

First Quarter 2003



WORLD FEDERATION FOR MENTAL HEALTH

Fédération Mondiale pour la Santé Mentale

NEWSLETTER

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WFMH Congress in Melbourne

Considering the difficult international times, the WFMH Congress in Melbourne, Australia, on 21-26 February did well to attract 500 people from around the world. By early in the year people were discouraged from traveling by the imminence of war in the Middle East, and regionally the Bali bombing in October 2002 also contributed to a downturn in travel. Nevertheless a hardy contingent booked their flights and the organizers reported that 47 countries were represented.

As expected, there were many people from Australia and New Zealand, and also the United States. However registrations were also received from Sweden, Mongolia, Jamaica, the United Arab Emirates, Iran, Brazil,

Iceland, Israel, Ghana, Nigeria, Norway, South Korea, Canada, Russia, Ireland, Finland, Taiwan, South Africa, Japan, The Netherlands, Switzerland, etcetera. . . . In other words, there was a very satisfactory mixture of backgrounds, viewpoints and ideas.

A Strong Program

Despite the inauspicious circumstances, the organizers carried off an excellent meeting with many high spots. The program was arranged around the theme "Partnerships in Health" and five expansive sub-themes (research and development; economy, productivity, education and information; quality of life and psychiatric disability; age and gender; and multicultural and indigenous mental health).

Participants commented on the strength of the plenary sessions and the great variety of workshop sessions. Dr. Shekhar Saxena, Coordinator for Mental Health Evidence and Research at the World Health Organization, drew attention in the opening plenary to new initiatives in the promotion of mental health and prevention of mental and behavioral disorders. This was an appropriate note on which to start the meeting, as Australia is considered one of the leaders in this rapidly growing field. Later two Australians who have played a major role in establishing this reputation, Professors Helen Herrman and Beverley Raphael, gave detailed reviews of current developments.

(continued on page 3)



The WFMH Board of Directors after the Membership Assembly in Melbourne on 24 February (left to right): top row – Richard Studer, Regina deJesus, Shona Sturgeon, Tony Fowke, Chueh Chang, Janet Paleo, Peter McGeorge, Virginia Gonzalez Torres, Beverly Long; bottom row – Deborah Wan, Elizabeth Matare, Patt Franciosi, Janet Meagher, Pirkko Lahti, Maan Barry.

Message from the President

Dear Friends,

As I write this first President's column to you my initial thoughts are of the awesome challenge that we have as members of the world's oldest and largest international advocacy movement for mental health. We live in a global society that has been deeply impacted by the political and economic uncertainty of the times. People in all parts of our world are facing stressors associated with violence, rapid social change and dwindling resources.

This is an important time for us to remember the early history of the Federation and to draw from our founding document, *MENTAL HEALTH AND WORLD CITIZENSHIP*, a sense of direction and renewed purpose for our work. The World Federation was founded in the aftermath of one of the most traumatic conflicts in history, World War II. Our founders spoke of our human family and our interdependence on each other. Imbedded in the original concept of the Federation was respect and caring for all people and the idea that positive mental health cannot be achieved in the face of hostility and conflict.

In these troubling times the World Federation must remain true to its mission: "to promote among all people and nations, the highest possible level of mental health in its broadest biological, medical, educational and social aspects." Now more than ever our organization should be proactive in the expression of civil society's concern for global mental health.

I would like to encourage you to continue to promote our World Mental Health Day 2002 international education campaign on "The Effects of Violence and Trauma on Children and Adolescents." We need to keep these messages alive and continue to raise awareness of the potential for severe psychological harm done to children when they are forced to live in an environment of fear and violence. A message from the Global Mental Health Movement contained in

the World Mental Health Day 2002 materials stated: *"No child ever started a war yet every time a war breaks out, children, as the most vulnerable members of society, suffer the worst. They are forced to live in fear and to give up their education. Some lose their lives; some lose family members. All lose their innocence."*

Our greatest strength as a worldwide society is when we come together as a human family engaged in effective problem solving for the betterment of all people.

Our Biennial World Congress in Melbourne was such an opportunity. People from all parts of the world traveled under difficult circumstances to learn from each other and to share concerns and successes. The theme of the conference was "Partnerships in Health." I must commend the vision of the organizing committee for the selection of this title. The placement of mental health in the mainstream of a health agenda was a constant message throughout the conference and the phrase "no health without mental health" was often echoed. Participants from nearly 50 countries heard from leading scientists, consumers, mental health providers and government officials about recent advances in the mental health field and the paucity of resources available to meet the growing need.

The Congress Organizing Committee, chaired by Professor Graham Burrows, and the Mental Health Foundation of Australia, led by Megan McQueenie, together with many others involved in the conference, are to be congratulated for the excellent program and the wonderful hospitality of our host country.

I send to all of you my prayers and hopes for a time of peace.



L. Patt Franciosi, PhD
President

Remember, "IN TIME OF STRESS AND CONFLICT, DON'T FORGET THE CHILDREN."



