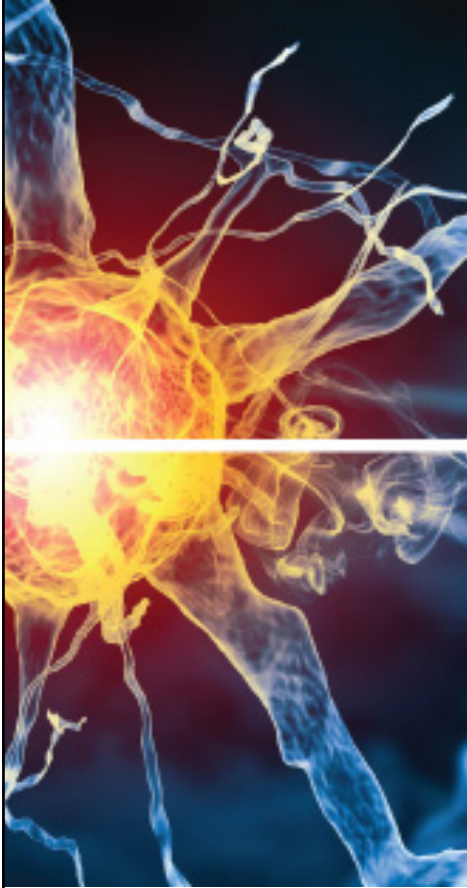


# The Burden of Depression and Its Treatment in Global Mental Health



# **Milton L. Wainberg, MD**

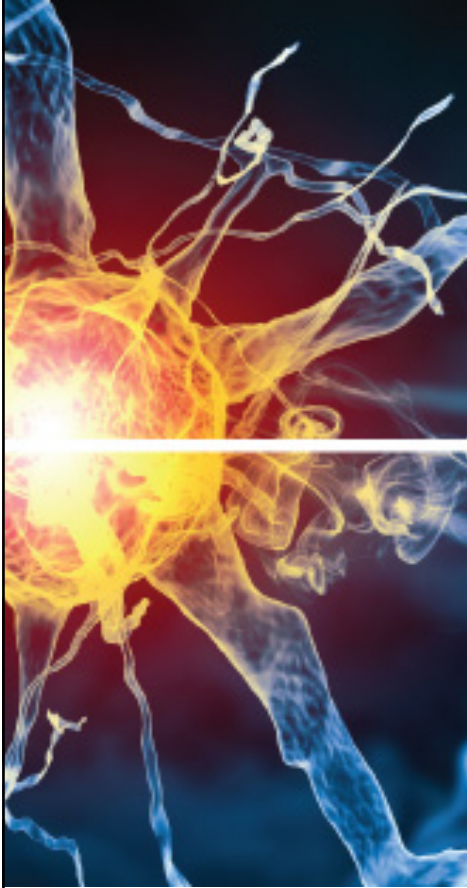
Professor of Clinical Psychiatry  
Columbia University  
Director, Global Mental Health Research  
New York Psychiatric Institute  
New York, NY



# Milton L. Wainberg, MD

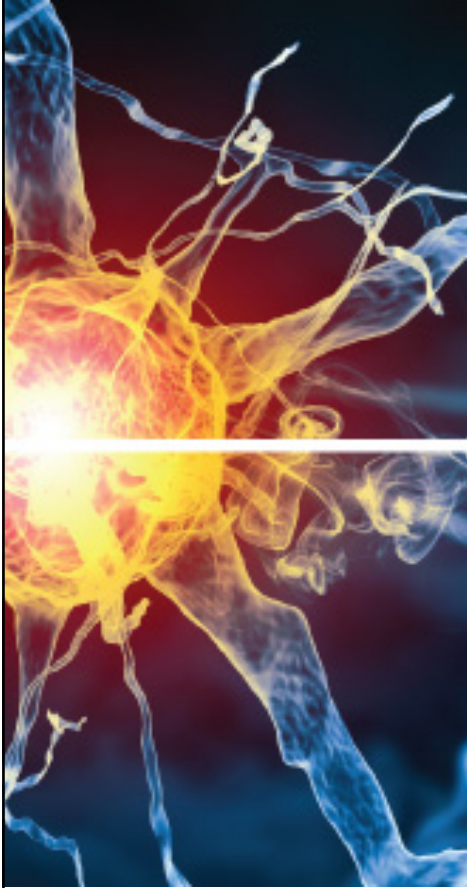
## Disclosures

- Dr. Wainberg has no disclosures to report.



# **1** Learning Objective

Examine the global burden of psychiatric disorders.



## **2** Learning Objective

Review the global challenges in the management of mental illness.

# Burden of Disease

## DALY

**Disability Adjusted Life Years** is a measure of overall disease burden, expressed as the cumulative number of years lost due to ill-health, disability or early death

$$= \text{YLD} + \text{YLL}$$

Years Lived with Disability      Years of Life Lost



Available at <http://www.healthdata.org/gbd/data-visualizations>. Accessed June 1, 2017.

| <b>Both sexes, 15-49 years, 2015 YLDs per 100,000</b> |              |          |             |         |         |       |    |
|---|--------------|----------|-------------|---------|---------|-------|----|
|   | High Mid SDI | High SDI | Low Mid SDI | Low SDI | Mid SDI | Earth | HI |
| Mental & substance use                                | 1            | 1        | 1           | 1       | 1       | 1     | 1  |
| Musculoskeletal disorders                             | 2            | 2        | 2           | 3       | 2       | 2     | 2  |
| Other non-communicable                                |              |          |             |         |         |       |    |
| Neurologic  |              |          |             |         |         |       |    |
| Diabetes/urog/blood/endo                              |              |          |             |         |         |       |    |
| Nutritional   |              |          |             |         |         |       |    |
| Unintentional injuries                                |              |          |             |         |         |       |    |
| Chronic respiratory                                   |              |          |             |         |         |       |    |
| Neonatal disorders                                    |              |          |             |         |         |       |    |
| NTD   |              |          |             |         |         |       |    |
| Cardiovascular diseases                               |              |          |             |         |         |       |    |
| Diarrhoeal diseases                                   |              |          |             |         |         |       |    |
| Digestive diseases                                    |              |          |             |         |         |       |    |
| HIV/AIDS & tuberculosis                               |              |          |             |         |         |       |    |
| Transmissible diseases                                |              |          |             |         |         |       |    |
| Other   |              |          |             |         |         |       |    |
| Waiver  |              |          |             |         |         |       |    |
| Self-harm & violence                                  |              |          |             |         |         |       |    |
| Maternal  |              |          |             |         |         |       |    |
| HIV/AIDS & tuberculosis                               |              |          |             |         |         |       |    |

| <b>Both sexes, 15-49 years, 2015 DALYs per 100,000</b> |              |          |             |         |         |       |    |
|--|--------------|----------|-------------|---------|---------|-------|----|
|  | High Mid SDI | High SDI | Low Mid SDI | Low SDI | Mid SDI | Earth | HI |
| Mental & substance use                                 | 1            | 1        | 2           | 3       | 1       | 1     | 1  |
| Musculoskeletal disorders                              | 2            | 2        | 5           | 11      | 3       | 2     | 2  |
| Cardiovascular diseases                                | 3            | 6        | 3           | 6       | 2       | 3     | 8  |
| Other non-communicable                                 | 4            | 3        | 7           | 8       | 4       | 5     | 3  |
| Neoplasms  | 5            | 5        | 10          | 9       | 5       | 6     | 4  |
| Transport injuries                                     | 6            | 10       | 9           | 12      | 6       | 9     | 9  |
| Diabetes/urog/blood/endo                               | 7            | 8        | 8           | 10      | 7       | 7     | 7  |
| Self-harm & violence                                   | 8            | 4        | 11          | 13      | 10      | 10    | 6  |
| HIV/AIDS & tuberculosis                                | 9            | 15       | 1           | 1       | 8       | 4     | 17 |

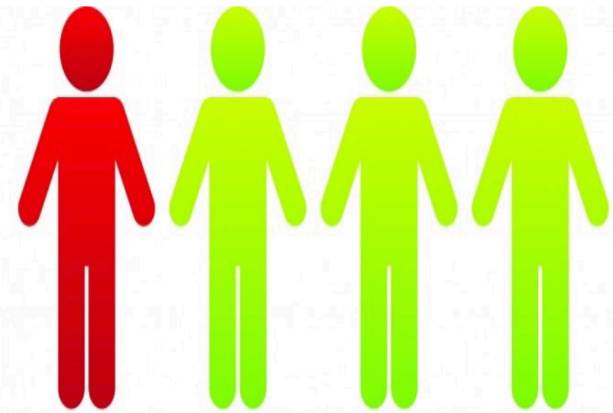
Institute for Health Metrics and Evaluation. Available at <http://www.healthdata.org/>. Accessed June 1, 2017.

