potential impact of development assistance. Not only does mental health represent a significant disease burden, it is also very costly to country economies. In 2010, the global cost of mental disorders was estimated to be approximately US$2.5 trillion; by 2030, that figure is projected to go up by 240%, to US$6.0 trillion. In 2010, 54% of that burden was borne by low- and middle-income countries (LMICs); by 2030, that is projected to reach 58%. The overwhelming majority — roughly two-thirds — of those costs indirect costs of mental health – the economic consequences attributable to disease, disorders, or injury resulting in lost resources, but which do not involve direct payments related to the disease. This includes the value of lost production due to unemployment, absences from work, presentism (the loss in productivity that occurs when employees come to work even when unwell and consequently function at less than full capacity) or premature mortality. There is also significant evidence showing that social conditions associated with poverty create stress and trigger mental disorders, and that the labor insecurity and the health care costs associated with mental disorders in turn move many into poverty. This circular relationship between mental disorders and poverty creates a cycle that leads to ever-rising rates for both. Several recent studies in high-income countries have found that the total costs associated with mental disorders total between 2.3% and 4.4% of GDP. The proportion of total public health expenditure allocated to mental health care is often very small. For example, mental disorders is responsible for 23% of England’s total burden of disease, but receives 13% of National Health Service health expenditures. A recent WHO survey indicates that most low- and middle-income countries spend less than US$2 per person on the treatment and prevention of mental illness, a figure not remotely proportionate to the public health and economic burden these illnesses cause. On average, low-income countries assign only 0.5% of their health budget to mental health.

Most countries are ill-equipped to deal with this “invisible” and often-ignored challenge – which is amplified by the growing conflict and the refugee crisis in the Middle East and other parts of the world. Communities living in these contexts require a range of psychosocial support. Addressing mental health needs is critical in times of crises, and recovery, in addition to sustainable development. Despite its enormous social burden, mental disorders continue to be driven into the shadows by stigma, prejudice, fear of disclosing an affliction because a job may be lost, social standing ruined, or simply because health and social support services are not available or are out of reach for the afflicted and their families. A vast majority of low and middle income countries allocate less than 1% of their health budgets for mental health.
In spite of these challenges, there is a growing impatience across the world to begin a new era in which mental health moves from the periphery to the center of the global health agenda and into the larger development context. There are evidence-based, inter-sectoral strategies and interventions to promote, protect and restore mental health. Properly implemented, these interventions represent “best buys” for any society, with significant returns in terms of health and economic gains. The burden of depression, anxiety and other mental disorders calls for a concerted, multisectoral response that not only raises public awareness and political commitment about this often overlooked and stigmatized issue, but also puts in place an array of treatment and prevention strategies capable of reducing the large, and growing, human, social and economic losses attributable to them.

In order to fully embrace and support the progressive realization of universal health coverage, it is critical to ensure that prevention, treatment and care services for mental disorders at the community level, along with psychosocial support mechanisms, are integral parts of accessible service delivery platforms and covered under financial protection arrangements. Additionally, there is need to advocate for and identify “entry points” across sectors to help tackle the social and economic factors that contribute to the onset and perpetuation of mental disorders.

At the 2016 Spring Meetings, the World Bank Group (WBG) and the World Health Organization (WHO) will co-host a high-level event to bring mental health from the periphery to the center of the global development agenda. While the overall topic is mental health, the focus of the event is on common mental disorders (depression, anxiety disorders) due to their high prevalence and burden as well as availability of cost-effective interventions that can be mainstreamed into health care systems and across other sectors.