(continued from page 1)

Attention to women's health issues (often a neglected area) was consistent throughout the program and attracted very favorable comment. The well-attended Margaret Mead Lecture was given by Prof. Donna Stewart of the University of Toronto, Canada, on the topic of "Global Initiatives to Improve Women's Mental Health." The daily themes covered broad areas of research and many social issues. Workshops were numerous and it was hard for those attending to choose among the concurrent sessions offered. On the last day the organizers kept up the momentum of serious discussion by turning the focus to suicide prevention instead of opting for a "soft" topic as the meeting moved to a close.

The interest of the national and state host governments was evident at the opening of the Congress, which was attended by the Governor General of Australia, the Reverend Dr. Peter Hollingsworth. Speakers at the opening ceremony also included the Minister of Health for the State of Victoria, Bronwyn Pike, and the Commonwealth Minister for Health and Ageing, Kay Patterson. To the pleasure of the WFMH Board, the organizers made a point of welcoming as an honored guest Alan Stoller, the only WFMH President to come from Australia (he held the office in 1964-1965).

During the conference various groups associated with WFMH held informal meetings, taking advantage of



At the Congress:
Kazuyoshi Yamamoto
(Japan), WFMH Regional
Vice President for the
Western Pacific, and
Elizabeth Matare
(Zimbabwe), Regional Vice
President for Africa.

this biennial gathering of members. Of particular note, the WFMH Regions held small meetings to bring together members scattered over wide distances who are rarely able to come together.

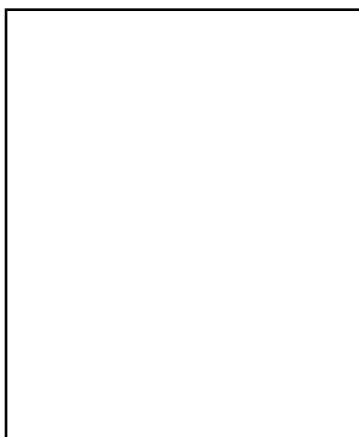
The Organizing Committee chaired by Professor Graham Burrows deserves special respect for its management of this meeting at such a difficult time, which caused many unanticipated problems and adjustments to the planned program. Megan McQueenie, Executive Director of the host organization, the Mental Health Foundation of Australia, held together the administrative strands over several years and has earned congratulations and a well-deserved rest.

Input from WFMH Collaborating Centers

At the suggestion of the Australian Organizing Committee, a special session to highlight the work of the Federation's Collaborating Centers was placed on the program before the opening ceremony. It attracted considerable interest, providing an opportunity for Congress participants to learn about the work of four of these Cen-

ters. A number of people stayed on for 45 minutes past the allotted time to engage in informal discussion.

The four Collaborating Center representatives who participated were Prof. Brian Robertson from South Africa (the Department of Psychiatry at Cape Town University), Prof. Lorraine Dennerstein (the Office for Gender and Health at Melbourne University), Jorge Aroche, director of STARTTS (the Service for the Treatment and Rehabilitation of Torture Survivors in New South Wales), and Prof. John Copeland (the Institute for Human Ageing at the University of Liverpool, England). Mariano Coello from STARTTS was also present. Board member Max Abbott, Dean of the Faculty of Health at Auckland University of Technology in New Zealand, was the moderator.



Prof. Graham Burrows, AO, KCSJ, MD
Chair of the Congress Organizing
Committee



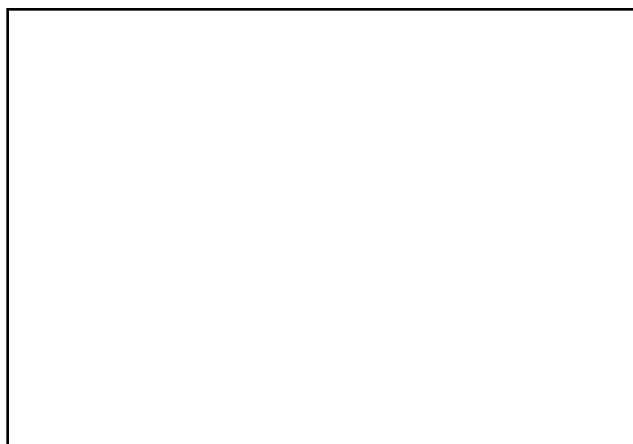
Consumers in Melbourne

Through the efforts of WFMH Board member Janet Meagher, Director of Administration Deborah Maguire, and two Eli Lilly representatives, Tracey Pilatti (Australia) and Megan Pace (USA), a small group of consumers and family carers from developing countries were able to attend the Congress.

The consumers and carers who attended under this special opportunity came from Brazil (Angelika Heuchert and Adriano Camargo), Mexico (Virginia Gonzalez Torres), South Africa (Julia Zacharis), Sri Lanka (Chintha Munasinghe), Zambia (Sylvester Katontuka) and Zimbabwe (John Mangombe). In addition eight consumers from the United States were supported by a grant from the U.S. Center for Mental Health Services. The conference organizers made a room available for consumers as a gathering place for networking, and to enable them to get information easily about program sessions of special interest.

