Summary report on the
Expert consultation on mental health in primary health care: finalization of the guidance package for the integration of mental health into primary health care

Cairo, Egypt
19–20 September 2017
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Contents

1. Introduction ......................................................................................... 1
2. Summary of discussions .................................................................. 3
3. Recommendations .......................................................................... 5
1. Introduction

Over the last decade, the World Health Organization (WHO) has launched its flagship Mental Health Gap Action Programme (mhGAP) to scale up care for mental, neurological and substance misuse disorders, and the Comprehensive mental health action plan 2013–2020 adopted by the World Health Assembly in May 2013 provides the roadmap for developing community-oriented mental health services. The Regional framework to scale up action on mental health in the Eastern Mediterranean Region implements the provisions of the Comprehensive mental health action plan by identifying concrete strategic interventions through a set of intermediate indicators that can be used to monitor progress towards the targets set for 2020.

One of the key strategic interventions identified in the regional framework is the integration of a mental health component into primary health care. Although this intervention has been on the agenda for over 30 years, and despite the fact that countries in the Region have pioneered the integration process, to date, only a few countries have made tangible progress at the national level, while the majority of countries have found it difficult to transition from local, time-limited projects to scaled-up sustainable integration.

Recent developments like the inclusion of mental health and substance abuse-related targets and indicators in the 2030 Agenda for Sustainable Development, and the identification of a core package of mental health interventions by the Disease control priorities project have provided additional impetus to this effort.

The Regional Office for the Eastern Mediterranean has therefore taken the lead in developing a guidance package to support countries in integrating mental health interventions into their primary health care
systems based on health system building blocks and the universal health coverage approach. In addition, in view of the crisis and emergency situations prevailing in a substantial number of countries in the Region, the package includes a special section on providing integrated mental health and psychosocial support services in countries in crisis and emergency situations. This presents an opportunity to not only set up robust mental health and psychosocial support systems during the response phase, but also to build inclusive and resilient health systems.

The expert consultation, which was held at the Regional Office in Cairo on 19 and 20 September 2017, was jointly organized by the Regional Office departments of Noncommunicable Diseases and Mental Health, and Health System Development, and involved both regional and international experts in public mental health and health system development. The objectives of the expert consultation were to review the draft guidance package to facilitate countries in the Region to introduce and/or strengthen the integration of mental health interventions in primary health care, and to identify the potential entry points for the integration of mental health interventions in primary health care in both stable and humanitarian emergency settings.

In his opening address to the consultation, Dr Mahmoud Fikri, WHO Regional Director for the Eastern Mediterranean, noted the high burden of mental health disorders, primarily severe depression and anxiety, in countries of the Region, which was attributable to the ongoing regional humanitarian emergencies. In this context, this initiative was therefore both timely and very much in line with the Comprehensive mental health action plan and the regional framework.
2. Summary of discussions

The guidance package needs to be structured more explicitly in accordance with the 2030 Agenda for Sustainable Development; in order to achieve sustainable development goal 3.8: Achieve universal health coverage, the integration of a core package of mental health interventions into primary health care is needed. Focusing on the issue in this way would help provide both the overarching structure and the narrative thread to bring the individual modules together.

Governance should be given more prominence in the package, not only as an individual health system building block underpinning the process of integration, but also within each of the other sections of the package dealing with other health system building blocks. This would also allow for the sections on advocacy and collaborative plans to be addressed within the section on governance.

In order to help national planners and implementers, it would be helpful to add more case examples from countries of the Region and beyond which highlight the processes and mechanisms facilitating sustainable integration of mental health interventions in primary health care, as well as the challenges encountered in the process.

The section of the package on the context of the integration of mental health services in primary health care needs to provide a strong case for investment in integration. This would offer evidence of better health outcomes and return on investment, and information on the financial and opportunity costs of failing to do so. Placing an emphasis on the integration of mental health services within primary health care would also provide many more opportunities to engage in actions aimed at preventing mental health disorders and promoting mental health.
It would be helpful to add a section on health system status and emergencies, not only in the module on the context of the integration of mental health services in primary health care but also in each of the building blocks, in order to provide an overview of the regional situation, and available resources. This would assist in the integration of mental health in primary health care across the continuum of development and emergency settings in Modules 2, 3 and 4 of the package.

The issue of engagement with the private sector in the delivery of mental health services needs to be addressed in all the sections of the package.

The sections of the package on human resources need to address the issues of job advertising, recruitment, staff retention, and the deployment of a health workforce which has the necessary skills to deliver holistic mental health care at all levels of care, including self-care and self-help.

It is essential to specifically highlight the need to strengthen the mental health component of the pre-service training programmes of health personnel, the training programmes of family physicians, and in-service training and supervision, in the context of the core package of interventions to be delivered through primary health care.

The module on monitoring and evaluation needs to be strengthened to provide concrete and actionable guidance; specifically, the number of recommended indicators needs to be rationalized, possibly by identifying core indicators and optional indicators for country use.
3. **Recommendations**

*To WHO*

1. Support Member States in adapting and tailoring the package to local systems to facilitate the process of integration of mental health interventions in primary health care.
2. Develop a short executive summary document to be circulated to all the members of the group no later than three weeks after the expert consultation. This should be available in printed form, while the rest of the package should be made available as an e-document, including hyperlinks to tools, resources and references.
3. Review and modify the four modules of the package in light of the comments made during the consultation by the end of 2017.
4. Improve the navigability of the package and develop single-page policy briefs around individual themes targeting policy-makers, managers in the public and private sectors and nongovernmental organizations, and consumers and families.
5. Organize a regional meeting in the first half of 2018 to secure the consensus of all countries of the Region, possibly with representation from other WHO regions and global partners, and explore the possibility of including the integration of mental health interventions in primary health care as an agenda item at the Sixty-fifth Session of the Regional Committee in 2018.