OBJECTIVES

- To increase awareness and to mobilize a global, multisectoral coalition for the need to scale up mental health services in primary care and community settings, as a key issue in the global health and development agenda.
- To engage finance ministers, multilateral and bilateral organizations, the business community, technology innovators, and civil society on the economic and social benefits of investing in mental health and psychosocial support, and identifying cost-effective, affordable and feasible interventions, including their integration into primary care and community settings as part of the progressive realization of universal health coverage, in addition to the expected returns on investment in terms of health, social and economic benefits.
- To identify entry points for renewed action and investment at the country, regional and global levels, including consideration of innovative mechanisms for enhanced financial and social protection, as well as expanded service access, through the health and other sectors.
FORMAT

This will be a two-day, Davos-style, high level event featuring technical discussions which will be kicked off with an Innovations Fair to showcase effective, generalizable, replicable and sustainable innovative approaches not only for improving access to care, but also designing/introducing altogether new interventions. The fair will be followed by high level keynote panel featuring President Kim, WHO Director General Margaret Chan, and other global leaders and influencers. Panelists will include a mix of mental experts and advocates, ministers of finance and health, civil society representatives and development partners (initial list of proposed speakers below). In addition there will be an end of the day reception/popular event hosted by the US Executive Director for the WBG with champions/ambassadors; film; music; representatives of adolescent, youth, and elderly groups; as well as a wide range of others who represent all the relevant organizations. A 7 minutes 3-D documentary on the global faces of mental health is expected to be premier during this event.

The second day will concentrate on high level global panels focusing on challenges, innovations for service delivery at the community level covering priority population groups, including displaced populations and refugees, women and children, and the youth, multisectoral entry points to deal with this development issue (e.g., human rights, education, social protection and jobs, fragility, conflict and violence, disability-inclusive development, workplace), leveraging technologies, civil society participation, and innovative financing mechanisms.

AUDIENCE

The meeting aims to move mental health from the margins to the mainstream of the global development agenda by raising its profile before ministers of finance, ministers of health, other high level government officials, international development aid agencies, foundations and private sector partners, and civil society.
PROVISIONAL AGENDA*

*Agenda and speakers subject to final approval/confirmation. Please note that we may also need to limit the number of panels and speakers for each session.

Wednesday, April 13, 2016

9:00am-3:30pm  (Venue: Milken Institute School of Public Health, George Washington University, 950 New Hampshire Avenue, N.W. Washington, D.C.)

Registration for Event

Innovations Fair and Welcome Refreshments (public showcase of innovative services delivery and intersectoral interventions at the community level from across around the world, including VIP sessions with regional delegations)

Welcome Remarks: Dean Lynn Goldman, Milken Institute School of Public Health, The George Washington University, Dr Shekhar Saxena, WHO, Prof. Vikram Patel, London School of Hygiene and Tropical Medicine and Representative from Welcome Trust/GCC.

(Organized by Mental Health Innovation Network (MHIN) and supported by Wellcome Trust with contribution from Grand Challenges Canada, US National Institute of Mental Health.

4:00-5:30pm  (Venue: Preston Auditorium, World Bank Main Complex, Washington, D.C.)

*TBC 5-7 min clip from a 3-D documentary on the faces of global mental health by Cori Stern and Zoe Adams


KEYNOTE PANEL: Making Mental Health a Global Development Priority

Jim Yong Kim, President, World Bank Group
Margaret Chan, Director-General, World Health Organization
Arthur Kleinman, Harvard University
Justin Trudeau, Prime Minister, Canada (TBC)
Alan Bollard, Executive Director, Asia-Pacific Economic Cooperation (APEC, with includes 21 member-countries, including the largest economies in the world) & Former Governor of the Reserve Bank of New Zealand and Secretary to the Treasury
Ms. Jen Hyatt, Founder and CEO, Big White Wall
Mr. Mauricio Cardenas, Minister of Finance of Colombia (TBC)

Moderator:  TBC several prominent journalists are being considered
Rapporteur: Takashi Izutsu, School of Public Health, University of Tokyo
6:00-8:30 pm  (Venue: Jim Wolfensohn Atrium, World Bank Main Complex, Washington D.C.)

Reception
Hosted by Matthew McGuire, US Government Executive Director to the WBG.

