



# WORLD FEDERATION FOR MENTAL HEALTH

## *Fédération Mondiale pour la Santé Mentale*

### NEWSLETTER

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## 3rd World Conference on Mental Health Promotion and Prevention Held in New Zealand

The Third World Conference on the Promotion of Mental Health and Prevention of Mental and Behavioral Disorders brought together many different groups concerned with these subjects, and took the biennial conference series to a new standard of excellence. This was evident from the larger number of registrations, the variety and innovations in the program and workshop sessions, and the seven pre-conference meetings at the start of the week. In addition three publications were released, two summary reports from the World Health Organization (WHO) on promotion and on prevention, and a joint publication by WFMH and WHO presenting 35 country case studies on mental health promotion (see page 6). Some 360 people attended and 31 countries were represented.

The conference in Auckland on 15-17 September was organized by WFMH, The Clifford Beers Foundation (U.K.), the Mental Health Foundation of New Zealand, and the Carter Center. It was co-sponsored by WHO. Some 360 people attended and 31 countries were represented.

The meeting's focus on policy development was carried forward by health agency leaders from New Zealand and the United States: Dr. Karen Poutasi, Director General of Health in New Zealand's Ministry of Health; Dr. Janice Wilson, Deputy Director General for New Zealand's Mental Health Directorate in the Ministry of Health; Dr. Thomas R. Insel, Director of the U.S. National Institute for Mental Health;

Charles G. Curie, Administrator, U.S. Substance Abuse and Mental Health Services Administration; and A. Kathryn Power, Director of the U.S. Center for Mental Health Services.

The plenary speakers also included David Morris, Director of the Social Inclusion Program at the National Institute for Mental Health in England, Liz Sayce, Director of the U.K. Disability Rights Commission, and Gerard Vaughan, Manager of the successful Like Minds, Like Mine program in New Zealand.

The message at this level of the conference was that government agencies play a vital role in moving the concepts of promotion and prevention, as developed by evidence-based research and pilot programs, into the mainstream.

### **Indigenous Mental Health**

Another strand of programming drew attention to the special issues of indigenous peoples in mental health. The conference's attention to Maori traditions and to other cultures in New Zealand –

*(continued on page 3)*



*At the New Zealand conference (left to right): Thomas Insel, M.D., Director, National Institute of Mental Health, U.S.; Preston J. Garrison, Secretary General and CEO, WFMH; Rosalynn Carter, Patron of the Biennial Conferences; Thomas Bornemann, Conference Program Chair and Director, Carter Center Mental Health Program; Beverly Long, Chair, Consortium for the Worldwide Advancement of Promotion and Prevention; and Charles G. Curie, Administrator, Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services.*

## Message from the President

At the time of writing this article, I am deeply saddened by the news that a dear friend has taken his life after years of struggle in his own darkness due to depression.

My immediate thoughts focus on the frustration of how science, services (or lack of them) and the community failed this young man, and how much needs to be done to ensure there are safety nets of care for vulnerable individuals. I am also struck by the tremendous impact that stigma and discrimination have on individuals and families as they try to negotiate fragmented systems of care, and the devastating emotional trauma for families and friends when a loved one dies from suicide.

Mental illness and substance abuse are the strongest risk factors for suicide, particularly in young people. According to the *World Health Report* (WHO, 2003) each year approximately one million people die from suicide around the world, representing one death every 40 seconds. For every suicide there are at least 20 suicide attempts. Worldwide, suicide ranks among the three leading causes of death among those aged 15-44. Currently, young people are considered those at highest risk for suicide in one-third of all countries, developed and developing. Males are approximately three times more likely to die by suicide than females.

Alarming as these figures are, the WHO report suggests that true rates may be even higher because many countries do not keep accurate data on suicide prevalence because of cultural or religious taboos. Among countries reporting suicide the highest rates are found in Eastern Europe and the lowest in Latin America, Muslim countries and in a few of the Asian countries. Limited reports are available from African countries.

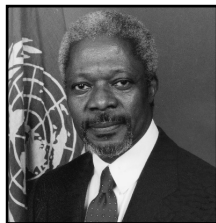
Globally there has been a lack of awareness as to the potentially life-threatening impact of mental illness on individuals. In recognition of this compelling need the World Federation for Mental Health is launching a new initiative focused on education and public awareness about suicide as a major public health issue.