# 20%

Half of all chronic  
mental illnesses start at  
age

of children globally  
have a mental problem

# 14



One in four people has a **mental illness**.  
You can be the **one** that helps.



# Global Impact of Depression

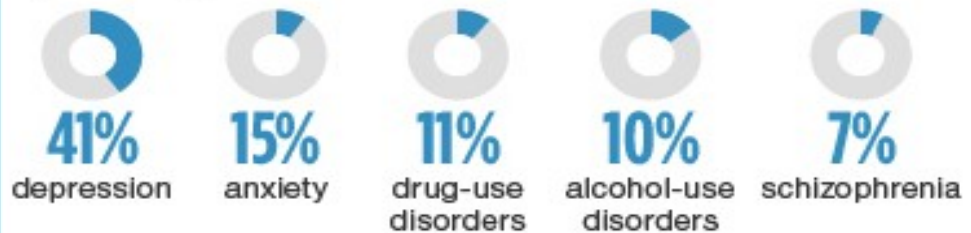
## DEPRESSION



**350 million**

people globally suffer from depression.

Globally, depression accounts for 41% of all the years spent living with mental or behavioral disorders.



Twice as many women typically develop depression than men, although in richer countries, three times as many men die by suicide than women.

Global Burden of Diseases, Injuries, and Risk Factors Study 2013; World Health Organization. Available at <http://www.cnn.com/2014/10/10/opinion/breaking-the-taboo-mental-health/index.html>. Accessed June 2, 2017.

# Global Burden of Disease

GLOBAL BURDEN OF MENTAL, NEUROLOGICAL AND SUBSTANCE-USE (MNS) DISORDERS \*

| Rank | Worldwide |                                 | High-income countries <sup>†</sup> |            | Low- and middle-income countries |                  |                                 |                  |
|------|-----------|---------------------------------|------------------------------------|------------|----------------------------------|------------------|---------------------------------|------------------|
|      | Rank      | Cause                           | DALYs <sup>‡</sup> (millions)      | (millions) | Cause                            | DALYs (millions) | Cause                           | DALYs (millions) |
| 1    | 1         | Unipolar depressive disorders   | 65.5                               |            | Unipolar depressive disorders    | 10.0             | Unipolar depressive disorders   | 55.5             |
| 2    |           | Alcohol-use disorders           | 23.7                               |            | Alzheimer's and other dementias  | 4.4              | Alcohol-use disorders           | 19.5             |
| 3    |           | Schizophrenia                   | 16.8                               |            | Alcohol-use disorders            | 4.2              | Schizophrenia                   | 15.2             |
| 4    |           | Bipolar affective disorder      | 14.4                               |            | Drug-use disorders               | 1.9              | Bipolar affective disorder      | 12.9             |
| 5    |           | Alzheimer's and other dementias | 11.2                               |            | Schizophrenia                    | 1.6              | Epilepsy                        | 7.3              |
| 6    |           | Drug-use disorders              | 8.4                                |            | Bipolar affective disorder       | 1.5              | Alzheimer's and other dementias | 6.8              |
| 7    |           | Epilepsy                        | 7.9                                |            | Migraine                         | 1.4              | Drug-use disorders              | 6.5              |
| 8    |           | Migraine                        | 7.8                                |            | Panic disorder                   | 0.8              | Migraine                        | 6.3              |
| 9    |           | Panic disorder                  | 7.0                                |            | Insomnia (primary)               | 0.8              | Panic disorder                  | 6.2              |

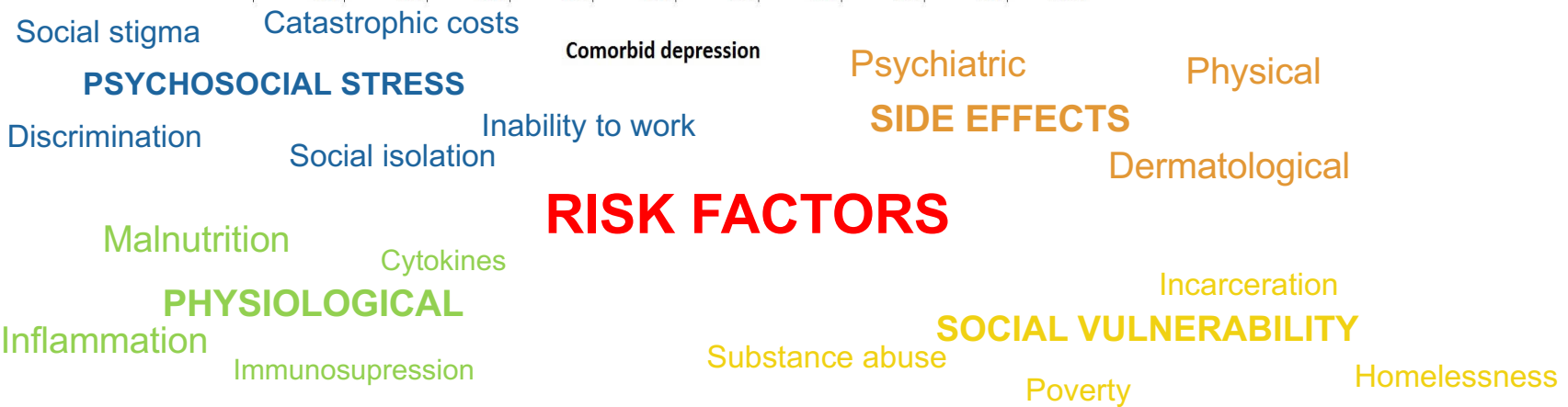
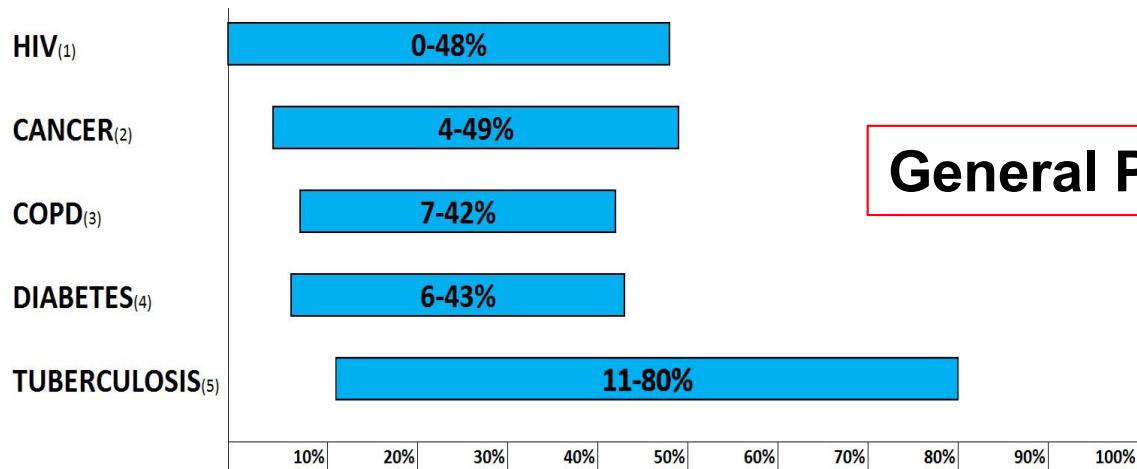
Collins PY, et al. *Nature*. 2011;475(7354):27-30.

