About This Event

2023 Global Mental Health Day: The Next Evolution of Global Mental Health

The 2023 GMH Day will take stock of the field at a critical moment in its development; utilizing an anti-colonial lens informed by the values and principles of equity, diversity, and inclusion (EDI) to examine the application of global lessons to address local challenges as well as to promote a culturally-humble, beneficiary-led approach to the planning and execution of GMH initiatives so as to increase their effectiveness. The event will feature world-renowned field experts, with keynote addresses by Dr. Vikram Patel, The Pershing Square Professor of Global Health in the Blavatnik Institute's Department of Global Health and Social Medicine at Harvard Medical School, USA and Dr. Nusrat Husain, Professor of Psychiatry, Director, Research Global Mental Health at the Division of Psychology and Mental Health, University of Manchester, UK. The 2023 Global Mental Health Day will also feature a discussion panel titled ‘Critical Dialogues in Rethinking Global Mental Health’ with GMH experts sharing their perspectives on opportunities and challenges in the global mental health context as reflected through their varied professional journeys. The event will also include a concurrent session, including a workshop on the UN Convention for Rights of People with Disability (CRPD) - Implications for Mental Health & Psychiatry, and a symposium on GMH and Healthy Families.

Learning Objectives:
By participating in the 2023 GMH Day, attendees will be able to:

1. Identify and describe challenges and opportunities in global mental health (GMH)
2. Describe the evolution of GMH and discuss emerging directions
3. Discuss suicide and suicide prevention from a GMH perspective
4. Identify applications of GMH lessons to local mental health challenges
5. Reflect on EDI principles and other challenging issues embedded in GMH from diverse and critical perspectives
**Keynote #1 (9:00-9:45am EDT)**

**Q&A (9:45-10:00am EDT):**

**Transforming Mental Health Globally**

**Speaker Bio:**

**Dr. Vikram Patel** is The Pershing Square Professor of Global Health at the Harvard Medical School where he leads the Mental Health for All Lab. His work has focused on the burden of mental health problems, their association with social disadvantage, and the use of community resources for their prevention and treatment. He is a co-founder of the Centre for Global Mental Health (at the London School of Hygiene & Tropical Medicine) and Sangath, an Indian NGO which won the MacArthur Foundation’s International Prize and the WHO Public Health Champion of India prize. He is a Fellow of the UK’s Academy of Medical Sciences and member of the US National Academy of Medicine.

He served on the Committee which drafted India’s first National Mental Health Policy and the WHO High Level Independent Commission for Non-Communicable Diseases. He co-led the Lancet Commission on Global Mental Health & Sustainable Development and the Lancet-World Psychiatric Association Commission on Depression; he serves as co-chair of the Lancet Citizens Commission on Reimagining India’s Health System. He has been awarded the Chalmers Medal (Royal Society of Tropical Medicine and Hygiene); the Sarnat Prize (National Academy of Medicine); the Pardes Humanitarian Prize (the Brain and Behaviour Research Foundation); the Klerman Senior Investigator Prize (the Depression and Bipolar Disorder Alliance); an Honorary OBE (UK Government); and the John Dirck Canada Gairdner Award in Global Health. He has been awarded Honorary Doctorates from Georgetown University, York University, Stellenbosch University and the University of Amsterdam. He was listed in TIME Magazine’s 100 most influential persons of the year in 2015.

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**Keynote #2 (10:00-10:45am EDT)**

**Q&A (10:45-11:00am EDT):**

**Suicide Prevention: Epidemiology to Policy Impact**

**Speaker Bio:**

**Dr. Nusrat Husain** is a Professor of Psychiatry and Director of Research Global Mental Health at the University of Manchester and an honorary consultant psychiatrist and Director of Research & Innovation and the Global Centre for Research on Mental Health Inequalities at Mersey Care NHS Foundation Trust. Nusrat’s research interest includes addressing the mental health treatment gap in low and middle-income countries (LMICs) and mental health disparities among ethnic minorities in high-income countries. His multidisciplinary approach promotes international collaborations to create solutions locally, nationally, and globally. He leads various applied research programmes to inform action to reduce self-harm, suicide prevention, and mental health inequalities across the life course, improving outcomes and access to services. He is a firm believer in patient and public involvement and engagement in all areas of his global research and clinical work. With his international collaborators, Nusrat leads applied research on culturally adapted psychosocial therapies and innovative pharmacological treatments for mental illness. Examples of impact include Stanley Medical Research Institute (SMRI) invitation to carry out study of methotrexate in schizophrenia, Simvastatin in bipolar depression, Grand Challenges Canada (GCC) transition to scale parenting intervention Learning Through Play in parental depression and some of the world’s largest therapist delivered trials on suicide prevention.