Guests of Honor: Ms. Deepika Padukone, one of the most popular Indian film actress who has established a career in Hindi films. Also, she is an advocate about issues such as depression and anxiety disorders and the founder of Live, Love, Laugh Foundation.


Testimony: The Voices of the Youth: Jack.org

Thursday, April 14, 2016

(Venue: Milken Institute School of Public Health, George Washington University, 950 New Hampshire Avenue, N.W. Washington, D.C.)

8:30-9:00am  Registration (Note: Following the Plenary Panel, some subsequent panels will be conducted concurrently, TB developed)


PLENARY PANEL DISCUSSION: Mental Health in Global Development Agenda: Challenges

Lawrence O. Gostin, University Professor, O’Neill Chair in Global Health Law, Georgetown University: mental health in the global health/development context

Dean Jamison, University of Washington, Editor, Disease Control Priorities (DCP) Series: Key messages of DCP 3 Volume on Global Mental Health

Vikram Patel, co-founder, Sangath and co-director of the Centre for Global Mental Health at the London School of Hygiene & Tropical Medicine

Christopher Stone, President of Open Society Foundation. Stigma and Discrimination.

Shekhar Saxena, Director, Mental Health and Substance Abuse Dep., WHO: The communicable disease/NCD/mental health link.

Shenaaz El-halabi, Permanent Secretary of MOH of Botswana, and Chair of the Commonwealth Advisory Committee on Health (CACH). Mental Health Services at the Commonwealth Countries.

Francesca Colombo, Head, OECD Health Division, Mental Health in the OECD Member Countries: issues and options

Moderator: John Prideaux, The Economist

Rapporteur: Daniel Vigo, Harvard University
*PANEL DISCUSSION: Innovations in Mental Health Promotion, Protection and Care

Ministers of Health of Ethiopia, Peru, South Africa, Armenia. Scaling up Mental Health at the Community Level.
Yohei Sasakawa, Chairman, Nippon Foundation, WHO Ambassador for Leprosy Elimination. Integrated Leprosy and Mental Health Services
Eliot Sorel. Senior Scholar in the Office of Clinical Practice Innovations, Clinical Professor, Department of Global Health, Health Policy & Management, and Department of Psychiatry & Behavioral Sciences, George Washington University. Integrating Mental Health Services at the Community Level.
Bold innovations with Big Impact: TBD one or more of the innovators from the Fair either present their own work or provide a reaction / overview of the range of innovations represented at it.

Moderator: Peter Singer, CEO Grand Challenges Canada
Rapporteur: Margarita Puerto Gomez, World Bank Group

*PANEL DISCUSSION: Multi-sectoral innovations

Rodrigo Guerrero, Mayor of Cali, Colombia: Violence, Mental Health, and Social Resilience
Kathryn Goetzke, Founder and Interim Executive Director, IFred. Schools for Hope.
Elizabeth Hoff, WHO Representative in Syria. Mental Health and Social Support Services for Displaced Populations.
Janice Cooper, Carter Center. Post-Ebola Mental Health Initiative in Liberia.
Dr. Y Kim, Director, Japan National Institute of Mental Health. Mental Health and Psychosocial Support in Natural Disaster Emergency Settings:
Akiko Ito, Head, Secretariat of the UN Convention of People with Disabilities. Mental Health and the Disability-Inclusive Development Agenda.
Jodi Butts, RISE Asset Development (Canada). Supporting business growth, investing in people, improving the lives of people who are unable to secure employment due to mental health or addictions challenges.

