



**Name of Module:** Public Mental Health

**Full Module Code:** HS958

**Module Dates:** 24 January –4 April 2022

**Time:** Monday, 13:00-16:00 (GMT)

**Module Lead:** Dr Sarita Panday

**Venue:** [CTC.1.05](#)

## Table of Contents

Module Specification .....	3
HS958-7-SP.....	3
SECTION B: Academic design .....	3
Module Description.....	3
Aims .....	4
Learning Outcomes .....	4
Module Information .....	4
Week 1: Introduction to public mental health (Dr Sarita Panday and Dr Nestor Asiamah 24 Jan 2022) .....	5
Week 2: Social determinants of mental health (Prof Ewen Speed, 31 Jan 2022) .....	5
Week 3: Contemporary approaches to mental health promotion (Dr Sarita Panday, 7 Feb 2022).....	5
Week 4: Challenging the global mental health paradigm (Dr Sarita Panday, 14 Feb 2022) .....	5
Week 5: Seminar on innovative public mental health interventions (Dr Sarita Panday, Koshish Nepal/Indian Mental Health Practitioners) (21 Feb 2022).....	5
Week 6: A critical perspective on mental health in vulnerable populations (Prof. Renos K. Papadopoulos, 28 Feb 2022) .....	5
Week 7: Sexuality, gender, marginalisation, discrimination and criminalisation of mental health (Dr Abisola Balogun, Dr Vicky Boydell, 7 March 2022).....	5
Week 8: Public mental health and evidence (Prof Reza Majdzadeh, 14 March 2022) .....	6
Week 9: Role of institutions and care in the community (Dr Nestor Asiamah, 28 March 2022).....	6
Week 10: Public mental health and the life course approach (Dr Nestor Asiamah, Dr Sarita Panday, 4 April 2022).....	6
Learning and Teaching Methods.....	7
Interactive Lectures and Debate Sessions.....	7
Seminar on innovative public mental health approaches.....	7
Online discussion on Moodle .....	7
Bibliography .....	8
Feedback, advice and module evaluation.....	10

## Module Specification

<b>Module Code</b>	HS958-7-SP	<b>Status</b>	Postgraduate
<b>Date of Official Approval</b>		<b>Academic Year</b>	2021- 22
<b>School</b>	School of Health and Social Care		
<b>Module Descriptor</b>	This Module introduces students to current trends and key issues in public mental health policy from a global, regional and country perspective. It situates mental health within the wider determinants of health examined in other MSc modules. As with other modules on this MSc this module brings a critical lens to the subject. It equips students with the knowledge and skills necessary to pursue both specialist pathways that the MSc offers.		
<b>Keywords</b>	<b>Public Mental Health, Health Policy, Mental health Services, Health Rights</b>		
<b>Module Leader</b>	Dr Sarita Panday		
<b>Module Tutors</b>	Dr Nestor Asiamah		
<b>Module Administrators</b>	Jordan Cohen, email: <a href="mailto:jacohe@essex.ac.uk">jacohe@essex.ac.uk</a> ; office hours Monday-Friday 9am-5pm		

## SECTION B: Academic design

<b>Module Description</b>
<p>The international right to health requires that states and the international community ensure that everyone has access to the underlying conditions necessary to achieve the highest attainable level of physical and mental health. The mental health component of the right to health has been long neglected but this is slowly changing. This change stems in part from the increased recognition and advocacy surrounding the mental health toll of political conflicts, and humanitarian and natural disasters as well as deep-rooted gender, racial and ethnic based discrimination in societies. The ongoing impact of diverse policy measures related to the Covid-19 pandemic have once again brought mental health to the fore, pushing governments and societies to confront, if not address, the consequences of neglecting mental health policy and systems.</p> <p>This module unpacks the drivers and consequences of this neglect for populations and individuals. It frames this overarching analysis of mental health policy and systems around long-standing critiques articulated on the global stage in the 2017 report of the (former) UN Special Rapporteur on the right to health, which examined the “global burden of obstacles” in mental health settings and in the field of psychiatry. The obstacles explored in the different sessions include: the dominance of the individualised biomedical paradigm; the power asymmetries which impact all levels of decision-making in mental health policies and services, the neglect of the social and political determinants, and the multiple biases reflected in the production and use of evidence in mental health. Through examining how these obstacles manifest in different countries and</p>

context, students will further develop their critical assessment skills and learn how diverse frameworks can be employed to develop more inclusive, empowering mental health policy and interventions.