He is the President of Manchester Medical Society, a past Trustee of Manchester Global Foundation, Abaseen Foundation UK, Pakistan Institute of Living and Learning, Lancashire Mind, and academic consultant with the Center in Africa for Learning and Living (CALL). Nusrat is an executive member of the academic faculty of the Royal College of Psychiatrists and NIHR Senior Investigator.
Panel (11:15am – 12:30pm EDT):

Critical Dialogues in Rethinking GMH

Local and international GMH experts will share their perspectives on opportunities and challenges in the global mental health context as reflected through their varied professional journeys. Panelists will include keynotes Dr. Nusrat Husain, Dr. Vikram Patel, and:

Dr. Dawit Wondimagegn
Clinical Fellow; Department of Psychiatry
Visiting Scholar, Wilson Centre
University of Toronto
Associate Professor, Department of Psychiatry, Addis Ababa University

Dr. Sheila Harms
Associate Professor
Division Head, Division of Education Scholarship, Critical Pedagogy, & Innovation
Global Mental Health - McMUST Partnership Lead, Department of Psychiatry,
McMaster University

Dr. Daisy Singla
Associate Professor,
Department of Psychiatry,
University of Toronto
Concurrent Session #1: Invited Workshop (1:30 – 2:30pm EDT):

UN Convention for Rights of People with Disability (CRPD) - Implications for Mental Health & Psychiatry

In this workshop led by Drs. Samuel Law and Sandy Simpson, participants will learn about the United Nations’ (UN) Convention on the Rights of Persons with Disabilities (CRPD) and its implications on mental health and psychiatry. The CRPD has been a major milestone in promoting the rights of those with disabilities, shifting the view of them as “objects” of charity, medical treatment and social protection, towards that of “subjects” with rights who are entitled to making decisions for their lives based on their free and informed consent, and being an active members of society. Since its launch in 2008, most countries, including Canada and many Pacific Rim nations (except the USA) have signed the CRPD; as of Jan 2023, there are 164 signatories and 186 parties. For people with serious mental illness (SMI), the implementation of the CRPD has been more controversial. In particular, the contention concerns Article 12 of the CRPD, which affirms the equal recognition before the law and legal capacity of persons with disabilities. Accordingly, the UN Committee overseeing the CRPD and other advocacy groups have mandated the replacement of current practices that are considered infringing on the rights of disabled persons. One specific example is having a substitute decision maker (SDM) for psychiatric treatment. This shift from a competence-based – often culturally compatible - approach to a rights-based one has led a large number of countries to place a Reservation on replacing the SDM. The Reservation is based on the concern that people with SMI often may not have the insight and judgement to make the best treatment decisions, placing them in further vulnerable state if without treatment, and having SDM is a necessary compromise on their rights. This workshop discusses data on two perspectives on SDM - one from family member SDM and one from clients who had SDMs. We further discuss comparisons between competence vs. rights-based decision making.
Concurrent Session #2: Symposium (1:30 - 2:30pm EDT)

GMH and Healthy Families

Oral Presentation #1

Title
World Psychiatric Association Curriculum on Violence Against Women

Abstract
The World Psychiatric Association (WPA) represents 145 psychiatric associations in 121 countries, reaching over 250,000 psychiatrists. It provides electronic learning programs on many topics related to mental disorders. This presentation will be on the WPA International Curriculum for Mental Health Providers on Violence Against Women and will focus on intimate partner violence and sexual violence. The curriculum features competency-based learning objectives for mental students, residents, and psychiatrists. It provides electronically linked evidence-based readings, teaching slides, clinical vignettes, and quizzes. It has been translated into Spanish, French, Portuguese, Chinese, Arabic and Russian. The curriculum is frequently used for international symposia, workshops and to develop position papers.

Presenter
Donna Stewart

Learning Objectives
By the end of the presentation, participants will be able to:
1. Identify evidence-based teaching and practice resources for patients who have experienced intimate partner violence
2. Identify evidence-based teaching and practice resources for patients who have experienced sexual violence

References
Oral Presentation #2

Title
Depression, Anxiety symptoms, and their Social Correlates in Adolescent Girls and Boys from Rural Pakistan: A starting point for developing tailored intervention strategies in the community