# DEPRESSION: Leading Cause of Disability



Baingana F, et al. *Nature*, 2015; 527:S172–S177..

# Prevalence of Major Depression in People with Physical Illnesses



<sup>1</sup>Rabkin JG, et al. *Curr HIV/AIDS Rep.* 2008;5(4):163-171; <sup>2</sup>Walker J, et al. *Ann Oncol.* 2013;24(4):895-900; <sup>3</sup>van Ede L, et al. *Thorax.* 1999;54(8):688-692; <sup>4</sup>Roy T, et al. *BMC Psychiatry.* 2012;12:123; <sup>5</sup>Sweetland A, et al. *World Psychiatry.* 2014;13(3):325-326.

# Depression: Treatment Gap

| Mental disorder     | WHO region      |          |                       |        |                 |                 |
|---------------------|-----------------|----------|-----------------------|--------|-----------------|-----------------|
|                     | Africa          | Americas | Eastern Mediterranean | Europe | South-East Asia | Western Pacific |
| Schizophrenia       | NA <sup>2</sup> | 56.8     | NA                    | 17.8   | 28.7            | 35.9            |
| Major depression    | 67.0            | 56.9     | 70.2                  | 45.4   | NA              | 48.1            |
| Dysthymia           | NA              | 48.6     | NA                    | 43.9   | NA              | 50.0            |
| Bipolar disorder    | NA              | 60.2     | NA                    | 39.9   | NA              | 52.6            |
| Panic disorder      | NA              | 55.4     | NA                    | 47.2   | NA              | 66.7            |
| Generalized anxiety | NA              | 49.6     | NA                    | 62.3   | NA              | 55.6            |



“Although there are known, effective treatments for depression, **fewer than half of those affected in the world (in many countries, fewer than 10%)** receive such treatments.”

World Health Organization. Available at <http://www.who.int/mediacentre/factsheets/fs369/en/>; Kohn R, et al. *Bull World Health Organ*, 2004;82(11):858-866.



## Millennium Developmental Goals



### 3 GOOD HEALTH AND WELL-BEING



#### TARGETS:

“By 2030, reduce by one third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being”

SDG = sustainable development goals

World Health Organization. Available at <http://www.who.int/sdg/targets/en/>. Accessed June 1, 2017.

**SDGs include Mental and Substance Disorders  
Indicators**

**Yet,**

**75-90% of those with mental disorders in  
Low- and Middle-Income Countries  
do not receive care\***

**When provided,  
Tends to be below minimum acceptable standards  
and to disrespect human rights**

**+**

**STIGMA**

SDG = sustainable development goals

Demyttenaere K, et al. *JAMA*. 2004;291(21):2581-2590; Wainberg ML, et al. *Curr Psychiatry Rep*. 2017;19(5):28.

|                      | <b>\$ per capita</b> | <b>% of health budget</b> |
|----------------------|----------------------|---------------------------|
| Low income           | <b>\$ 0.20</b>       | <b>0.53 %</b>             |
| Lower middle income  | <b>\$ 0.59</b>       | <b>1.00 %</b>             |
| Higher middle income | <b>\$ 3.78</b>       | <b>2.38 %</b>             |
| High income          | <b>\$ 44.84</b>      | <b>5.10 %</b>             |

**Resources needed per capita per year:  
 Low-income countries – US \$2  
 Lower middle-income countries – US \$ 3-4**

**“Each dollar invested in easily scalable mental health treatment and services for depression and anxiety returns about US \$4 in improved health and ability to work”**



# WHO Atlas 2014

## HUMAN RESOURCES

1%



Only 1% of the global health workforce works in mental health

100 000 PEOPLE



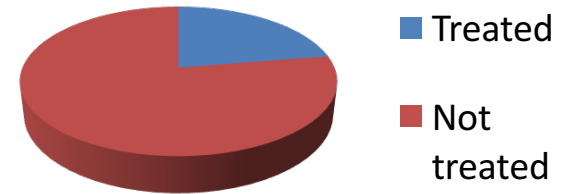
45%

45% of the world's population live in a country with less than one psychiatrist for 100 000 people

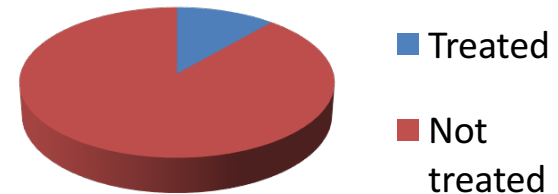
World Health Organization. Available at [http://apps.who.int/iris/bitstream/10665/178879/1/9789241565011\\_eng.pdf](http://apps.who.int/iris/bitstream/10665/178879/1/9789241565011_eng.pdf). Accessed June 1, 2017.