Adriano Camargo (Brazil) reported that his favorite sessions included the plenary by Professor Beverley Raphael on violence and prevention, and the presentation by Dr. John Connolly (Ireland) on the prevention of suicide. In response to a question about the most challenging aspects of the Congress, he wrote about the theme of partnerships in health: "We could get in touch with a lot of good ideas and good projects that have been developing around the world. The majority of the project managers are able to cooperate with developing countries, but in our country, Brazil, we have economic difficulties to fund these projects. So we think that the challenge, not only for the Congress but also for WFMH is to help to implement these good ideas and projects around the world."

The session Chintha Munasinghe (Sri Lanka) enjoyed most was a keynote address on "Multicultural and Indigenous Populations in Developed and Developing Countries, Multicultural and Indigenous Mental Health" given by Elizabeth Matare, the Director of the Zimbabwe National Association of



WFMH Board members, consumers and carers at the Congress (left to right): back row, John Nangombe, Virginia Gonzalez Torres, Sylvester Katontuka, Adriano Camargo, Tony Fowke; front row, Janet Meagher, Julia Zacharis, Angelika Heuchert, Chintha Munasinghe.

Mental Health. Ms. Munasinghe particularly liked its holistic approach to the social integration of people with mental illness.

Sylvester Katontoka (Zambia) said his favorite session was one from Australia on "A Carer, Consumer, Government, Business Partnership Model with Real Outcomes." He wrote "it was able to put me in their shoes and flowed together as we also face the same challenges. . . . It was really a motivator – it hammered my heart. It is still giving me sleepless nights desiring just to embark on the same."

Board Meetings

The WFMH Board of Directors met in Melbourne before and after the Congress. The terms of some of its members ended at the pre-Congress meeting on 20 February. The Federation is sincerely grateful for their work, and thanks Max Abbott (New Zealand), Basheer Al-Rashidi (Kuwait), Sylvia Caras (United States), John Copeland (United Kingdom), Hani Mohammed Abdel Khalek (Egypt), Agustin Ozamiz (Spain), Art-Jan Vrijlandt (The Netherlands), Federico Puente (Mexico), and Kristina Salonen (Finland) for their service to the Board.

At the pre- and post-Congress Board meeting new opportunities for collaboration with the World Health Organization were discussed. Dr. Shekhar Saxena, Coordinator for Mental Health Evidence and Research in WHO's Department of Mental Health and Substance Dependence, came to the

meeting on 27 February to make a presentation about these proposals. The first is for a survey to gain information about human rights with regard to mental health services and policies. This would be used to compile material for a companion report to WHO's Mental Health *Atlas* published in 2001. The second is a project to collect case studies of effective mental health promotion programs around the world. This may lead to the publication of a joint WHO/WFMH document describing the programs.

The Board approved the designation by Dr. Stanislas Flache, its long-time UN representative in Geneva, of Mrs. Myrna Merrit Lachenal as an additional representative to the World Health Organization and the UN Office in Geneva. Mrs. Lachenal received two degrees in nursing in the Philippines; has held supervisory nursing positions there, and also in Laos and in Switzerland; and has wide experience as an NGO representative in Geneva. She has represented WFMH at numerous meetings there.

The Board also approved the appointment of John Copeland as the new Chair of World Mental Health Day, replacing Patt Franciosi. Max Abbott was appointed as the coordinator of the Federation's relationship with its Collaborating Centers.

The agenda included a review of financial information and various Congress matters. An application for voting membership from the Taiwan Association of Clinical Psychology was accepted.

T H A N K Y O U

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WFMH thanks its major contributors, whose grants and donations gave vital support to the Federation's work in the past year. You made our special projects possible, and encouraged our efforts with your commitment.

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The World Federation would like to express its sincere gratitude to those who contributed to the 2002 year-end appeal. Your dedication to the WFMH and the issues of global mental health are one of our most important assets. We thank you for your generosity.

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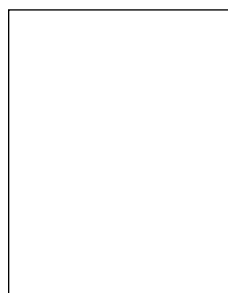
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The World Federation Mental Health Board 2003–2005 Elected in Melbourne

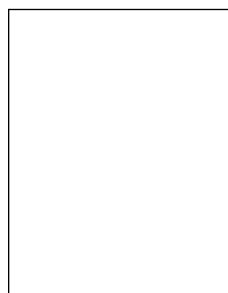
OFFICERS



Patt Franciosi, WFMH President 2003-2005, has served as President of the National Mental Health Association in the United States, and Chair of the U.S.

National Preven-

tion Coalition. She has received two Presidential appointments: one to the National Institute for Mental Health Advisory Council, and the other to the United States Health and Human Services Secretary's Council on Promotion and Disease Prevention. She has received numerous awards for her mental health advocacy work, particularly in the area of children's mental health. In 1990 she mobilized a national effort for improved care and treatment of children with mental and emotional problems, which resulted in substantial increases in government funding for research and services for children. She has worked as a psychologist with young adults at Marquette University. She joined the WFMH Board of Directors in 1995.