Moderator: Judith Rodin, President, Rockefeller Foundation
Rapporteur: Alys M. Willman/Natalia Tejada, World Bank Group
*PANEL DISCUSSION: The Science of Implementation: Measuring Results for Scaling Up Care
Tim Kendall, Director, Director, UK National Collaborating Centre for Mental Health, Royal College of Psychiatrists: Improving mental health and social care through evidence-based guidance: pathways, standards, indicators.
Wu Jing, Professor, Mental health service gap in China. Evidence from recent national survey, NCD Control and Community Health, China CDC
Soumya Swaminathan, Secretary to the Gov. of India/Director-General, Indian Council of Medical Research
Alain Beaudet, President of Canadian Institutes of Health Research (CIHR) and Chair of Global Alliance for Chronic Diseases (GACD). GACD call on research on depression.

Moderator: Pamela Collins, Director, Office for Research on Disparities & Global Mental Health/ Director, Office of Rural Mental Health Research, US National Institute of Mental Health/NIH
Rapporteur: Dévora Kestel, PAHO/WHO

*PANEL DISCUSSION: Wellness and Mental Health in the Workplace
Arnaud Bernaert, World Economic Forum
Norito Kawakami, Head, School of Public Health, University of Tokyo. Positive Mental Health Promotion: the experience from Japan.
Derek Yach, Vitality Health. Integrated wellness program designed to engage employees on personal pathway to better health.
Paul Litchfield, British Telecom, Chief Medical Officer / Director Wellbeing, Inclusion, Safety & Health, and Chair of the What Works Centre for Wellbeing
Brian Devey, Director, WBG Health Services Department on shifting from a traditional response oriented Occupational Health Unit to a more proactive Population Health Management model, incorporating structured and incentivized health risk identification and management.
Bill Wilkerson, Target, Impact of Depression in the Workplace

Moderator: Phillip Campbell, Editor in Chief of Nature
Rapporteur: Beverly Pringle, US National Institute of Mental Health
*PANEL DISCUSSION: Leveraging new Technologies for Improving Access to Care and Designing New Interventions (to be developed in coordination with Kathyn Goetzke of iFred).

Niraj Singh, Executive VP, International Public Sector, Vodafone Global Enterprise Representative of Verily (Alphabet’s former Google Life Sciences group) TBC

Anmol Madan, CEO, Founder of Ginger.io

A, Krishnakumar, Leader Emerging Businesses, Royal Philipps.

Indrajit Banerjee, Director, Knowledge Societies Division, Communication and Information Sector, UNESCO: ICTs role in advancing the global mental health agenda.

David Soloff, CEO, Premise. E-dashboards for monitoring the infrastructure and availability of critical mental health systems as a tool for smooth deployment and adaptation of policy

Thomas Lethenborg, Monsenso. How IT can help individuals and health care providers handle mental disorders in the most efficient, engaging and convenient way?

Telefonica Spain TBC

Moderator: Ambassador Luis Gallegos, Ecuador, and Chair of the Board of Directors of G3ICT, a Global Partnership for Inclusive Information and Communication Technology, and Nippon Foundation Advisor.

Rapporteur: Joshua Chauvin, University of Oxford
*PANEL DISCUSSION: The Voice of Civil Society in advancing the Mental Health agenda*


Eric Windeler, Founder & Executive Director, Jack.org: Fighting stigma in Canada: National network of young leaders transforming the way we think about mental health

Kaz de Jong, Médecins Sans Frontières (MSF). Humanitarian responses to mental trauma in conflict affected societies—from the Balkans to Sierra Leone.

Jagannath Lamichhane. Movement for Global Mental Health, Nepal

Chris Underhill, Founder President Basic Needs, Senior Ashoka Fellow | Skoll Foundation Social Entrepreneur | Schwab Foundation Social Entrepreneur: The Collective Action Model: Increased Social Entrepreneurship in Global Mental Health (being developed with the support of the Global Development Incubator).

Sean Mayberry, Founder & Executive Director, StrongMindsDealing with Mental Health Challenges in Africa.

Inka Weissbecker, #NGOs4MentalHealth campaign, Call to Action “Mental Health for Sustainable Development: The Role of iNGOs.