# Globally, Treatment Coverage for Depression is Low

- Minimally adequate treatment\*
  - High income countries: 22.4%

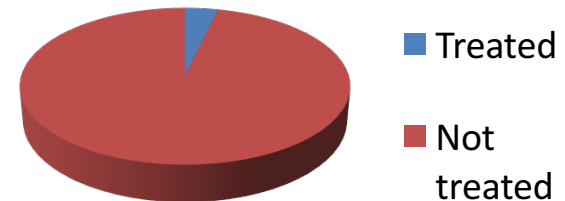


- Middle income countries: 11.4%



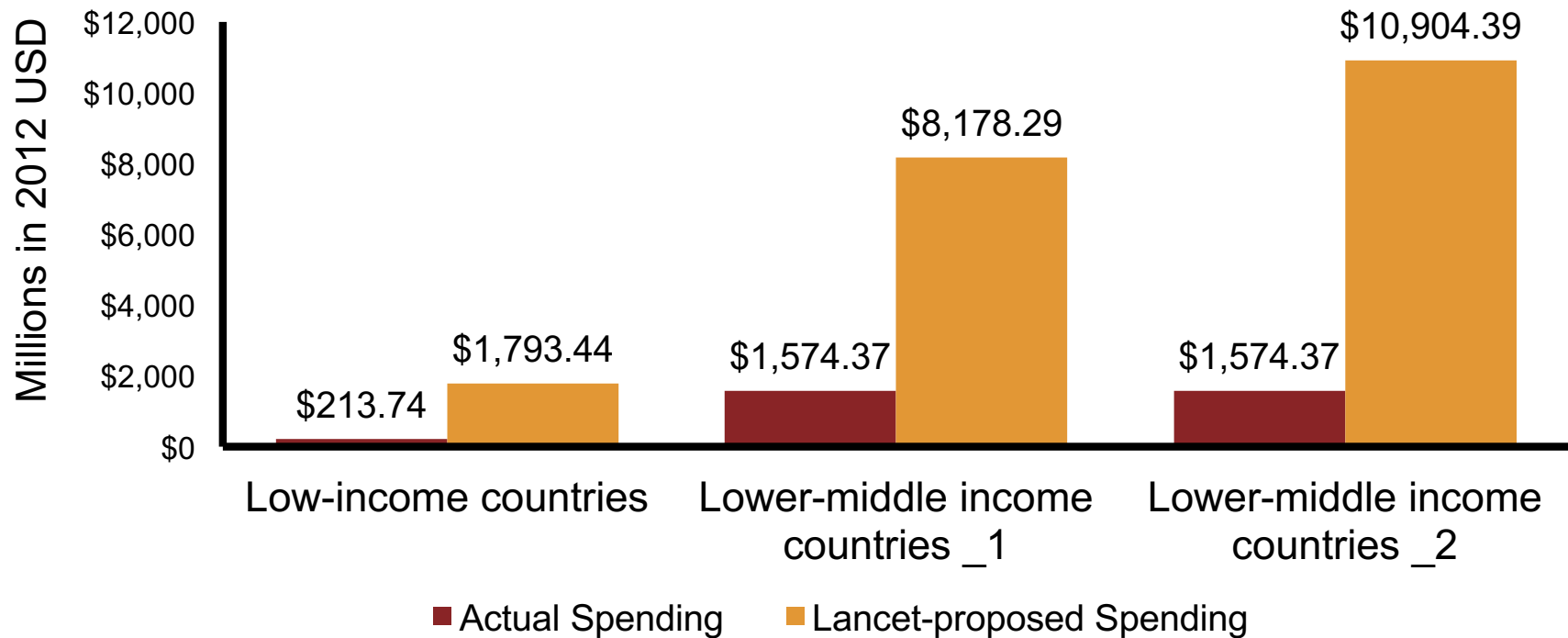
- Low income countries: 3.7%

Focus: Epilepsy and Psychosis



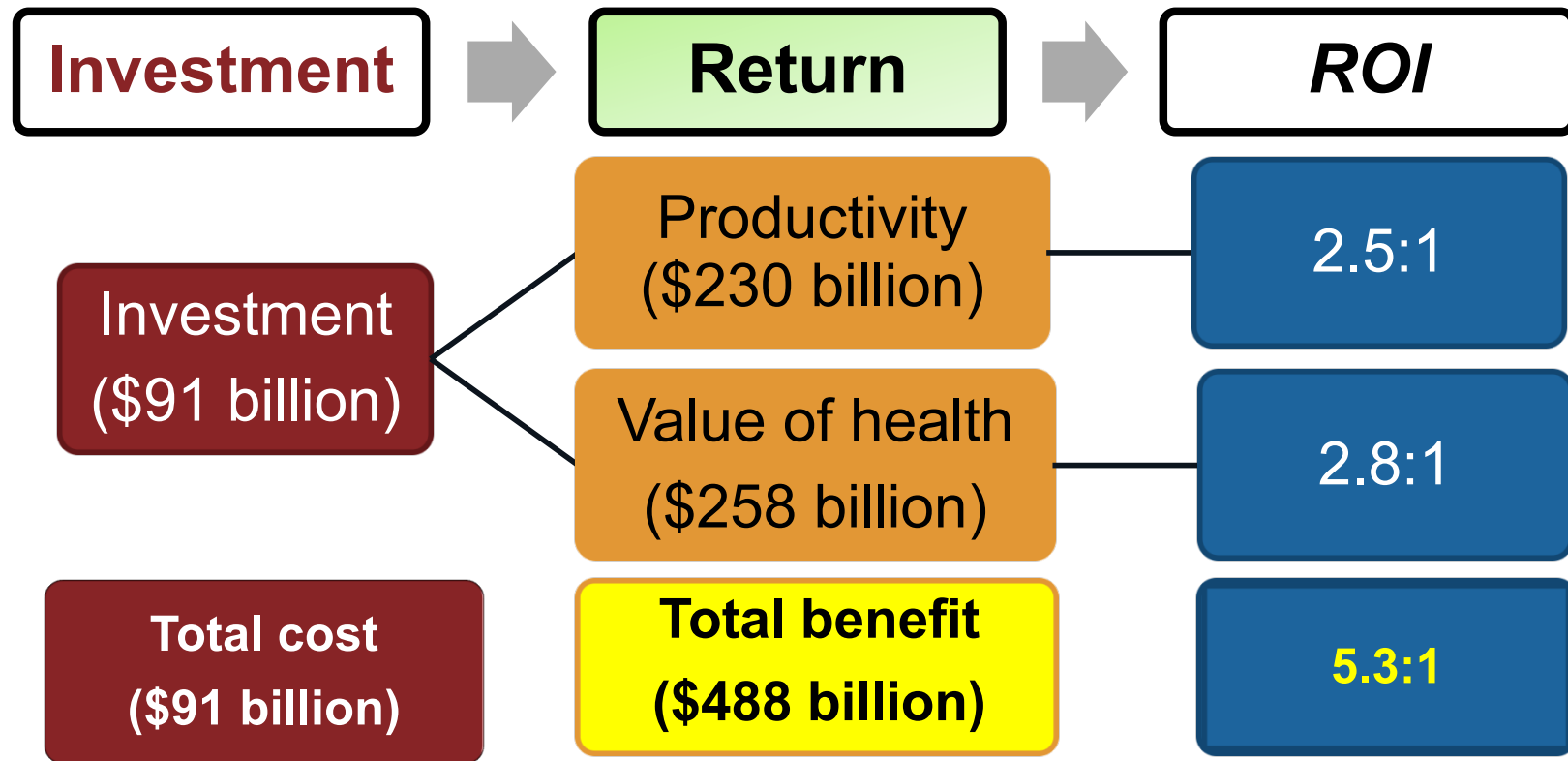
\*Among people with 12-month diagnosis of Major Depressive Disorder from 21 countries, World Mental Health Survey. Thornicroft G, et al. Br J Psychiatry. 2017;210(2):119-124.

# Actual and Proposed Development Aid for Mental Health Services in LMICs



LMIC, lower-middle income countries  
Gilbert BJ, et al. *Plos Med.* 2015;12(6):e1001834.

# Return on Investment (ROI): Depression Treatment



Chisholm D, et al. *Lancet Psychiatry*. 2016;3(5):415-424.

# Integrating Mental Health Treatment in Primary Care



**mhGAP** Mental Health Gap Action Programme

Scaling up care for  
mental, neuro  
substance use



**World Health  
Organization**

As my dad used to tell us:  
**“Don’t just bring me  
problems,  
bring me SOLUTIONS”**

World Health Organization. Available at [http://www.who.int/mental\\_health/mhgap/en/](http://www.who.int/mental_health/mhgap/en/). Accessed June 1, 2017.

# Solving the Resources & Infrastructure Problem

## TASK-SHIFTING/SHARING

Reassignment of specific MH assessment and treatment procedures with abbreviated training and ongoing supervision<sup>1</sup>.

MH specialists

Non-specialists

- ✓ Lay personnel (e.g., teachers, community workers) can successfully recognize mental disorders<sup>2</sup>
- ✓ Trained and supervised non-specialists can effectively deliver psychopharmacological and psychological treatments<sup>3</sup> for mental disorders that are sustained for extended.<sup>3-4</sup>

<sup>1</sup>World Health Report 2007. Available at <http://www.who.int/whr/2007/en/>. Accessed June 1, 2017; <sup>2</sup>Verdeli H, et al. *Child Adolesc Psychiatr Clin N Am*. 2008;17(3):605-624; <sup>3</sup>Rojas G, et al. *Lancet*. 2007;370(9599):1629-1637; <sup>4</sup>Patel V, et al. *PLoS Med*. 2009;6(10):e1000160.