President Elect Shona Sturgeon is the Senior Lecturer in the Department of Social Development at the University of Cape Town, South Africa. She is also National

President of the South African Federation for Mental Health, Chairperson of the Cape Mental Health Society, Vice President of the Family and Marriage Society of South Africa, Director of St. Luke's Hospice, and an executive committee member of the Parents' Center. Mrs. Sturgeon has a particular interest in empowerment, diversity and cross-cultural issues.

Immediate Past President Pirkko Lahti is the Executive Director of the Finnish Mental Health Association, which delivers a comprehensive program of services in all parts of Finland. She was President of WFMH from 2001 to 2003, and also served as interim Secretary General. She has been active with Mental Health Europe since 1984, and was its President from 1997 to 1999.

Treasurer Edward Pennington is General Director of the National Office of the Canadian Mental Health Association. He is Co-chair of the Executive Board of the Health Charities Council of Canada, 2002-2003, and former treasurer of the National Voluntary Organizations of Canada. He was WFMH Regional Vice President for North America in 1999-2003.

Honorary Secretary Janet Meagher is the Manager of Research and Rehabilitation Services for the Psychiatric Rehabilitation Association in Australia; Consumer Chairperson of the National Consumer & Carer Forum; and Patron (and a founding member) of the Australian Mental Health Consumers Network. She is the author of "Partnership or Pretence," a book on consumers' participation.

BOARD MEMBERS AT LARGE

Paulo Alterwain, a psychiatrist and psychotherapist, has served as Uruguay's Director of the National Mental Health Program since 1987. He has also been President of the National Committee for Disability, and an Associate Professor at the School of Nursing run by the Ministry of Public Health. He was WFMH Regional Vice President for South America from 1999 to 2003.

Maan A. Barry, a psychologist, was head of the Department of Behavioral Sciences in the Department of Medicine at Aden University, Yemen, from 1999 to 2001. In 2001-2003 he was WFMH Regional Vice President for the Eastern Mediterranean. He served as Secretary General of the Yemeni Psychological Association in 1990-1993, and President of the Yemeni Mental Health Association in 1998.

Chueh Chang is President of the Mental Health Association in Taiwan, and an Associate Professor in the Institute of Health Policy & Management at the National Taiwan University. She is a Board member of the R.O.C. Consumers Foundation. She has organized many international conferences in Taiwan focusing on consumers' and carers' concerns, women's issues, and workplace mental health.

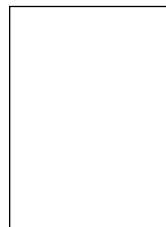
Anthony Fowke is a Vice President of the Australian National Association for Mental Health; a lawyer member of the West Australian Mental Health Review Board; and Carer Chairperson (Co-chair with fellow Board member Janet Meagher) of the Australian National Consumer and Carer Forum under the auspices of the Mental Health Council of Australia.

Brian Howard is Chief Executive Officer of Mental Health Ireland, the country's largest voluntary body representing the interests of persons with psychiatric disorders. It is also actively engaged in the promotion of positive mental health. Previously, Mr. Howard worked in the Government Department of Health and Children, where he had responsibilities for the development of community care and for new mental health legislation.

Beverly Long was WFMH President in 1995-97 and is currently chair of the Federation's International Consortium on Prevention. She has served as President of the U.S. National Mental Health Association (1979-80), and chaired the National Commission on the Prevention of Mental and Emotional Disabilities from 1983 to 1995. Earlier, she was a member of President Jimmy Carter's Commission on Mental Health.

Janet Paleo is the Chair of the Consumer Council of the National Alliance for the Mentally Ill (NAMI) in the USA. In addition, she is Chair of the NAMI Texas Consumer Council, and Consumer Director of the NAMI Texas Board of Directors. She is a member of the Citizens Planning Advisory Committee, and of the Mental Health Task Force, Texas Department of Mental Health and Mental Retardation.

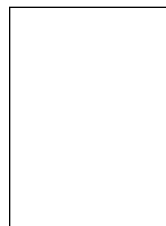
Richard Studer has spent 40 years in the business world of mental health and the pharmaceutical industry. He is on the Board of Directors of the Depression and Bipolar Support Alliance in the United States, and has served on the Board of the Anxiety Disorders Association of America. For several years he has provided pro bono consultation services to WFMH.



Deborah Wan has been Chief Executive of the New Life Psychiatric Rehabilitation Association in Hong Kong since 1981. She is also Rehabilitation International's Chair of the Commission on Work and Employment (Asia & Pacific Region), and the Hong Kong representative to the Asian/Pacific Network of Work Centers for Disabled Persons.

REGIONAL VICE PRESIDENTS

Africa

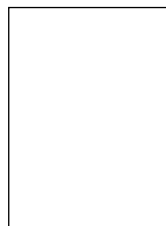


Elizabeth Matare is the Director of the Zimbabwe Mental Health Association; Honorary Secretary of the WFMH African Regional Council for Mental Health; an executive member of her country's National Association for Non-Governmental Organizations; and Vice-Chairperson of the National Association of Societies for the Care of the Handicapped. She has been appointed to the Zimbabwe Private Voluntary Organization Board, which is responsible for registering and monitoring welfare organizations.