L. Patt Franciosi, PhD  
President

## WORLD MENTAL HEALTH DAY 2004 MESSAGE FROM THE SECRETARY-GENERAL OF THE UNITED NATIONS

*The focus of this year's World Mental Health Day, the co-occurrence of mental and physical illness, reflects the reality of people's experience.*



UN/DPI photo  
Kofi Annan

*Although we tend to think of diseases in isolation, people are often affected by multiple ailments. For many, suffering mental and physical illness at the same time is the rule. It is particularly harmful for some populations, such as the elderly and the poor, as diseases tend to accumulate and get worse with age, and with unfavourable living conditions.*

*The global explosion of HIV/AIDS, the resurgence of old killers like tuberculosis, and the appearance of new infections have underlined the relationship between physical illness on one hand, and depression on the other. Further complications ensue because a mental disorder in someone affected by a life-threatening physical disease not only increases the level of their suffering; it also makes them less likely to keep to a treatment regimen.*

*Clearly, when treating illness, we must do better in considering the individual as a whole, rather than piecemeal. This requires those involved in health care — mental and physical — to work together, bringing their individual strengths and responsibilities into a collaborative effort.*

*On this World Mental Health Day, let us pledge to treat people, not parts of people.*

(continued from page 3)

supplemented by presentations from South Africa – underscored the need to take cultural issues into account when drafting policy and undertaking research. Auckland itself served as a suitable backdrop; a walk through the city center confirmed its remarkable multi-ethnic character formed by immigration. In addition to the Maori population and people of European origin, a high proportion of residents come from Asian countries and from various Pacific islands.

Former U.S. First Lady Rosalynn Carter, the patron of the conference series, participated in many activities. Program highlights included Prof. George Albee's special lecture review-

ing issues of importance during his long career. Dr. Thomas Insel, Director of the U.S. National Institute of Mental Health, gave a presentation on the relationship of neuroscience research to mental health promotion that was perfectly pitched to non-neuroscientists. Prof. Mason Durie gave an important overview of indigenous mental health issues worldwide, before focusing on matters related to Maori mental health.

The New Zealand organizers wanted to emphasize the value of exercise for mental well-being and overall good health. This theme appeared at several points in the program, and notably in the plenary session given by Dr. Ken Fox of Bristol University in the U.K. and Dr. Steve Edwards of Zululand University, South Africa.

A special symposium on "Peer Support and Recovery" was made possible through scholarships for consumers from the U.S. given by the Center for Mental Health Services.

Many of the New Zealand presenters opened with greetings in Maori, and in accordance with custom local members of the audience rose to sing a *waiata* (a Maori song expressing support and respect) at the end of such presentations. The final *waiata*, following the closing ceremony, was a genuinely moving end to an exceptional meeting.

The conference proceedings will be prepared by WFMH with support from DHHS/SAMHSA/CMHS in the U.S., and published in 2005.

## WFMH BOARD OF DIRECTORS MEETS IN AUCKLAND

The Board of Directors of the World Federation for Mental Health met for a planning and business session 11 – 14 September 2004 in Auckland, New Zealand. The meeting was held at the Auckland University of Technology, courtesy of Professor Max Abbott, Pro-Vice Chancellor and Dean of the Faculty of Health. Professor Abbott was WFMH President in 1991-93. The co-host for these arrangements was Dr. Peter McGeorge.

In a day and half of planning sessions, the board addressed a number of issues that will be presented to the 2005 Member Assembly for consideration. Among the major areas of discussion were the review and rewording of WFMH's Vision, Mission and Goals statements to reflect the changing global environment;

a set of Strategic Objectives to guide WFMH's program development activities; and the process through which the board of directors is structured and elected.

Substantial discussion also focused on future directions for the World Mental Health Day global education project, on the enhancement of WFMH's international fundraising strategy, and on approaches to increase membership among key mental health organizations worldwide. WFMH President L. Patt Franciosi appointed a task force consisting of Pirkko Lahti (Finland), Shona Sturgeon (South Africa), Edward Pennington (Canada) and Peter McGeorge (New Zealand) to further develop recommendations on these topic areas for consideration by

the board prior to the 2005 Member Assembly.