## Aims

This Module provides students with the knowledge and tools to understand and assess the impact of the dominance of the biomedical paradigm, power asymmetries and the use of evidence on public mental health policy and services in diverse contexts. The module introduces students to contestation around the theories guiding public mental health and situates public mental health challenges within the wider determinants of health. It also introduces and explores key concepts and frameworks for appraising contemporary mental health policy and interventions including intersectionality. Finally, it engages with how to employ these analytical concepts and frameworks to critically examine cross cutting themes and issues including the role of culture and faith in framing issues of mental health and driving mental health policy.

## Learning Outcomes

1. Examine the historical development of key theoretical underpinnings of mental health and critically appraise their implications for advancing positive mental health and wellbeing.
2. Identify and critically describe the key theoretical foundations of public mental health promotion approaches and critically appraise their relative contributions to enhancing wellbeing.
3. Identify and critically assess how the global burden of obstacles to the promotion of mental health as a human right is reflected in different contexts and countries.
4. Critically assess the paradigms underlying priority setting in mental health research and service delivery in diverse contexts, that acknowledges the significance of addressing social, cultural, political and economic determinants of mental health and wellbeing.
5. Apply key analytical frameworks to critically analyse mental health policy and systems and appraise challenges that operate at global and UK levels.
6. Propose innovative evidence-based approaches to public mental health policy and service provision.
7. Pursue independent learning and to show critical judgement while effectively presenting reasoned arguments in written and oral form.

## Module Information

**Week 1: Introduction to public mental health (Dr Sarita Panday and Dr Nestor Asiamah 24 Jan 2022)**

This session provides an overview of the structure of the module. It briefly presents theories underpinning public mental health approaches and older models of mental health care, providing a basis for critically exploring this newer paradigm and the challenges to replacing the older approaches. It introduces the two key messages underpinning the modern public mental health approach 1. No health without mental health and 2. Good mental health is much more than the absence of a mental impairment. The session highlights the relevance of integrated approaches for public mental health and examines why this approach still faces enormous challenges and explores how the historical divide between mental and physical health (including in policy and practice) has contributed to the marginalisation and stigmatisation of mental health.

**Week 2: Social determinants of mental health (Prof Ewen Speed, 31 Jan 2022)**

This session explores the social ecology of public mental health. It engages with seminal work on the social determinants of health, including the Marmot Report in the UK, situating mental health within the wider determinants of health. It explores the close link between the personal, social and psychological factors underpinning mental health and the policies that engage (or not) with the challenge of integrating these factors. Mental health is not about individual agenda, but securing rights to wider social, political and economic determinants of health. These are crucial in achieving both mental and physical health and well-being.

**Week 3: Contemporary approaches to mental health promotion (Dr Sarita Panday, 7 Feb 2022)**

This session connects the theory from session one to practice. It introduces students to public health interventions related to mental health in the UK context, exploring the challenge of shifting the focus from treating mental illness to focusing on the promotion of mental health. It also engages with how mental health services have responded to changes in the demographic composition of the UK population over the past decades. It unpacks why this shift is difficult by looking at issues including power structures, racial prejudice and professional path dependence.

**Week 4: Challenging the global mental health paradigm (Dr Sarita Panday, 14 Feb 2022)**

This session engages with diverse challenges to the public mental health paradigm. It introduces the critiques in the 2017 report of the (former) UN Special Rapporteur examining what he terms the “global burden of obstacles” in mental health settings and in the field of psychiatry. Students will debate the merits of a global level attack on the dominant mental health paradigm, exploring reactions from different fields to this critique and seeking to identify national or local level policy impact.

**Week 5: Seminar on innovative public mental health interventions (Dr Sarita Panday, Koshish Nepal/Indian Mental Health Practitioners) (21 Feb 2022)**

This session will help students to understand to address real world problems and produce practitioner focused recommendations. Students will hear practitioners’ experiences ‘from the field’ of community-based local initiatives in diverse geographical and social settings and with different vulnerable groups. Examples include Koshish Nepal/Bapu Trust/ SANGAT in India, Mental Health Foundation in Scotland. Students will hear how local public mental health practitioners have been able to work to address mental health issues with diverse groups, what they have learnt along the ways and what are their suggestions for future research/actions.