Eastern Mediterranean

Ahmed Abou El Azayem was the WFMH President in 1999-2001, and is Director of the Abou El-Azayem Psychiatric Hospital. He is a member of Egypt's Presidential Committee for Health, and received an award from the Minister of Health in 2000 for his services to the country's health policy development. He is the President of the WFMH Eastern Mediterranean Regional Council, and active with several mental health organizations in Egypt.

Europe



Leo deGraaf is the current President of Mental Health Europe. A psychiatrist, he became one of the Directors of De Gelderse Roos in The Netherlands in 1990. He has served as a Representative in the Provincial Parliament of Gelderland. He took early retirement last year, but continues to do work with delinquent juveniles.

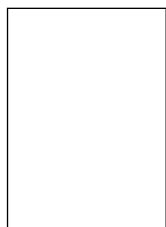
Mexico & Central America

In 1980 **Virginia Gonzalez Torres** helped to establish the Mexican Foundation for the Rehabilitation of People with Mental Illness. She was the first person to hold a new Health Ministry position as director of Psychosocial Rehabilitation, Citizens' Participation, and Human Rights. Currently, she works in partnership with the governments of various states in Mexico to implement the Modelo Hidalgo for Mental Health project, a program established through federal legislation to provide a quality network of services to consumers.

North America & Caribbean

Cynthia Waincott is the Chair Elect of the National Mental Health Association in the USA. She was the Executive Director of the National Mental Health Association of Georgia from 1990 to 2001. She was also a founding member and Chair from 1999 to 2001 of the Georgia Prevention Credentialing Consortium. She is the Secretary of the Center for Mental Health Services' National Mental Health Advisory Council.

Oceania



Peter McGeorge is a psychiatrist and Director of Mental Health Services for the Capital and Coast District Health Board in Wellington, New Zealand. He is the past Chair of the New Zealand Mental Health Foundation, an umbrella NGO that focuses on mental health promotion. He has also chaired the Youth Horizons Trust, an NGO specializing in the delivery of programs for young people with conduct disorder.

South America

Miguel R. Jorge is Associate Professor and Head of the Clinical Psychiatry Section at Paulista School of Medicine, Federal University of Sao Paulo, Brazil. He was President of the Brazilian Association of Psychiatry from 1996 to 2001, and has worked closely with the Pan American Health Organization on many issues.

Southeast Asia

Regina de Jesus has served as National Executive Director of the Philippine Mental Health Association for the past fourteen years, and has been engaged in developing work programs for disadvantaged people. She is a psychiatric social worker by profession, and serves on the Board of the Philippine Council for NGO Certification. She is also a Board member and past president of the Community Craft Association of the Philippines.

Western Pacific



Kazuyoshi Yamamoto is a senior psychiatrist in the Department of Neuropsychiatry of Ryukyu University Hospital, and an Assistant Professor in Community Psychiatry and Social Psychiatry at the University of the Ryukyus. Dr. Yamamoto is the Secretary General of the Ryukyu Asia-Pacific Medical Exchange Association, and a Board member of both the Japanese Society of Transcultural Psychiatry and the Japanese Society of Social Psychiatry.

Honor for Tony Fowke

Board member Tony Fowke received one of Australia's highest honors on the country's National Day in January. He was appointed a "Member of the Order of Australia," a highly esteemed award given by the government in recognition of exceptional contributions to the community. Tony's award was given for his work to improve standards of mental health care, and to foster collaboration by consumers and carers to press for improvements in care. In addition to his commitments at the national level he is very active in organizations in Western Australia.

MENTAL HEALTH, WORLD CITIZENSHIP AND HUMAN RIGHTS

Comments from former Secretary General Eugene B. Brody, M.D.

Our Federation's founding document, "Mental Health and World Citizenship," reflected the hope and idealism of the years just following World War II. Proclaimed on August 21, 1948, it was permeated by the same philosophy which imbued the new United Nations' Universal Declaration of Human Rights issued on December 10 of the same year. It committed the new Federation to a goal not defined in political terms, but rather in terms of a powerful set of global values intended to guide its subsequent actions. Thus, "world citizenship" was conceived in terms of a "common humanity" respecting individual and cultural differences. It implicitly rejected the totalitarian ideals which, in the very recent past, had punished such differences. For the clinicians and social scientists who formulated the WFMH document, it followed naturally that "the goal of mental health is to help [people] live with their fellows in one world."

That goal with its associated values was granted special emphasis by Morris Carstairs, who, between 1968 and 1972, served the Federation as its first "working president" (with the combined functions of president and secretary general), and supported its headquarters in his office as professor of psychiatry at Edinburgh University. Morris, as I soon came to know him, was a passionate advocate for human rights and believed that the only justification for an international non-governmental organization such as WFMH was for it to take positions in defense of what it considered just and right. In 1971, under his leadership, the WFMH Board meeting in Hong Kong directed WFMH to take an uncompromising stand against the totalitarian exploitation of psychiatry in the Soviet Union and elsewhere. It was the first major international organization in the field to do so. The Board specifically noted "the alleged incarceration of political dissenters in prison hospitals in the USSR." In so doing it defended the ideal of respect for individual, including political, differences and endorsed every

individual's right to enjoy freedom of conscience as stated in the UN's Universal Declaration of Human Rights. It called upon the Federation's "Member Associations throughout the world promptly to investigate all such allegations and to defend the individual's freedom of opinion where it appears to be threatened."