# Solving the Resources & Infrastructure Problem

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## Treatment of postnatal depression in low-income mothers in primary-care clinics in Santiago, Chile: a randomised controlled trial

*Graciela Rojas, Rosemarie Fritsch, Jaime Solis, Enrique Jadresic, Cristóbal Castillo, Marco González, Viviana Guajardo, Glyn Lewis, Tim J Peters, Ricardo Araya*

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## Treating depression in primary care in low-income women in Santiago, Chile: a randomised controlled trial

*Ricardo Araya, Graciela Rojas, Rosemarie Fritsch, Jorge Gaete, Maritza Rojas, Greg Simon, Tim J Peters*

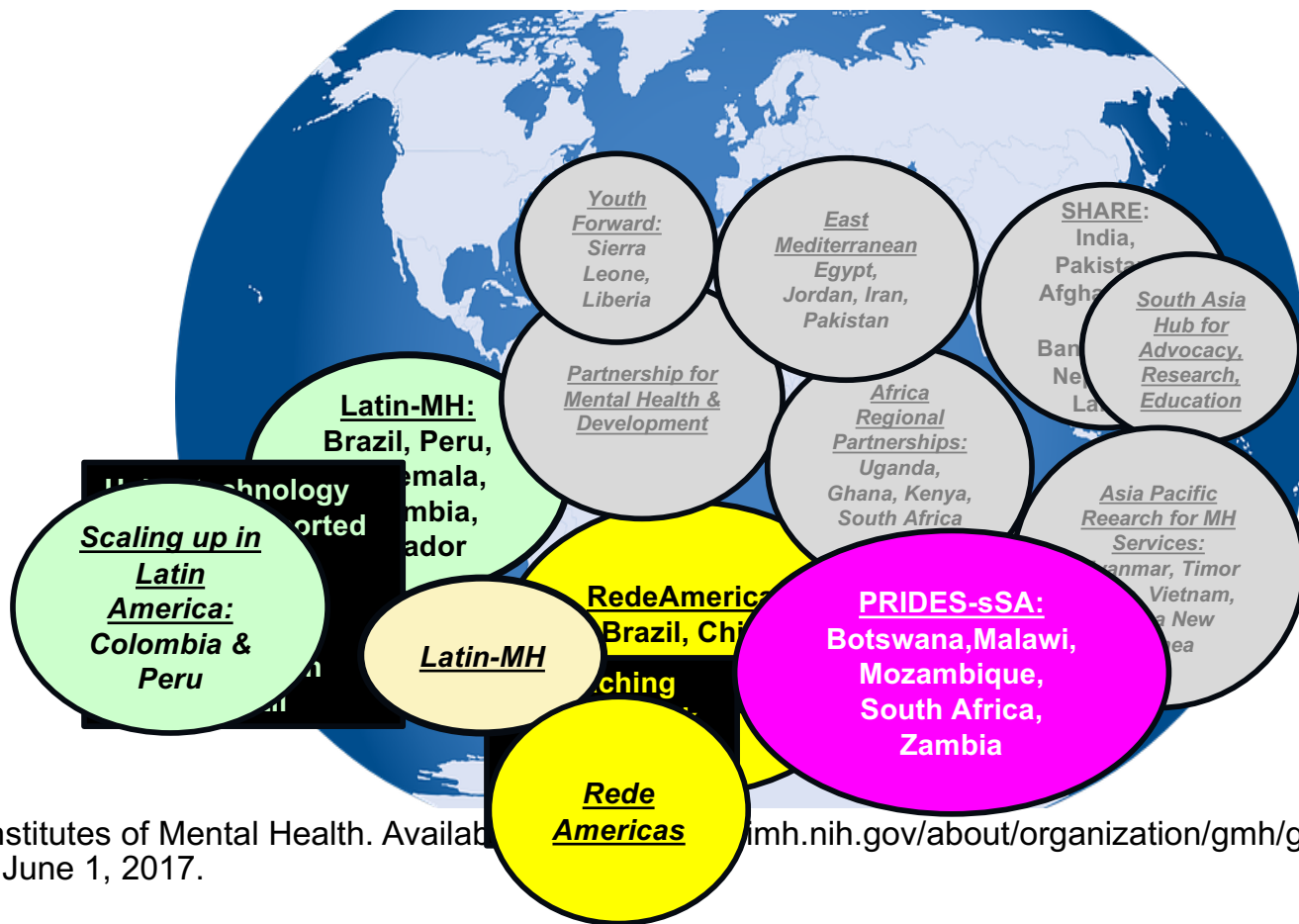
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## Number of Researchers per million inhabitants by Country