During its regular business session the board received financial reports from the Treasurer, and reports on planning for the 2005 (Cairo) and 2007 (Hong Kong) World Congresses. It approved Voting Membership status for the Korea Christian Mental Health Institute. The employment contract for WFMH Secretary-General and CEO Preston J. Garrison was renewed.

The Nominating Committee for the 2005 Board election was selected. The members are Pirkko Lahti, chair (Finland), Leo de Graaf (Netherlands), Beverly Long (U.S.), Miguel Jorge (Brazil), Edward Pennington (Canada), Shona Sturgeon (South Africa) and Deborah Wan (Hong Kong).



Before the first day of the Board meeting at the Maori meeting house (marae) at Auckland University of Technology (left to right): John Copeland (U.K.), Regina de Jesus (Philippines), Deborah Wan (Hong Kong), Patt Franciosi (U.S.), Shona Sturgeon (South Africa), Pirkko Lahti (Finland), Edward Pennington (Canada), Tony Fowke (Australia), Brian Howard (Ireland), Richard Studer (U.S.), Peter McGeorge (New Zealand) and Leo de Graaf (Netherlands).

# METABOLIC ISSUES IN MENTAL ILLNESS TREATMENT

A panel of international experts in endocrinology, cardiovascular disease, psychiatry, primary health care, and consumer and family mental health advocacy was convened by WFMH in Vienna, Austria, on 28 – 30 September 2004 to explore issues relating to how metabolic issues in people with mental illnesses should be identified and monitored, and to develop recommendations on the management of these issues.

The objectives of the meeting were to:

- Understand current guidelines in the identification and treatment of cardiovascular and metabolic factors in the general population
- Recognize the increased risk of metabolic/cardiovascular comorbidities in people with mental illnesses, including schizophrenia, bipolar disorder and depression
- Understand the metabolic/cardiovascular effects of antipsychotic medications
- Evaluate current diagnosis and treatment challenges in the management of metabolic/cardiovascular issues in people with a mental illness, and
- Develop a peer-review publication to raise awareness of these issues in mental illness and to provide guidance for treating physicians, consumers/patients, caregivers, mental health agency administrators, and other third party groups.

L. Patt Franciosi, RN, PhD, President of WFMH and co-chair of the consensus meeting panel, stated that in addition to these objectives, “WFMH believes the most important goal in the building of consensus regarding the influence of metabolic syndrome in the treatment of people with mental illnesses is the imperative need to alert the professional community (in both psychiatry and primary care) about the importance of comprehensive assessment and regular monitoring of persons with mental illnesses to ensure

that the risks, as well as the benefits, associated with treatment are understood and addressed in a knowledgeable and effective manner. We are also extremely pleased that this consensus meeting included the voices of consumers/patients and family members/caregivers.”

Professor Siegfried Kasper, Chair of the Department of General Psychiatry at the University of Vienna, joined Dr. Franciosi in co-chairing the panel. Members of the panel were:

- Professor Alan Garber, Professor of Medicine, Biochemistry and Molecular Biology, and Molecular and Cellular Biology, Baylor College of Medicine, Houston, Texas, USA
- Dr. Dale L. Johnson, President-elect of the World Fellowship for Schizophrenia and Allied Disorders
- Dr. Ronald Krauss, Senior Scientist and Director, Atherosclerosis Research, Children’s Hospital Oakland Research Institute, Oakland, California, USA
- Professor Stephen Marder, Vice-Chair at David Geffen School of Medicine, UCLA, and Chief of Section on Psychosis, UCLA Neuro-psychiatric Institute, Los Angeles, California, USA

- Mrs. Janet Meagher, Director of Employment, Psychiatric Rehabilitation Association, Strawberry Hills, NSW, Australia, and Chair, WFMH Global Consumers-Carers Advisory Group
- Dr. Belinda MacIntosh, Family Physician, Head of the Medicine and Psychiatry Departments, Tintswalo Hospital, Limpopo Province, South Africa
- Dr. John W. Newcomer, Associate Professor of Psychiatry, Washington University School of Medicine, St. Louis, Missouri, USA
- Mrs. Sigrid Steffen, Vice-President, EUFAMI, Salzburg, Austria.

