Global Mental Health Challenges Facing China and the World

世界与中国面对的精神卫生挑战

Arthur Kleinman, M.D.

Rabb Professor of Anthropology, Harvard University and Professor of Medical Anthropology and Psychiatry, Harvard Medical School;
Fung Director, Harvard Asia Center

May 8th, 2012

Harvard China Fund Annual Symposium

“The Current Situation of Health in China”

Harvard Center, Shanghai, China
The Global Burden of Mental Disorders
精神障碍的全球负担

- 10% of adults suffer from a mental disorder.
- Up to 30% of primary care attenders have a mental disorder.
- Depression/Anxiety disorders and Substance abuse are most common.
- Between 0.5 and 2% of all adults suffer from a chronic, severe mental disorder.
- About 1 in 10 children suffer from a childhood mental disorder.
Suicide
自杀

- It is claimed that 90% of those who commit suicide have a diagnosed mental illness, most often major depressive disorder. This claim is based on only four valid studies. But even if the number is lower it is probably still quite significant (60 – 70 %).
Help seeking by the mentally ill
精神疾病患者寻求帮助的状况

- Many do not seek anyone due to stigma, lack of awareness and lack of services.
- Families bear the brunt of the untreated morbidity and disability.
- Families do not always cope and care in the home is not always guaranteed.
- Formal Health Care Seeking:
  - For most mental disorders: primary care
  - For severe mental disorders: specialist care
Treatment

治 疗

- In Primary Care:
  - Most diagnoses are undetected
  - Commonest treatments are symptomatic, e.g. hypnotics, vitamins/tonics, analgesics
  - There are no psychosocial treatments
  - “>80% prescriptions are of doubtful value”
    (Linden et al, 1999)

- In Specialist Care:
  - Chronicity, lack of community care frequently occurs
  - There are gross human rights violations
Cost-effectiveness (cost per DALY averted)
成本效益（以每伤残调整生命年计）

- Schizophrenia: Older anti-psychotic drug + psychosocial
- Bipolar disorder: Mood stabiliser drug + psychosocial
- Depression: Older anti-depressants + proactive care
- Panic disorder: Older anti-depressants + psychosocial
- Epilepsy: Older anti-epileptic drugs
Burden vs. Budget

负担 vs. 预算

Project Atlas, WHO 2001
Number of Psychiatrists per 100,000 Population

Project Atlas, WHO 2001
Pharmaceutical Paradox
药品需求和提供的错位

- In global perspective, appropriate pharmacological agents for the treatment of mental illness remain in short supply and are rarely used.

- In urban areas, even in poor countries, there is a rapid swing to over-diagnosis of conditions, as well as an over-utilization and mis-utilization of agents.
Global mental health and stigma: 全球精神卫生与社会偏见
An argument 辩论

- Status of the mentally ill globally
  - Stigmatization of individuals.
  - Marginalization in familial and social networks and consequent loss of human rights. There is increasingly a burden socially and financially incurred in caring for and supporting an individual suffering from mental illness.
  - A complete lack of mental health intervention in many countries leaves families unprepared to care for the mentally ill and increases stigma.
What do physicians have to do with stigma?

医生该如何应对这种偏见？

- Stigma is not uncommon in medical institutions and stigmatizing assumptions are common in patient care.
- In a study of patients with schizophrenia in Hong Kong, 54% of the patients reported being stigmatized during their clinic visits.
- The same study shows that decisions by senior psychiatrists to use decades-old antipsychotic medications for the treatment of schizophrenia, jeopardized patients’ ability to manage identity, maintain family relationships, and sustain work performance.

- Lee et al. (2006) Stigmatizing experience and structural discrimination associated with the treatment of schizophrenia in Hong Kong in *Social Science and Medicine* 62 1685-96
- Pearson (1995) Goods on which one loses: Women and mental health in China in *Social Science and Medicine* 41 1159-1173
Mental Health in USA
美国的精神卫生

- Prevalence of depression (2005-08): 6.8%
- Prevalence of anxiety disorder (2008): 12.3%
- Prevalence of bipolar disorder (2007): 1.7%
- Prevalence of schizophrenia (2007): 0.6%
Mental Health Care in USA

- 1/3rd of all visits to primary care are for mental health problems.
- 1/3rd of the homeless suffer from a mental health problem.
- 2/3rds of nursing home residents > 65 years are diagnosed with mental illness.
- The criminal justice system (jails) is the de facto mental health system for the poor with chronic mental illness.
The impact of mental disorders
精神障碍的影响

- Mental conditions account for 30 percent of all years lived with disability.

- Depression causes the largest amount of disability (12 percent).

- Six mental conditions are in top 20 list of causes of disability.
Recent developments in mental health in China

中国精神卫生发展的新动态

- Era of intensive globalization and commercialism (1990s – early 2000s)
- Increased mental and social health problems
  - Anxiety disorders
  - Depression
  - Suicide
  - Substance abuse
  - STD rates
Prevalence, treatment, and associated disability of mental disorders in four provinces in China during 2001-05: an epidemiological survey

2001-05年中国四省精神障碍患病、治疗、及相关失能的流行病学调查


<table>
<thead>
<tr>
<th>Overall Mental Disorder</th>
<th>Mood Disorders</th>
<th>Anxiety Disorders</th>
<th>Substance Abuse Disorders</th>
<th>Psychotic Disorders</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall Mental Disorder</td>
<td>17.5%</td>
<td>6.1%</td>
<td>5.6%</td>
<td>5.9%</td>
</tr>
</tbody>
</table>

Harvard Anthropology
Additional Findings
其他发现

- Among individuals with a diagnosable mental illness:
- 24% were moderately or severely disabled by their illness.
- 8% had ever sought professional help.
- 5% had ever seen a mental help professional.
Major Conclusion
(from Phillips et al. 2009)

- Projection of results to all of China suggests that 173 million adults in the country have a mental disorder and 158 million of these have never received any type of professional help for their condition.
Challenges to scaling up mental health services in China I
Phillips et al. (2009)
在中国发展精神卫生服务的挑战 I

- Available services concentrated in urban psychiatric hospitals.
- Present economic incentives encourage psychiatric hospitals to maintain high occupancy.
- General physicians and primary-care health workers have little to no training in mental health and basic psychiatric services.
- Absence of knowledge about mental illness and negative attitudes about the mentally ill prevent many sufferers from seeking needed care.
- The traditional mental health-care system (focused on psychotic disorders) is not equipped to deal with depression and other psychological problems.
Challenges to scaling up mental health services in China II
Phillips et al. (2009)
在中国发展精神卫生服务的挑战 II

- Absence of adequate training programs for psychologists, social workers and therapists makes multidisciplinary approaches to individual care difficult, while for psychiatrists, standards vary greatly.
- Difficulty of coordination of activities and funding for relevant ministries and agencies undermines attempts to promote monitoring activities and clinical services.
- The quality of epidemiological and clinical research in mental health is poor resulting in lack of availability of information to policy makers.
- Despite 20 years of effort, there is still no national mental health law.