Abstract
Background: Pakistan has one of the world's largest adolescent populations. However, evidence regarding the prevalence of depressive and anxiety disorders and the identification of the most vulnerable subgroups is still scarce, especially among those living in rural areas.
Objective: Our study aimed to estimate the prevalence of depressive and anxiety symptoms and their correlates in a community-based sample of adolescents living in the rural district of Matiari, Pakistan.
Methods: We used cross-sectional data from 718 girls (9.0-14.9 years) and 678 boys (10.0-15.9 years) participating in the Nash-wo-Numa Study. The Sindhi versions of the Short Mood and Feeling Questionnaire and the Screen for Child Anxiety Emotional Disorders were administered by psychologists to assess adolescents’ depressive and anxiety symptoms. Prevalence estimates and bootstrapped 95% confidence intervals were derived based on validated cut-off scores. Social correlates of depressive and anxiety symptoms were identified using multivariable negative binomial regressions.
Results: Approximately 8% of boys and 10% of girls exhibited significant depressive symptoms. Anxiety disorders were highly prevalent in both boys and girls, ranging from respectively 6% and 8% for generalized anxiety disorder to 24% to 39% for separation anxiety disorder. Depression, panic and somatic disorders and generalized anxiety disorders were more prevalent in girls than in boys at age 12. Separation anxiety and social anxiety were more prevalent in girls starting from age 11 and 12 respectively. In both sex groups, depressive and anxiety symptoms were negatively associated with having a stay-at-home mother and positively associated with intimate partner violence towards mothers and household food insecurity. Mother mental health well-being buffered the association of food insecurity with depressive symptoms in girls.
Conclusion: Acting on intimate partner violence against mothers, food insecurity and mothers’ mental health might help in preventing and reducing depressive and anxiety symptoms in adolescents living in rural areas in Pakistan.

Presenter
Florence Perquier

Learning Objectives
By the end of the presentation, participants will be able to:
1. Identify population’s subgroups which might be more vulnerable to depressive and anxiety symptoms in rural districts of Pakistan
2. Discuss the strengths and limits of results from epidemiological studies conducted in low and middle income countries

References
Oral Presentation #3

Title
A group parenting intervention for depressed fathers of young children in Pakistan: A cluster randomised controlled trial

Abstract

Background: Paternal depression, frequently experienced by fathers negatively influences parental and child well-being and attachment. However, evidence for improving paternal depression is scarce in low-income settings. This study aimed at evaluating the effects of parenting intervention on paternal and child health outcomes.

Methods: A cluster randomized controlled trial was conducted in two local towns of Karachi, Pakistan. A total 357 fathers, age ≥18 years, with a child age <30 months, and having a diagnosis of depression were recruited and randomized into Learning Through Play Plus (LTP + Dads) intervention or Treatment as Usual (TAU) arm. The intervention was delivered by community health workers through twelve group sessions over 4 months. Follow-up were completed at 4th and 6th month.

Findings: Participants were recruited between June 2018 to March 2019 and randomized to LTP + Dads intervention (n=171) and TAU (n=186) arm. Findings demonstrated a statistically significant difference on depression (95% CI 0.47-0.91, \(P<0.001\)), anxiety (0.48-0.81, \(P<0.001\)), social support (0.1-1.1, \(P=0.03\)), dyadic adjustment (3.2-8.2, \(P<0.001\)), parenting stress (4.9-1.6, \(P<0.001\)), health related quality (0.17-0.34, \(P<0.001\)), violence (0.80-1.00, \(P=0.05\)), total disability scores (0.61-0.97, \(P=0.03\)), knowledge and practices (1.3-3.4, \(P<0.001\)) of child development, and home environment (1.6-6.4, \(P=0.001\)) between groups at 4th month, however this difference was only sustained for depression and parenting stress at 6 months. Further, no statistically significant difference was found on self-esteem (0.6-1.0, \(P=0.68\)) either 4 or 6 months, and diarrhoeal episodes and chest infection in children at 6 months (0.48, 5.93, \(P<0.42\)).

Interpretation: Addressing depression in parents is hugely important due to adverse effect for parents and child. This low-cost parenting program has the potential to improve parental and child health outcomes and may help in scaling up the innovation in low resource settings.

Presenter
Ishrat Husain

Learning Objectives

By the end of the presentation, participants will be able to:

1. Provide an overview on the burden of parental depression in low resource settings
2. Summarize implications of parental depression on socio-emotional development of children
3. Discuss strategies for addressing paternal depression in low resource settings

References

About the GMH Program

The Department of Psychiatry’s Global Mental Health (GMH) Program furthers the department’s global impact by facilitating equitable collaboration and knowledge exchange in research, education, and development initiatives between faculty members, trainees, international academics, clinicians, health practitioners, and community members. Through its initiatives, the GMH Program aims to promote equitable access to quality mental health care around the world for underserviced and marginalized populations worldwide. The program is led by Dr. Kenneth Fung, Staff Psychiatrist and Clinical Director of the Asian Initiative in Mental Health Program at the Toronto Western Hospital, University Health Network, and Professor at the Department of Psychiatry, University of Toronto.

The program is supported by the Global Mental Health (GMH) Advisory Group, comprised of Department of Psychiatry faculty members Wendy Chow and Drs. Lisa Andermann, Alan Fung, Ishrat Husain, Samuel Law, Farooq Naeem, Clare Pain, Arun Ravindran, and Daisy Singla, as well as Department of Psychiatry residents Drs. Anthony Maher & Siqi Xue. To learn more about the program, visit: psychiatry.utoronto.ca/global-mental-health