The consensus panel will be collaborating on the preparation and publication of a final statement and report on the meeting. The statement is expected to appear as an article in the Journal of Clinical Psychiatry’s Academic Highlights section in early 2005.

The panel was organized by the World Federation for Mental Health, and was supported by an unrestricted grant from Bristol-Myers Squibb and Otsuka Pharmaceutical Company, Ltd. This meeting was developed by WFMH as an expansion of the 2004 World Mental Health Day theme.



*Participants at the international meeting on metabolic issues in mental illness treatment, Vienna, Austria, 28-30 September.*

## At the United Nations

### UN NY

Gary S. Belkin, M.D., Ph.D., has been appointed as WFMH's Alternate Representative to the United Nations Department of Information in New York. Dr. Belkin is the Deputy Director of Psychiatry at New York University School of Medicine, Bellevue Hospital Center. He has joined the Non-Governmental Organization Committee on Mental Health (a consortium of consultative NGOs at the UN) and is the new Co-Convenor of the Committee's Working Group on Human Rights and Mental Health. Earlier this year Dr. Belkin attended the meetings of the Ad Hoc Committee for a UN Convention on the protection and promotion of the rights and dignity of persons with disabilities.

The NGO Committee on Mental Health began its 2004-2005 session in 14 October with a celebration of World Mental Health Day. WFMH Main Representative Nancy Wallace, chair of the Committee, read UN Secretary-General Kofi Annan's message for the Day (see page 2). Dr. Belkin then gave an overview of WFMH's theme, "The Relationship between Physical and Mental Health: Co-Occurring Disorders," and led a discussion about "the mind-body connection."

WFMH representative Prof. Ricki Kantrowitz, Ph.D., Co-Convenor of the NGO Committee's Working Group on Gender Perspectives, is involved in the Committee's planning for the 49th Session of the UN Commission on the Status of Women (28 February–11 March 2005). The Commission will focus on a review of the implementation of the *Beijing Declaration and Platform for Action* adopted at the UN's Fourth World Conference on Women (1995).

### Honor for Dr. Armand Laroche

WFMH congratulates Dr. Jean-Louis Armand Laroche on the award of the French Legion of Honor in September. Dr. Armand Laroche was for many years WFMH's representative to UNESCO in Paris.

## Without Boundaries – Challenges and Hopes for Living with ADHD: An International Survey

In 2003, as part of its World Mental Health Day campaign focus on child and adolescent mental health, WFMH drew attention to the impact of Attention Deficit Hyperactivity Disorder (ADHD) on children and their families. The effort has continued this year. The results of an international survey of parents spearheaded by WFMH were presented in Berlin in August, to coincide with the 16th World Congress of the International Association for Child and Adolescent Psychiatry and Allied Professions (IACAPAP).

The results of this first-ever survey of parents clearly demonstrated a need for improved diagnosis of children with Attention Deficit Hyperactivity Disorder, and for greater support for their families. ADHD is one of the most common disorders of childhood and adolescence, affecting 3-7% of school-aged children. After a correct diagnosis, it can be treated by a combination of approaches, including medication, behavioral and psychological treatment/therapies, and educational accommodations.

Seven hundred and sixty parents of children with ADHD in eight countries (Australia, Germany, Italy, Mexico, The Netherlands, Spain, the U.K. and the U.S.) were surveyed by an independent market research company. Later, results from Canada were completed and included in a revised report, taking the total number of parents surveyed to almost 900. The results show wide international variability in the length of time to an ADHD diagnosis by a health professional. In the U.S. the average time to diagnosis is one year, while in Italy the average time is just over three years.

Dr. Russell Barkley, Professor of Psychiatry at the Medical University of South Carolina, U.S., who helped to design the survey, commented: "Two years to diagnosis is far too long to wait when you consider the speed at which children develop mentally and emotionally."

The impact of the disorder is felt not only by the child, but by family members. Almost all parents surveyed (91%) reported that they often feel stressed or worried by their child's ADHD. They reported that treatment produced a considerable improvement in concentration in school (86%) and social interactions (76%), and reduced stress within the family (81%). Nevertheless, they said that even after a child receives treatment it is still difficult to cope with symptoms, especially before school (77% of parents), after school (82%) and in the evening (75%).