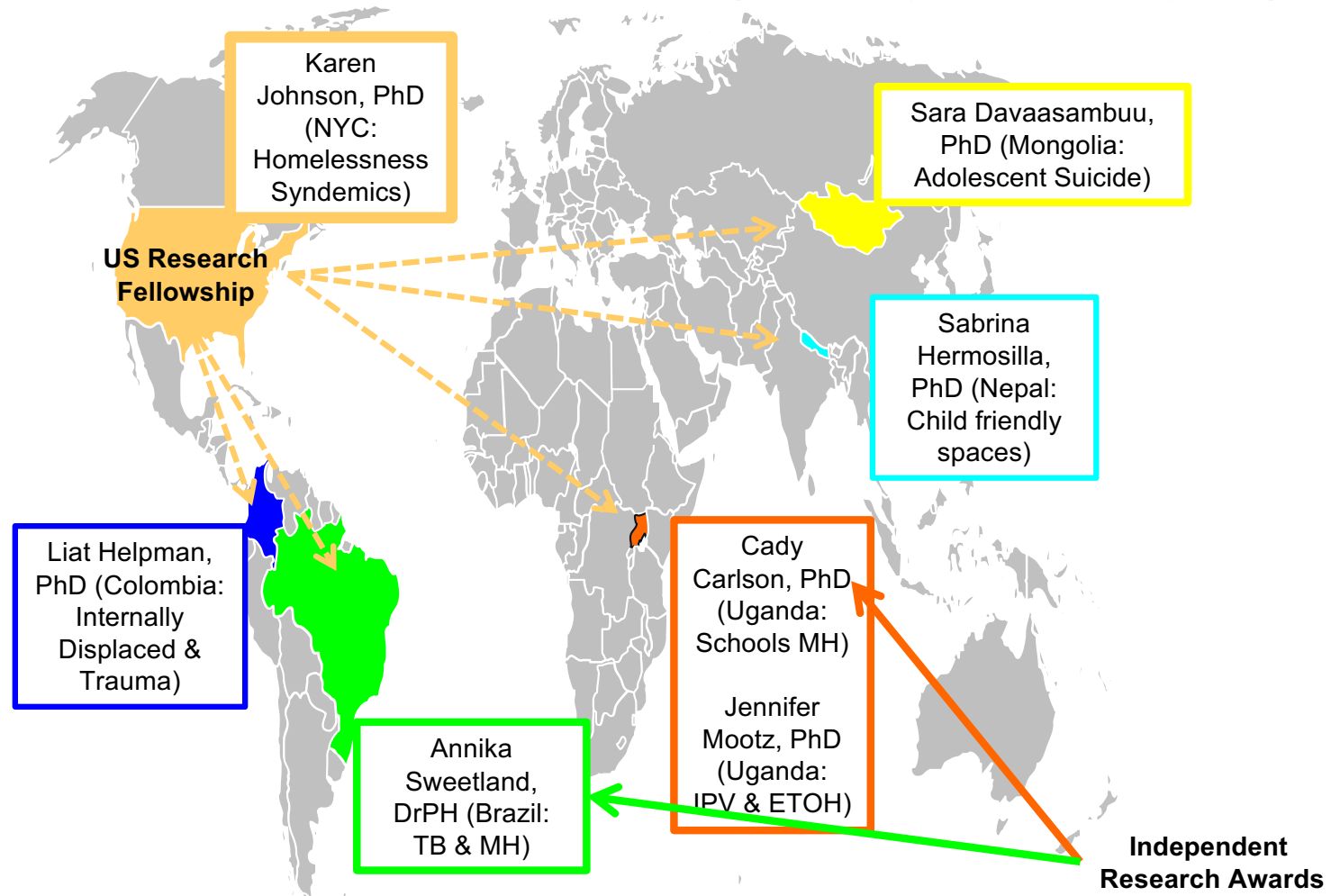


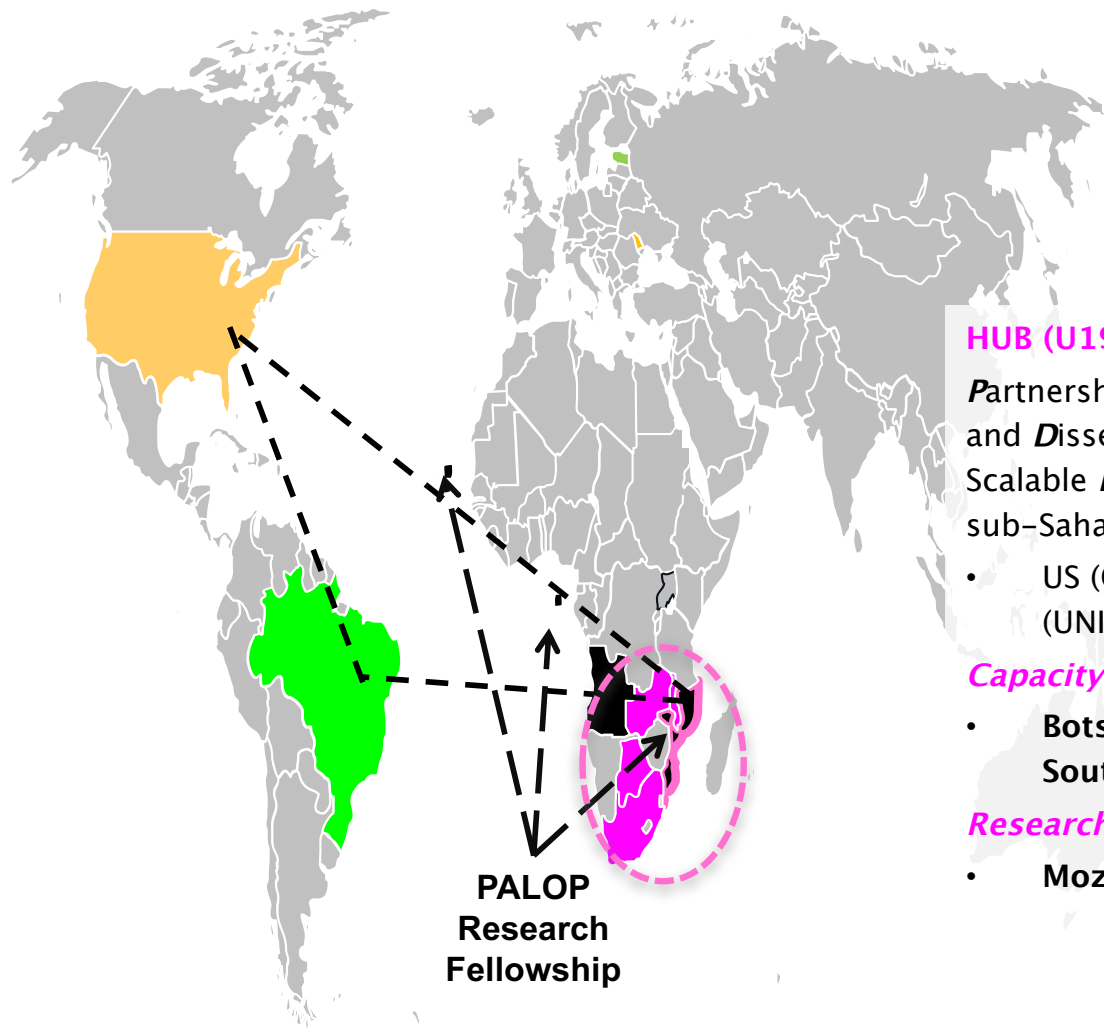
# Collaborative Hubs for International Research in Mental Health



National Institutes of Mental Health. Available at [www.nimh.nih.gov/about/organization/gmh/globalhubs/index.shtml](http://www.nimh.nih.gov/about/organization/gmh/globalhubs/index.shtml). Accessed June 1, 2017.

# Columbia Psychiatry: GLOBAL MENTAL HEALTH RESEARCH FELLOWSHIP





**PALOP  
Research  
Fellowship**

**HUB (U19) - PRIDES sSA**

*Partnerships in Research to Implement and Disseminate Sustainable and Scalable Evidence Based Practices* in sub-Saharan Africa

- US (Columbia/Upenn) & Brazil (UNIFESP)

**Capacity Building Component:**

- Botswana, Malawi, Mozambique, South Africa & Zambia

**Research Component:**

- Mozambique

# Information and Communication Technologies (ICT) for Mental Health



Tele-  
Psychiatry  
(video-  
conferencing)



Electronic  
health  
records



eHealth



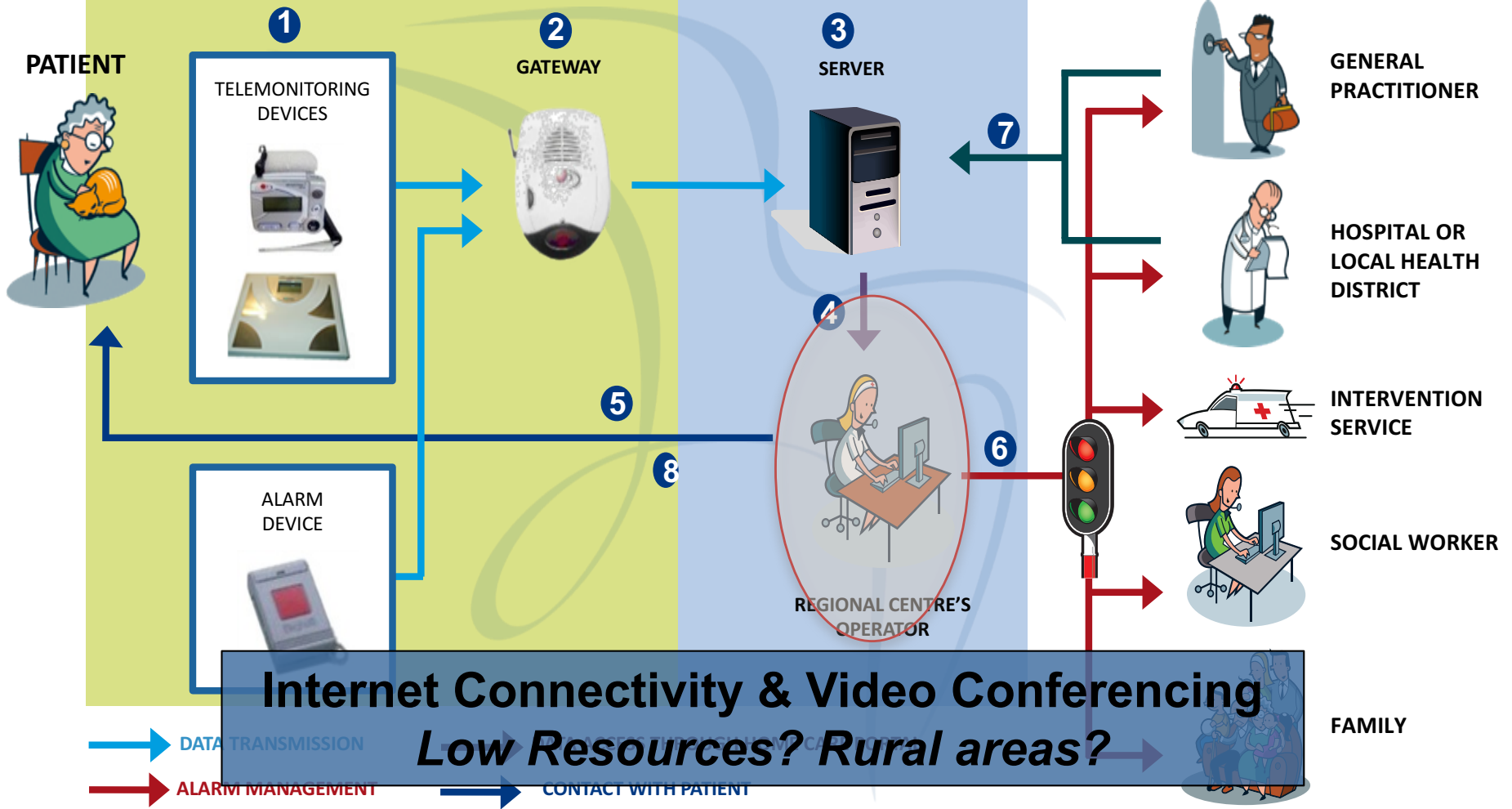
mHealth

High Resources: Internet Connectivity....

