

## POLITICAL PRIORITY FOR GLOBAL MENTAL HEALTH

DATA

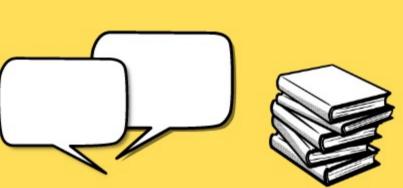
35 IN-DEPTH
INTERVIEWS
+
DOCUMENTS

SUBSTANTIAL BURDEN

& GROWING

1ST CAUSE OF DISABILITY

3RD CAUSE OF GLOBAL BURDEN OF DISEASE



DATA ANALYSIS

THE PUZZLE

WHAT FACTORS HAVE SHAPED THE

GENERATION OF POLITICAL PRIORITY FOR

GLOBAL MENTAL HEALTH OVER THE PAST

THREE DECADES PRECEDING THE COVID-19

PANDEMIC (1990-2020)?

METHODS

DETERMINANTS OF POLITICAL PRIORITY FOR GLOBAL HEALTH INITIATIVES

0

6 INTERVIEWEES

LIMITED SUPPORT

& FUNDING

< 20% PEOPLE LIVING WITH MENTAL

2.1% OF GOVERNMENT HEALTH BUDGET &

0.4% OF HEALTH AID

ALLOCATED TO MENTAL HEALTH

DISORDERS RECEIVE SUPPORT

RESULTS

GLOBAL MENTAL HEALTH
HAS GAINED POLITICAL ATTENTION
ESPECIALLY OVER THE PAST DECADE,
YET SUPPORT REMAINS LIMITED.

ACTOR POWER

IDEAS

ALL FACTORS ANALYSED
BECAME MORE FAVOURABLE
EXCEPT ONE
FOR WHICH CHANGE WAS NEGLIGIBLE:

GUIDING INSTITUTIONS.

POLITICAL CONTEXTS

ISSUE CHARACTERISTICS

## RECOMMENDATIONS

TECHNICAL CHALLENGES

CREDIBLE

ROBUST DATA

INDICATORS

EVIDENCE ON SCALING-UP OF SOLUTIONS

INITIATIVES ON COMMON MENTAL HEALTH METRICS,

INDICATORS,

INTERVENTIONS

• AVAILABLE DEFINITIONS & ARGUMENTS

·LEVERAGE OTHER POLICY COMMUNITIES

• PARTNERSHIP FOR GLOBAL MENTAL HEALTH

·COORDINATION
WITH OTHER POLICY
COMMUNITIES

• FORMAL & INFORMAL GROUPS
• A UNIFYING ORGANISATION

POLITICAL CHALLENGES

UNITED POLICY COMMUNITY
UNITED MESSAGE

STRONGER GUIDING
INSTITUTIONS
STRONGER GRASSROOT

ORGANISATIONS

•GLOBAL NETWORKS OF NATIONAL CAMPAIGNING GROUPS & PEOPLE WITH LIVED EXPERIENCE

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