"While ADHD can cause difficulties at school, these findings demonstrate that home life and other family members are often also negatively impacted," said Dr. Barkley. "Positive social interactions with family and peers are keys to social effectiveness and strong self esteem. Parents and their physicians should work together to ensure that ADHD symptoms throughout the day are also addressed."

"When parents are actively involved in their child's health care, it benefits both the child and the entire family," said WFMH Secretary General and CEO Preston Garrison, who chaired the media seminar. "I want to congratulate the parents involved in this survey for their steadfast dedication to improving their children's lives."

Data from each of the countries represented in the survey can be found at [www.wfmh.org](http://www.wfmh.org), the WFMH web site. The survey was conducted by an independent market research firm, Osnos. It was carried out in partnership with Eli Lilly and Company, and was supported by the following ADHD advocacy groups: ADD Association, Queensland, Australia; Learning and Attentional Disorders Society, Australia; Learning Difficulties, NSW, Australia; AIFA, Italy; AMDAH, Mexico; Balans, The Netherlands; ADANA Fundacion, Spain; ANSHDA, Spain; APNADAH, Spain; ADDISS, United Kingdom; CHADD, United States.

## WFMH-WHO Case Studies on Mental Health Promotion

A joint publication by the World Federation for Mental Health and the World Health Organization was released at the Third World Conference on the Promotion of Mental Health and Prevention of Mental and Behavioral Disorders in Auckland on 15 September. The book, *Mental Health Promotion: Case Studies from Countries*, was edited by Shekhar Saxena and Preston J. Garrison, and describes 35 promotion projects from 19 countries.

WFMH collected 59 submissions from organizations in its network of contacts, from which WHO selected 35 for inclusion. Shekhar Saxena, Coordinator, Mental Health, Evidence and Research at WHO, said that all the submissions deserved publication and were a delight for himself and his colleagues to read. He called the book "a tribute to people who are working on mental health promotion on the ground."

At a special session during the Auckland conference, Shekhar Saxena and Patt Franciosi gave awards to five of the promotion projects for special distinction. The five projects reflect the broad variety of mental health promotion goals described in the book.

- **Gedrækt.** Until 2000, the concept of mental health promotion was unknown in Iceland, except to professionals. At the initiative of a consumer, Hedinn Unnsteinsson, an ambitious project was developed by a group of organizations to improve public knowledge of mental health by a variety of means. This included launching a new word "Gedrækt," meaning "mental health promotion." In two years the concept was understood by more than 60% of the population.
- **Mind Out.** The Mind Out project is designed to promote mental health among 15 to 18 year olds in Irish schools by shaping attitudes about dealing with personal



*Presentation of the awards for distinction: Hedinn Unnsteinsson ("Gedrækt," Iceland), Patt Franciosi, Margaret Barry ("Mind Out," Ireland), Rosalynn Carter, Shekhar Saxena, Shona Sturgeon (accepting the award on behalf of Simone Honikman and colleagues, South Africa), and Marie Hull-Brown ("Meeting of the Minds," New Zealand). Bulent and Aysen Coskun were unable to accept their award in person, but sent a video from Turkey.*

distress, including knowing how and when to seek assistance.

- **Meeting of the Minds.** The Mental Health Foundation of New Zealand developed a program through Auckland's library service to provide various mentally stimulating activities for older people.
- **Perinatal Mental Health Project.** This initiative aims to provide a holistic mental health service for pregnant and postpartum women through the Liesbeeck Midwife Obstetric Unit at Mowbray Maternity Hospital, Cape Town, South Africa. In the nearby impoverished Khayelitsha settlement the prevalence of post-natal depression is 34.7%.
- **Public Awareness Training Program.** This program in Kocaeli, Turkey, began with a series of public meetings arranged in tent cities following the earthquake on 17 August 1999 to focus on interpersonal relations after the disaster. As time passed the subjects of the meetings, and their location, changed. The focus developed into a more general approach to interpersonal relations and the

well-being of families. Characters in popular television series are used as the context for interactive discussion about choices, ways of handling daily issues, reactions to other people, and to events.

The Federation is grateful to Mildred Reynolds, the donor who made its participation in creating the publication possible. Project Officer Deborah Maguire collected the submissions.