Political Abuse of Psychiatry

Over the years between 1972 and 1981 under the working presidencies of Michael Beaubrun and Tsung-yi Lin, housed in their respective offices at the University of the West Indies and the University of British Columbia, the Board remained alert to the issue of freedom of conscience and expression, and issued several additional condemnations of the abuse of psychiatry. Although these contributed to the growth of UN attention to the issue of patients' rights, it was not until 1983 that direct action regarding the political abuse of psychiatry was instituted by the World Psychiatric Association (WPA), which threatened its Soviet members with expulsion. The Russians withdrew from the WPA before expulsion could take place and were not readmitted until 1989 when hundreds of confined dissidents were released from forcible confinement in mental hospitals.

Concern For Human Rights

In 1981-1983 WFMH contributed significantly to the formation of a UN Working Group of the Subcommittee on Discrimination and Protection of Minorities on behalf of its parent agency, the Commission on Human Rights. Beginning in 1985 it was a major contributor to the work of UNESCO and the International Social Science Council as they formulated positions eventually appearing in a 1993 volume on *Biomedical Technology and Human Rights* under their joint imprimatur with WFMH. It contributed significantly to the UN Declaration of Basic Principles of Justice for Victims of Crime and Abuse of Power which was passed by the General Assembly in November 1985. This declaration speci-

fied the right of international non-governmental organizations to enter countries to help care for victims of government abuse of their own citizens. In the late 1980s and early 1990s, through its affiliation with the Harvard Program in Refugee Trauma, it consulted with the UN High Commission on Refugees on human rights issues. In 1993, before the world conference on human rights, it opposed the Bangkok Declaration at the Asia-Pacific Pre-conference Meeting which supported the importance of state mechanisms of social control. In the late 1980s it worked closely with PAHO, the Pan American Health Organization, on developing the Declaration of Caracas (adopted in November 1990) dealing with patients' rights and standards of care. At the World Congress in Egypt in 1989 the Federation adopted its own "Declaration of Luxor" on human rights for people with mental illness, later ratified at a Board meeting in New Zealand. It has supported the series of UN efforts to eliminate all forms of discrimination against women, including the implicit state support of domestic abuse. In Geneva, it formally opposed the practice of female circumcision.

Human Rights and Mental Health

Although so many UN human rights instruments have not been enforced WFMH has not abandoned its core values. If it is to still embrace the ideal of world citizenship, it cannot ignore the human rights violations which impair mental health in so much of the world. We note with concern the persisting allegations that in certain parts of the world political dissidents are still being forced into mental hospitals to be subjected to the forcible administration of electroshock and medication. The World Psychiatric Association is planning to investigate these charges. (The WFMH Board passed a Resolution of support for this initiative at its London meeting in 2002.)

The current WFMH focus on diagnosed mental illness raises another set of questions about human rights as they are enumerated in the UN's Universal

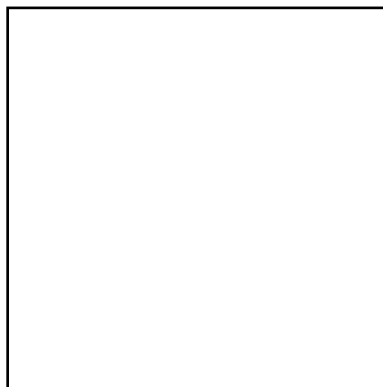
(continued on page 9)

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Declaration. Maintaining mental health and preventing or alleviating ill-health can, indeed, be medical issues. For massive numbers of people, however, they are social and human rights issues. For many individuals in many cultures, mental health may be more effectively maintained by protecting personal dignity, fostering the capacity for self-determination, and providing adequate food, shelter and education, than by providing "treatment" for behavioral deviations defined as illness. For those relatively few persons identified as clearly sick, dangerous to themselves or others, and unwilling to cooperate in treatment, the challenge of providing care is apparent, but difficult to formulate. The persisting question, which may not have an answer acceptable to all parties, is how to balance their civil rights against the limitations on their freedom required by society and contemporary healing techniques. Is it possible to foster and protect the individual dignity, freedom and autonomy of these persons, while at the same time respecting communal well-being? WFMH as an international and intercultural non-governmental organization, with many constituencies, is in a unique position to consider these issues.