***Low Resources? Rural areas?***

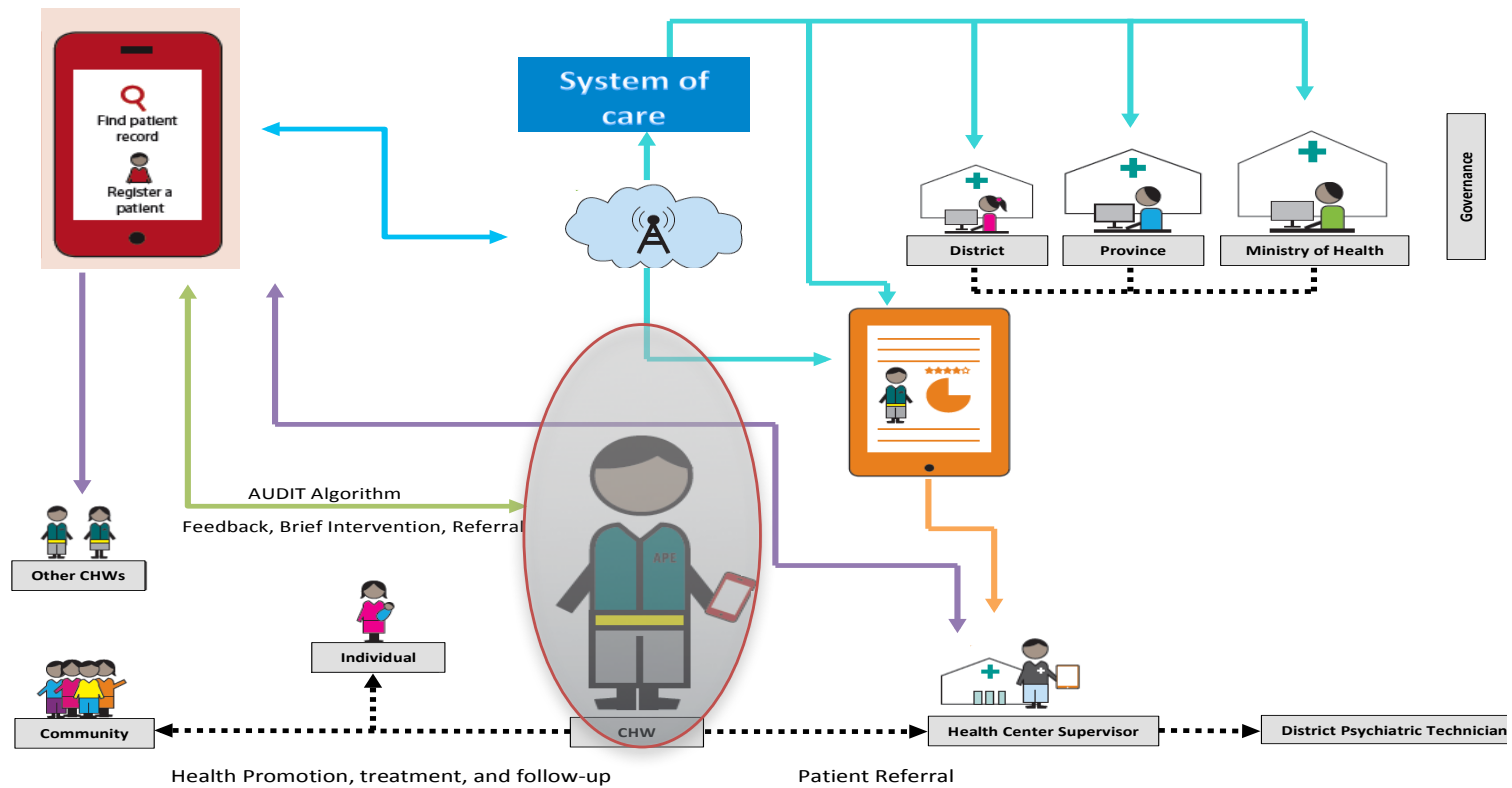
Patient's home (Follow-up Care)

Regional eHealth Centre



# Mobile Alcohol Screening, Brief Intervention, Referral & Treatment (mSMIRT)

T – Mobile Alcohol Screen, Brief Intervention, Referral and Treatment – Mozambique



## However, Silos...

(HIV, TB, Maternal/Child, Malaria, Cardiovascular, Alcohol, Depression, PTSD...)

**vs.**

**Comprehensive**

**Community**

**Health and Mental Health**

**Integrated Care**

# Return on Investment in Depression Care



**Making Mental Health a Global Development Priority**



**WORLD BANK GROUP**



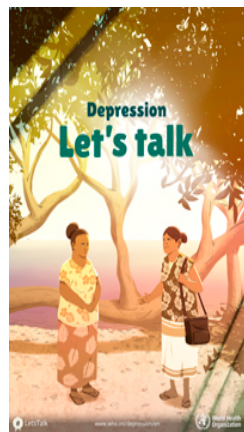
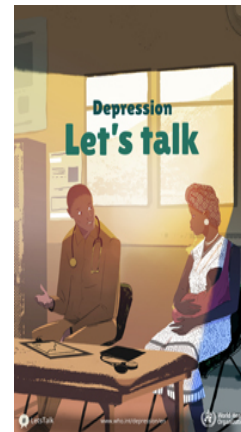
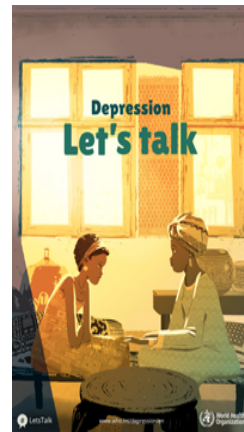
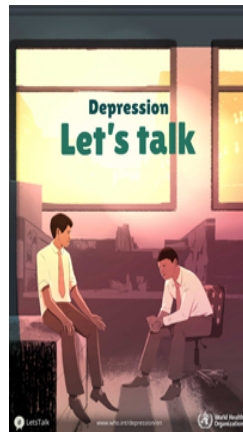
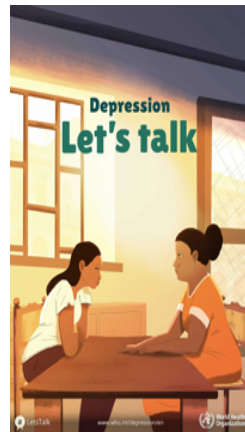
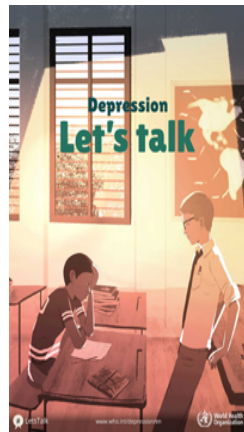
**World Health  
Organization**

“Each dollar invested in easily scalable mental health treatment and services for depression and anxiety returns about US\$4 in improved health and ability to work”