Moderator: Christine Sow, Executive Director, Global Health Council

Rapporteur: Alison Brunier, WHO
*PANEL DISCUSSION: Integrating Mental Health within the Financing for Development Agenda*

Perspectives from World Bank Group/IMF/African Union Commission/European Commision
Jeremias Paul, Under Secretary of Finance of the Philippines (the architect of the six tax policy reform for UHC). How to Expand Fiscal Space for Essential Services? The Philippines Sin Tax (tobacco and alcohol taxation) Reform
Juan Pablo Uribe, Director General, Foundation Santa Fe, Bogota, Colombia. Mental Health and the progressive realization of UHC in Colombia.
Nat Otoo, CEO, Ghana National Health Insurance Authority. Mental Health and the progressive realization of UHC in Ghana.
Jeanette Vega, CEO, Chile National Health Insurance Fund. Mental Health and the progressive realization of UHC in Chile.
Ryotaro Oda, JICA
Jodi Butts, RISE Asset Development.

Moderator: Amanda Glassman, Center for Global Development
Rapporteur: Dan Chisholm, WHO

5:00-7:00pm Closing of the Event:
Key Messages from the Panels: Shekhar Saxena, WHO
The Way Forward: Perspectives from Timothy Evans, WBG, Prof. Arthur Kleinman on behalf of the organizing group. Richard Horton, Editor, The Lancet
Moderator: Maureen M. Goodenow, Senior Advisor and Acting Director Office of Research and Science, Office of the U.S. Global AIDS Coordinator and Health Diplomacy
U.S. Department of State

Closing Reception (Hosted by Canada-TBC)
(Venue: Milken Institute School of Public Health, George Washington University, 950 New Hampshire Avenue, N.W. Washington, D.C.)
Accompanying events

Friday, April 15
(Venue: Milken Institute School of Public Health, George Washington University, 950 New Hampshire Avenue, N.W. Washington, D.C.)

9:00am-6:00pm  Grand Challenges Canada and NIMH co-host the annual meeting in global mental health (agenda being prepared)

Sunday April 17
(Venue: Georgetown University)

Global Mental Health: Transdisciplinary Perspectives
8 AM-6 PM
Supported by the Global Futures Initiative and the Graduate School at Georgetown University (Venue TBC)

ORGANIZING COMMITTEE/LIST OF PARTNERS

The event is convened by World Bank Group and World Health Organization

ORGANIZING COMMITTEE

WBG: GP Lead – Patricio Marquez, Lead Public Health Specialist, HNP GP, Tim Evans, SD, HNP GP

WHO Lead: Shekhar Saxena, and Dan Chisholm, Department of Mental Health and Substance Abuse, World Health Organization;

Chair of the Working Group: Professor Arthur Kleinman, Harvard University

Wellcome Trust Mental Health Innovation Network and Grand Challenges Canada responsible for the Innovation Fair.

Matt McGuire the US Executive Director to the World Bank Group to host a reception at an evening during the event.

Members of International Working Group and Advisory Group

WBG Lead GP: HNP GP

WBG Partner GPs: FCV CCSA, Social, Urban, Rural and Resilience GP; EDU GP, Social Protection and Labor GP, and WBG Health Services Department


WBG Core Technical Team: Alys M. Willman, FCV CCSA, Charlotte Vuyiswa McClain-Nhlapo, Global Lead for Disability, SURD GP, Ana Maria Espinosa, HSD, Core WBG Technical Team: Sheila Dutta, Jaime Nicolas Bayona Garcia, Ishani Premaratne NP GP; Natalia Tejada, FCV CCSA; Deepa Samant Raja, Joel Reyes, Education GP.

Comms Team – Carolyn Reynolds, Anugraha Palan, Lysette Cohen, Kitchie Hermoso, Ramatoulaye George-Allyne, WBG; and Alison Ruth Brunier, Laura Lozano Montes, Sarah Russell, WHO.

Overall Logistics – Akosua Dakwa, ACS Support Team, Juliet Teodosio.