Prof. Eugene B. Brody, MD
WFMH Senior Consultant
Past President (1981-1983)
Past Secretary General (1983-1999)

10th Anniversary of the WFMH African Regional Council for Mental Health



President Isaac Mwendapole,
President of the African Regional Council
for Mental Health

WFMH congratulates the African Regional Council on the 10th Anniversary of its founding, celebrated on 5 April 2003. Under the leadership of its President, Isaac Mwendapole, the ARC has steadily extended its networking and activities, despite facing many obstacles. Its budget has been limited, and communications in Africa are difficult. Nevertheless, the Council has built up relations with the World Health Organization's Regional Office for Africa, encouraged the observance of World Mental Health Day in many countries, published a newsletter (now produced in English and French), and

established a Secretariat in Zambia which is run by project manager Mrs. Petronella Mayeya. The ARC's successes have been achieved through a dedicated group of volunteers who have shown a long-standing commitment to its work. Special support has been provided by the Canadian Mental Health Association for a three-year organizational development project; by the Japanese International Co-operation Agency, which provided recent training for Mrs. Mayeya; and by Barry Jay, Mildred Reynolds and Ken Sturgeon, who helped with special needs.

Grant to the Zimbabwe Mental Health Association

The Zimbabwe Mental Health Association, headed by Elizabeth Matare, WFMH's Regional Vice President for Africa, has received a grant from the International Social Science Council (Paris) for the development of its Tirivanhu Therapeutic Community. The grant was awarded through an application from the WFMH Secretariat. The Tirivanhu rehabilitation program for people with mental illness is run as a small farming enterprise where social skills training is combined with work training.

Conferences

The Society for Prevention Research (a WFMH Collaborating Center) will hold its 11th Annual Meeting in Washington, D.C. on 12-14 June 2003. Contact: Jennifer Lewis
Society for Prevention Research
1300 I Street NW, Suite 250W
Washington DC 20005, USA
Tel: 410 216 9670
Email: info@preventionresearch.org
www.preventionresearch.org

The Center for Suicide Research and Prevention of Mental Ill-Health will present the **XXIIth Congress of the International Association for Suicide Prevention** on 10-14 September 2003. Contact: Mrs. Ellenor Mittendorfer, MSc.

National Center for Suicide Research and Prevention of Mental Ill-Health
Box 230, 171 77 Stockholm, Sweden
Tel: 46 8 728 70 26, Fax: 46 8 306439
Email: ellenor.mittendorfer@ipm.ki.se

The International Union for Health Promotion and Education (IUHPE) will hold its **XVIIIth World Conference on Health Promotion and Health Education** in Melbourne, Australia, on 26-30 April 2004. Contact: Marie-Claude Lemarre, Exec. Director
International Union for Health Promotion and Education
2, rue Auguste Comte
92170 Vanves, France
Tel: (33) 01 46 45 00 59
Fax: (33) 01 46 45 00 45
Email: mclamarre@iuhpe.org

The Third Global Conference on the Promotion of Mental Health and Prevention of Mental and Behavioral Disorders will be held in Auckland, New Zealand, in September 2004 (dates to be announced shortly). This conference is organized by the **World Federation for Mental Health, The Clifford Beers Foundation and the Mental Health Foundation of New Zealand in collaboration with The Carter Center**. Contact: Mental Health Foundation of New Zealand
P.O. Box 10051, Dominion Road
Auckland, New Zealand
Tel: (64) 09 300 7010
Fax: (64) 09 300 7020
Email: conference@mentalhealth.org.nz

World Mental Health Day 10 October 2003

WFMH's public education program, centered around World Mental Health Day (10 October 2003), will focus attention this year on the identification, treatment and prevention of emotional and behavioral disorders in children and adolescents.

The selection of this theme reflects the commitment the World Federation for Mental Health has made to raising worldwide awareness and advocacy concerning the devastating effects of emotional and behavioral disorders on children and adolescents in all countries. It also calls attention to the pressing need to promote enlightened public policy, increase availability of treatment services, and develop and implement effective preventive strategies in order to reduce the impact on children and their families.

According to the World Health Organization's *World Health Report 2001*, it seems possible that 10% to 20% of all children have one or more mental or behavioral disorders. (The Report notes, however, that prevalence varies among studies and that it is difficult to draw boundaries between normal phases of development and those that are abnormal.) Suicide is the third leading cause of death among adolescents. Child and adolescent mental disorders affect the development of individuals throughout their lives.

The barriers to effective treatment are numerous, but reflect two dominant themes – stigma and lack of resources (financial, human, facilities). These barriers exist in both developed and developing countries. For child and adolescent emotional and behavioral disorders, which are known to progress and worsen into adulthood, the effect of inattention to treatment on later ill health is evident.

Once again, WFMH has enlisted a distinguished international panel of science advisors to provide advice and assistance in the preparation of materials for the campaign information packet. Members of the **2003 World Mental Health Day International Panel of Science Advisors** are:

Javad Alaghband-Rad, MD, Iran
Michael Aman, PhD, United States
Myron Belfer, MD, World Health Organization, Geneva, Switzerland
William Beardslee, MD, United States
Pamela Cantor, MD, United States
John Copeland, MD, United Kingdom
John Fayyad, MD, Lebanon
Luis Herrera, MD, Costa Rica
Peter Jensen, MD, United States
Eve Moscicki, ScD, United States
Beverley Raphael, MD, Australia
Helmut Remschmidt, MD, Australia
Brian Robertson, MD, South Africa

Work is proceeding on the campaign materials. These will include a variety of easy-to-reproduce fact sheets and handouts; materials designed especially for use by early childhood development workers, elementary school teachers and guidance counselors to provide parents with information about mental and emotional health; and a guide to citizen advocacy for children and adolescents with emotional and behavioral disorders. This year's packet will also include the popular World Mental Health Day sample proclamations and media releases for use in promoting campaign activities.