**To obtain a copy:** The WFMH-WHO book of case studies can be downloaded from a link on the WFMH web site ([www.wfmh.org](http://www.wfmh.org)). To request a printed copy free of charge, send an email to Dr. Shekhar Saxena at WHO ([saxenas@who.int](mailto:saxenas@who.int)). Dr. Saxena's office can also provide the two WHO summary reports released at the Auckland conference:

- **Prevention of Mental Disorders: Effective Interventions and Policy Options.** Edited by Clemens Hosman, Eva Jané-Llopis and Shekhar Saxena.
- **Promoting Mental Health: Concepts, Emerging Evidence, Practice.** Edited by Helen Herrman, Shekhar Saxena and Rob Moodie.

## Stockholm Event Launches World Mental Health Day Theme

The World Federation for Mental Health hosted a media seminar in Stockholm on 12 October to launch the theme for World Mental Health Day 2004. The media seminar was held in conjunction with the 17th Annual Meeting of the European College of Neuropsychopharmacology. It introduced World Mental Health Day's focus on the relationship between mental and physical health by spotlighting programs and resources that can assist those with a mental disorder to improve their mental and physical well-being.

People with severe mental illness are more likely to have a higher prevalence of certain physical disorders, such as heart disease, hypertension, obesity and diabetes. This population loses between eight and 20 years of life expectancy when compared with the general population. The Stockholm event highlighted four wellness programs that have been developed in different countries to provide resources to people with mental illness and the health care professionals treating them. They included the Well-Being Support Programme in the U.K., Solutions for Wellness in Ireland, and Health4U in the Netherlands. Similar programs are available elsewhere in Europe, in Asia, and in North and South America.

These wellness programs broaden the concept of standard mental health care, recognizing that some people with a mental disorder also need help in dealing with issues such as poor diet, lack of exercise, effects of pharmacology, and the timely management of physical health problems. "Mental and physical health are deeply interdependent and people with major mental disorders need supportive programs that include nutrition counseling, exercise and behavioral interventions to help complement treatments that focus on the disorder," said Preston Garrison, Secretary-General and CEO of WFMH. The media seminar to launch World Mental Health Day 2004 was supported by Eli Lilly and Company.

## WFMH Committee on Responsible Parenthood

The WFMH Committee on Responsible Parenthood sponsored two symposia on "Sex and Sexuality" and a Conversation Hour on "Reproductive Behavior, Responsible Parenthood and Public Policy" at the 28th International Congress of Psychology, 8-13 August, in Beijing, People's Republic of China. These sessions, initiated by Henry P. David, co-chair of the WFMH Committee, attracted numerous colleagues from many countries interested in the mental health aspects of resolving unwanted pregnancies, enhancing responsible parenthood, and coping with HIV/AIDS. The symposia were co-chaired by Dr. Susan Pick, and the Conversation Hour by Dr. David.

The Committee also hosted a dinner in one of the Congress hotels. Those attending included Maan Barry (Yemen), WFMH Board member and President of the Yemeni Mental Health Association; former WFMH Board member Hassan Kassim Khan (Yemen); Susan Pick (Mexico); Ype Poortinga (Netherlands); Nila Kapor Stanulovic (Serbia and Montenegro); Amir Mehryar and Shirin Ahmad-Nia (Iran); and Nancy Russo, Allen Meyer, Tema David and Henry David (USA).



*At the International Congress of Psychology, Beijing (left to right): Maan Barry, Tema and Henry David, and Hassan Kassim Khan.*

## SEVAC's World Mental Health Day Program in India

WFMH President Elect Shona Sturgeon (South Africa) was the guest of honor and opening speaker at a National Seminar in New Delhi on 10 October to mark World Mental Health Day. It was held under the auspices of SEVAC, a WFMH voting member organization working to draw attention to deplorable conditions for mentally ill people in custodial homes and in prisons.

The program was chaired by Mr. Justice Ranganath Misra, former Chief Justice and first Chairperson, National Human Rights Commission of India. Speakers included Mr. P. C. Sharma, member of the National Human Rights Commission, Mr. Justice V. S. Malimath,

former member of the Commission, Prof. Shridhar Sharma, President, World Association of Social Psychiatry; Mr. Ashok Chakravarty, Senior Director of the Commission; Prof. A. Mukherjee; Dr. (Mrs.) P. Sengupta; and Dr. Arnab Banerjee, chief psychiatrist of SEVAC.