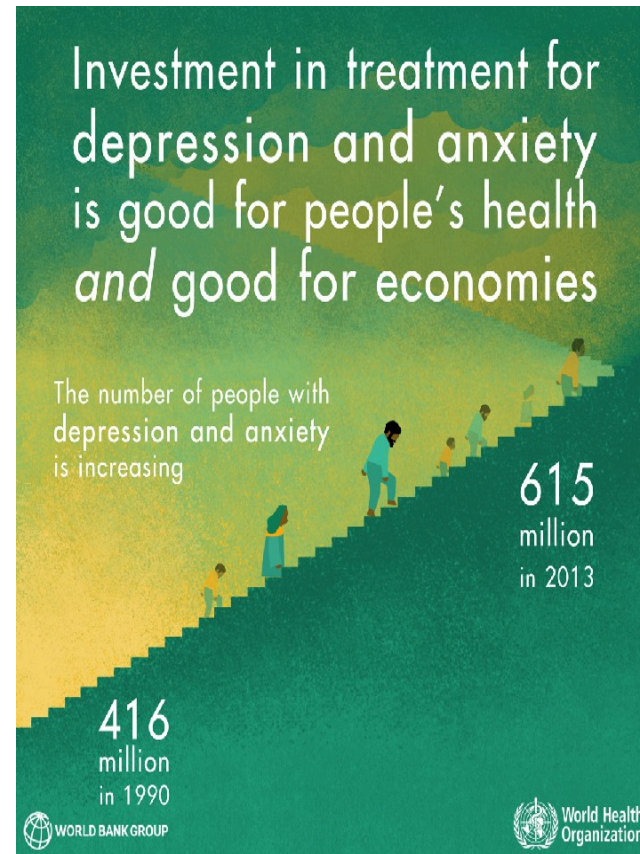
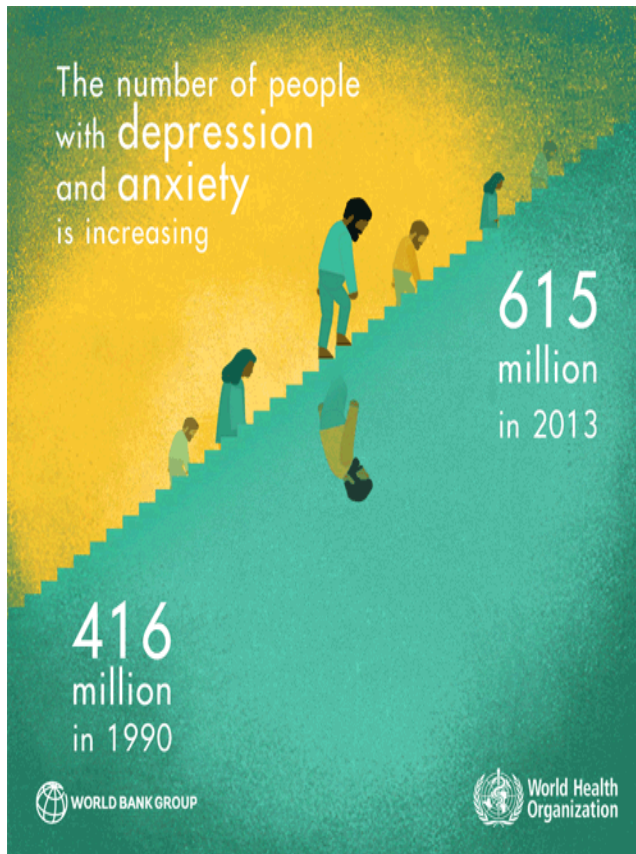
World Health Organization. Available at <http://pubdocs.worldbank.org/en/391171465393131073/0602-SummaryReport-GMH-event-June-3-2016.pdf>. Accessed June 1, 2017.



# World Health Day 2017: Depression



# World Health Day 2017: Depression



# World Health Day 2017: Depression

Investing in treatment for depression and anxiety makes sense.

\$1



US\$1 of investment in treatment for depression and anxiety leads to a return of US\$4 in better health and ability to work.


This is good for people, and good for economies.

WORLD BANK GROUP

World Health Organization

The cost of lost productivity in the workplace due to depression and anxiety is very high: US\$ 1 trillion/year

That's more than US\$ 130 for every person on the planet



Most people suffering from depression and anxiety don't receive treatment.

This has economic consequences

- ▼ For people with disorders: unable to work
- ▼ Employers: lower productivity and employee absence
- ▼ Governments: fewer tax receipts and higher health and welfare expenditures

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World Health Organization



# Policy Makers

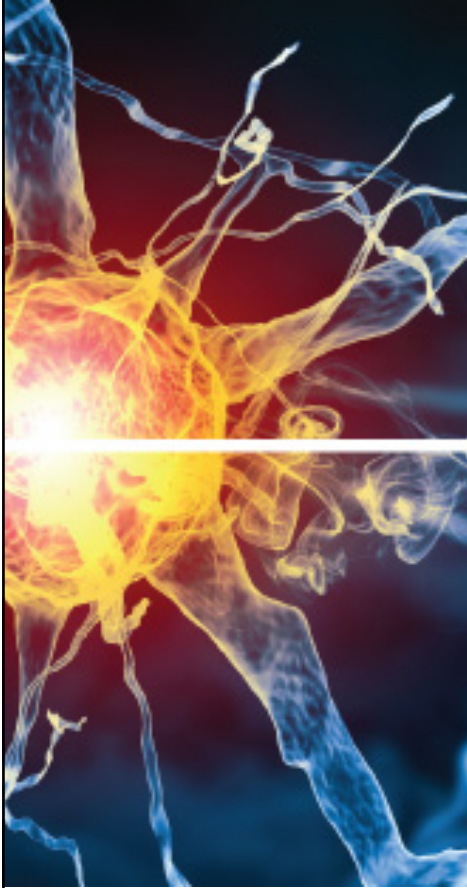
## **Vision — Action Plan — Commitment + Monitoring & Evaluation**

- Health System:
  - Community Comprehensive Health and Mental Health Integrated Care
- Associated with development
  - “No Health & No Development Without Mental Health”
- \$ - Funding and priorities



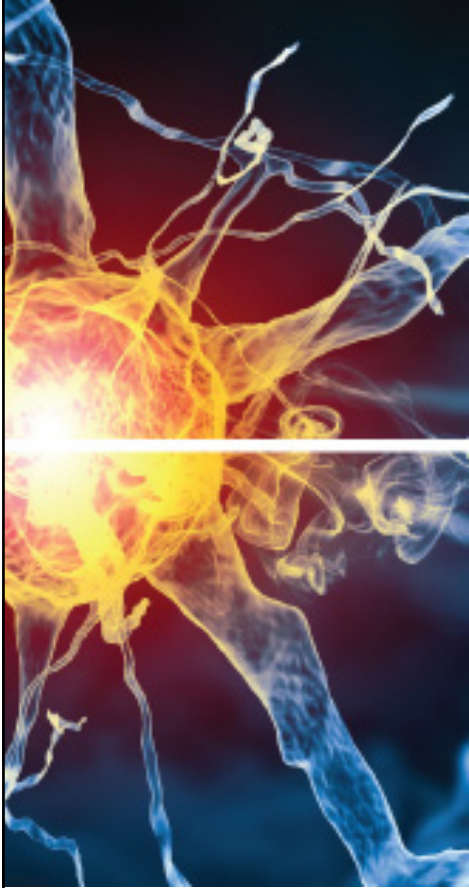
# SMART Goals

- Reduce the burden of mental illness by utilizing evidence-based therapies and promoting good mental health and well-being
- Train lay personnel in recognizing and screening for mental disorders
- Facilitate task-shifting/sharing by involving non-specialists in managing mental disorders
- Invest – with a good return – in the treatment of mental disorders to improve mental health and lessen its economic burden



**Gracias**  
**Obrigado**  
**Thanks**

[mlw35@cumc.columbia.edu](mailto:mlw35@cumc.columbia.edu)



# Questions & Answers