



Forum: World Health Organization Committee

Issue: The Question of Accessibility to Mental Health Treatment

INTRODUCTION

Mental disorders are common. According to the World Health Organisation (WHO), over a third of people in most countries report problems at some time in their life which meet criteria for diagnosis of one or more of the common types of mental disorder.

The recognition and understanding of mental health conditions have changed over time and across cultures and there are still variations in definition, assessment and classification, although standard guideline criteria are widely used. In many cases, there appears to be a continuum between mental health and mental illness, making diagnosis complex. Treatment and support for mental disorders is provided in psychiatric hospitals, clinics or any of a diverse range of community mental health services.

Most mental health issues can be treated with a combination of prescription medications and psychotherapy. Antidepressants and anti-anxiety medications can help treat many mental health disorders over a period of time. However, worries are that the access to mental health treatment is far too easy and wide ranged- even to people without the medical diagnosis.

Despite the different conventional names of the drug groups, there may be considerable overlap in the disorders for which they are actually indicated, and there may also be off-label use of medications. There can be problems with adverse effects of medication and adherence to them, and there is also criticism of pharmaceutical marketing and professional conflicts of interest.

In 2013, psychiatrist Allen Frances wrote a paper entitled "The New Crisis of Confidence in Psychiatric Diagnosis", which said that "psychiatric diagnosis still relies exclusively on fallible subjective judgments rather than objective biological tests". Frances was also concerned about "unpredictable over-diagnosis". Boundaries of the definition of illnesses should not be expanded to include personal problems as medical problems or risks of diseases being emphasized to broaden the market for medications. Furthermore, psychiatric diagnosis is unregulated and subjective, therefore doctors are not required to spend much time interviewing patients or to seek a second opinion. Careful consideration needs to be given to the value of treating some cases, especially those at risk for progressing to more serious disorders.

USEFUL LINKS

- <http://apps.who.int/iris/bitstream/10665/254803/1/WHO-MSD-MHP-17.3-eng.pdf>
- <http://apps.who.int/gho/data/node.main.MHPOLFIN?lang=en>
- <http://jamanetwork.com/journals/jamapsychiatry/article-abstract/494730>