The 2003 campaign will have a dedicated website at www.wmhd.net, through which resource materials will be made readily available for use by local organizations.

The campaign information packets will be available by mid-June. Sign up to reserve a copy by going to www.wmhd.net, using the special World Mental Health Day email address, wfmh@wfmh.com, or by contacting the WFMH Secretariat:

Deborah Maguire
WFMH
P.O.Box 16810
Alexandria, VA 22302-0810
USA
Tel: 703 838 7525

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 Street, Alexandria, Va. 22302-0810, USA. Telephone (703) 838-7525. Fax: (703) 519-7648. Email: info@wfmh.com Website: www.wfmh.org

Name and Preferred Title

Address

Please send payment in U.S. dollars or other internationally exchangeable currency. Payment by credit card is preferred.



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World Federation for Mental Health

Fédération Mondiale pour la Santé Mentale

23 April 2003

To the Members, Colleagues and Friends of WFMH:

As I write this letter of appeal to you, the attention of the world continues to be focused on the situation in Iraq. I think it is accurate to say that the mental and emotional well being of just about everyone who has followed the unprecedented media coverage of this war has been affected. As a society, as an organization whose establishment was influenced by the horrors of World War II, and as individuals, we all share a sense of grief over the fact that efforts to resolve this conflict through negotiation and peaceful means were unsuccessful.

Prior to the beginning of the military action, WFMH's board of directors submitted urgent letters of concern to United Nations Secretary-General Kofi Annan, to President George Bush (United States), Prime Minister Tony Blair (United Kingdom), and Prime Minister John Howard (Australia), urging that all peaceful efforts be exhausted to prevent military conflict, suffering and disruption. These statements were consistent with WFMH's history, mission, vision and goals of promoting "among all peoples and nations, the highest possible level of mental health in its broadest biological, medical, educational and social context."

Whatever the length of any military conflict, the mental and emotional health impact of the events related to it last much longer. These events affect children, young people, and adults for some time to come. Certainly, the families most directly in harm's way bear the greatest impact of the conflict. Even those of us who experience the "virtual reality" of war and violence only through media coverage feel the anxiety, fear, frustration and sense of helplessness that accompany the witnessing of conflict and suffering.

The World Federation for Mental Health, from its establishment in 1948 until today, has stood as an organization composed of people dedicated to civil society, to peaceful resolution of conflict, and to promoting mental and emotional well being of citizens throughout the world. Even though WFMH can never completely escape the realities of differing perspectives and viewpoints – as is true even with regard to the current conflict – it can remain true to its central mission and vision by seeking ways to respond effectively to the mental and emotional health impact of war and its aftermath.

This is our challenge, and one for which we need your response and support. WFMH is working right now to respond to the mental and emotional health impact of war, both immediate and longer-lasting, through the development and dissemination of informational materials to

help teachers, primary health care workers, relief workers and others who work with individuals, families and communities to recognize and respond effectively to such emotional health issues as grief and loss, anxiety, depression and post-traumatic stress syndrome. We are also continuing to promote the distribution and use of the 2002 World Mental Health Day materials packet on the “Effects of Trauma and Violence on Children and Adolescents” – a theme whose timeliness continues to be apparent in these unsettling times.

To accomplish this outreach initiative to provide relevant, useful and culturally sensitive information in response to the mental and emotional effects of war and its aftermath on children, adolescents and adults, WFMH NEEDS YOUR IMMEDIATE AND GENEROUS FINANCIAL ASSISTANCE. I am urging you to respond to this important appeal with a contribution of \$10, \$25, \$50 – or whatever amount you can give to support this special initiative. Your support will be gratefully appreciated, and put to good use. Thank you for your assistance. In the meanwhile, pray for peace, and for all affected by war and violence wherever it may occur.

Sincerely,



L. Patt Franciosi, PhD
President
Board of Directors
World Federation for Mental Health

To Contribute to this Special Initiative, Detach and Return This Form With Your Payment — or make your contribution online by using the new secure GIVE BUTTON feature on WFMH’s new WORLD MENTAL HEALTH DAY website at www.wfmh.net

*TO: Special Initiative Fund • WFMH
P. O. Box 16810 • Alexandria VA 22302-0810 • USA*

YES, I want to support WFMH’s emergency outreach initiative on the mental health impact of war and its aftermath.

My contribution is enclosed. _____ \$10 _____ \$25 _____ \$50 _____ \$100 _____ \$_____

NAME: _____

ADDRESS: _____

CITY, STATE/PROVINCE, POSTAL CODE, COUNTRY

METHOD OF PAYMENT: _____ Check (Payable to WFMH)

_____ Credit Card (Visa / MasterCard) # _____ Exp. Date: ____ / ____ / ____

NAME ON THE CARD: _____

AUTHORIZED SIGNATURE: _____

Please make payment in US dollars or other internationally exchangeable currency