On 12 October Mrs. Sturgeon attended a meeting in Mumbai (Bombay) at the Maharashtra State Human Rights Commission with its chairman, Mr. Justice A. D. Mane, and Mr. S. Avate, Inspector General of Police, to discuss the goals of SEVAC's World Mental Health Day program. She was accompanied by Dr. Tapas Kumar Ray, principal convenor of the National Network for Mental Health and Human Rights.

SEVAC's partner organizations held various events throughout India to mark World Mental Health Day.

## Schizophrenia Information Initiative In Europe

WFMH has joined with seventeen pan-European and national mental health advocacy groups to participate in INFORMED (*International Network For Mental Health Education*). As its first activity INFORMED has worked on an initiative which aims to improve access to information about schizophrenia. *Discover the Road Ahead*, a comprehensive and user-friendly handbook for people with this serious but treatable illness, and their families, was launched on 9 October at the 17th Annual Meeting of the European College of Neuropsychopharmacology (ECNP) in Stockholm.

*Discover the Road Ahead* provides information on detecting the early signs of schizophrenia, dealing with diagnosis, and the progression of the condition. It outlines the latest treatments, and support that is available. The handbook was produced by people with first-hand experience of coping with schizophrenia, with contributions also from advocacy groups, health care professionals and university professors. The resource was piloted with people with schizophrenia in the United Kingdom, who reported it to be "different, very much needed, easy to read, open and accurate with useful case studies from a range of ethnic groups."

Rodney Elgie, President of the Global Alliance of Mental Illness Advocacy Networks (GAMIAN-Europe), Europe's biggest umbrella patient organisation in mental health, who is leading the initiative, said: "We know that knowledge is power, and as a person affected by schizophrenia, if you aren't informed about your illness, your access to the latest treatments, rehabilitation and support, accommodation, and employment are severely reduced."

Numerous surveys show that information, and access to it, is a critical aspect in providing good care and

helping people to manage their condition. New data, however, indicated a serious information gap related to this illness. Patients felt that available material was inadequate (too little, or else too complicated). Many carers felt they did not have enough information, and one in four carers said they did not have any at all to help them.

"Access to information on the latest treatments available, particularly those that patients can adhere to, is critical to improving the quality of life for people with schizophrenia so that they can get better and make a contribution to society. *Discover the Road Ahead* is a much needed resource that can deliver this essential information," said Preston Garrison, Secretary-General & CEO, World Federation for Mental Health.

*Discover the Road Ahead* is being made available across Europe free of charge to people with schizophrenia, and to caregivers. For information about ordering the handbook, contact WFMH at [info@wfmh.com](mailto:info@wfmh.com).

### Humanitarian Award

The University of Missouri International Center for Psychosocial Trauma, a WFMH Collaborating Center headed by Dr. Arshad Husain, gives an annual Humanitarian Award to honor an individual for lifetime work helping children and their families in exceptionally difficult circumstances.

This year's recipient is Dr. Leila Dane, Executive Director of the Institute for Victims of Trauma. Dr. Dane has a long record of service to trauma victims and has consulted in many areas of the world as an advocate for human rights and conflict resolution.

Most recently, she was an invited speaker at this year's conference in Rwanda to commemorate the 10-year anniversary of the genocide in that country.

## Are You a WFMH Member?

This number of the Newsletter is going to many friends of the Federation. If you wish to continue receiving it please be sure that your membership is up-to-date. If you are not yet a member, join us now! We need you and you need an NGO (non-governmental organization) accredited as a mental health consultant to the U.N. Fees for individual membership: developed countries, \$35; OECD developing countries, \$15; life member \$500; and library \$35 (U.S.). Your inquiries or check should go to WFMH, P.O. Box 16810, Alexandria, Va. 22302-0810, USA. Telephone (703) 838-7525. Fax: (703) 519-7648. Email: [info@wfmh.com](mailto:info@wfmh.com) Website: [www.wfmh.org](http://www.wfmh.org)

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