

mhGAP operations manual









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PREFACE

Worldwide, mental, neurological and substance use (MNS) conditions impose an enormous global disease burden that leads to premature mortality and affects functioning and the quality of life. MNS conditions account for an estimated 9.5% of disability-adjusted life years and 28.4% of years lived with disability. Left untreated, MNS conditions can result in worse outcomes for commonly co-occurring diseases, such as tuberculosis and cardiovascular disease. Yet mental and physical health conditions are not given equal priority.

People with MNS conditions and their families are also challenged by stigmatization, which reduces social inclusion, limits employment and interferes with help-seeking. Despite its enormous social burden, countries are not prepared to deal with this often-ignored challenge.

Few resources are available for developing and maintaining mental health services in low- and middle-income countries (LMIC). The scarcity and unequal distribution of services means that 76–85% of people with MNS conditions do not receive the care they need; this treatment gap exceeds 90% in many LMIC. The large gap affects not only people with MNS conditions and their families but also economic development, through lost productivity, low participation in labour and increased expenditure on health and social welfare. It is estimated that untreated MNS conditions account for more than 10 billion days of lost work annually – the equivalent of US\$1 trillion per year.

Achieving universal health coverage, including coverage with high-quality services and financial protection for all, is target 3.8 of the Sustainable Development Goals (SDGs). To meet this goal throughout the world, prevention, treatment and care for MNS conditions must be integrated into accessible, effective, affordable services in which the rights and dignity of everyone in the population are respected. The aim of the Comprehensive Mental Health Action Plan 2013–2020 is universal coverage of MNS conditions through the provision of evidence-based, integrated, responsive mental health and social care services in communities. The WHO mental health Gap Action Programme (mhGAP) was initiated to meet the targets of the Action Plan and to bridge the significant gap in mental health services. Properly implemented, the interventions outlined in mhGAP represent "best buys" for any country, with significant returns in terms of health and economic gains.

The objective of this mhGAP operations manual is to support district health managers and others responsible for integrating mental and physical health services. It emphasizes the strengthening of health care systems and workforce capacity. It offers practical guidance on implementation of mhGAP and includes solutions to the barriers facing public health leaders in the form of practical tips, lessons learned from projects in which mhGAP has been used and adaptable implementation tools. The manual is an integral component of the mhGAP package.

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The mhGAP operations manual was prepared under the overall guidance and conceptualization of Shekhar Saxena and Tarun Dua, WHO Department of Mental Health and Substance Abuse.

Project coordination and editing

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WHO headquarters

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