**GENEVA ¦ 7 October 2011** - One in four people will require mental health care at some point in their lives but in many countries only two per cent of all health sector resources are invested in mental health services.

Average global spending on mental health is still less than US$ 3 per capita per year. In low income countries, expenditure can be as little as US$0.25 per person per year, according to the World Health Organization's *Mental Health Atlas 2011* released on World Mental Health Day.

The report also finds that the bulk of those resources are often spent on services that serve relatively few people.

"Governments tend to spend most of their scarce mental health resources on long-term care at psychiatric hospitals," says Dr Ala Alwan, Assistant Director-General of Noncommunicable Diseases and Mental Health at the World Health Organization (WHO). "Today, nearly 70 per cent of mental health spending goes to mental institutions. If countries spent more at the primary care level, they would be able to reach more people, and start to address problems early enough to reduce the need for expensive hospital care."

The Atlas highlights other imbalances. Good mental health services focus equally on providing patients with a combination of medicines and psychosocial care. In lower income countries, however, shortages of resources and skills often result in patients only being treated with medicines. The lack of psychosocial care reduces the effectiveness of the treatment.

Meanwhile, many people have no access to mental health services at all. Across the low-and middle-income group of countries, more than three quarters of people needing mental health care do not even receive the most basic mental health services.

"Almost half of the world's population lives in a country where, on average, there is one psychiatrist (or less) to serve 200,000 people, says Dr Shekhar Saxena, Director, Mental Health and Substance Abuse at WHO. "Many low-income countries have less than one mental

health specialist per one million population."

In 2008, WHO launched its mental health Gap Action Programme (mhGAP) to assist countries to scale up services for mental, neurological and substance use disorders. The programme provides knowledge and skills to primary health care providers such as general doctors, nurses and health care workers to identify and manage these disorders.

Since then, some countries have made significant progress in scaling up their services with assistance from WHO. For example:

- Ethiopia and Nigeria have begun training their primary health care personnel to identify and treat priority mental disorders. The Ministries of Health of both countries have committed to sustain the programme for lasting impact.
- China has scaled up its programme to provide care for epilepsy patients to 19 provinces, building on successful experience in a small number of pilots in provinces. More than 40 million people are now covered by this programme.
- Jordan is making progress with a programme for priority mental disorders. Panama has begun training its primary care providers on a systematic basis.
- Large, developing countries like Brazil, India and Thailand are also preparing to make rapid advancements in scaling up care through their national health programmes.