**Week 6: A critical perspective on mental health in vulnerable populations (Prof. Renos K. Papadopoulos, 28 Feb 2022)**

The term 'trauma' is used widely not only by mental health professionals but by virtually everyone involved in addressing the effects of severe forms of collective adversity. What are the complexities of this common practice? How appropriate is the tendency to over-emphasise the mental health dimension in such contexts? and what are the power dynamics behind it? How do power asymmetries impact on decision making at the macro (mental health policy and services) and micro (individual and community) levels? This session critically examines the societal discourses that focus on the 'psychological damagedness' of the affected people, at the expense of also appreciating their agency, their resilience and their strengths.

**Week 7: Sexuality, gender, marginalisation, discrimination and criminalisation of mental health (Dr Abisola Balogun, Dr Vicky Boydell, 7 March 2022)**

The interface between gender, sexuality and mental health has a problematic history in many different contexts, and been couched in a criminalising discourse. The first part of the session explores how cultural and faith based agendas interact with mental health legislation and policy leading to marginalisation and stigmatisation. Through a case study focused on Nigeria, the UK or Ireland students will explore innovations

that contribute to addressing marginalisation and stigma in mental health. The second part of the session involves group discussions to analyse a review about the relationship between poverty, intimate partner violence (IPV), and women's mental health. Based on the review, the discussion will focus on how poverty and IPV influence each other, how the combination of poverty and IPV create unhealthy conditions (with stress, a sense of powerlessness, and social isolation).

**Week 8: Public mental health and evidence (Prof Reza Majdzadeh, 14 March 2022)**

This session explores the role of evidence in public mental health policy and service design. It pushes students to ask what evidence underpins public health policies and services and allows evaluation of the effectiveness of specific health promotion interventions? What role can mental health advocates play in generating evidence that contributes to promoting mental health?

**Week 9: Role of institutions and care in the community (Dr Nestor Asiamah, 28 March 2022)**

The deinstitutionalisation process, replacing long term stays in psychiatric hospitals with less isolated community mental health services is gathering pace globally. In Europe, a broad alliance of disability activists, human rights groups and social care workers is pushing for change. This session explores the obstacles to changing mental health policy and practice and examines positive examples of innovative practice.

**Week 10: Public mental health and the life course approach (Dr Nestor Asiamah, Dr Sarita Panday, 4 April 2022)**

This session continues the exploration of innovative approaches to promoting public mental health assessing how a life course approach can contribute to approaching mental health from an intersectional perspective.

## Learning and Teaching Methods

### Interactive Lectures and Debate Sessions

Each weekly session will be divided into two parts. The first part will involve teaching and reviewing the readings and key concepts and principles associated with the week's topic. The second part will be interactive discussion/debate based on the week's key readings. Questions for consideration will be provided for each session to guide you in your reading. These will inform weekly discussion, so try to read as widely as possible. You are expected to read all the key readings in advance and actively contribute to classroom discussion. This will help you to engage with public mental health issues and challenge them to examine their world view, prejudices and cultural perspective. In each session, students will agree a debate or discussion topic (from a curated list) and engage in a semi-structured discussion on the issue. These debates will surface diverse opinions and perspectives engaging all involved in the dilemmas that mental health policy makers, mental health services providers, mental health researchers and those with lived experience of mental health services. Students will work together to find creative solutions that uphold principles of respect, rights and diversity.

As postgraduate students, you should aim to read widely, deploying a critical eye at all times. It is crucial that students attend and prepare well for all sessions by engaging with key readings identified as a minimum. Each week, a number of 'key readings' have been identified and each student **should read these items as a minimum**. For ease of access, all core reading is available electronically via Talis. Alongside the core reading is a range of **recommended reading**. These texts are intended to provide further insights into the area of study, and you are encouraged to read additional sources from these lists as part of your weekly session preparation.

At the same time, we expect you to adopt a more dynamic approach to wider reading, in terms of preparing for both lectures and assessment. **Do not be confined to the reading lists. Find your own supplementary reading material.**

### Seminar on innovative public mental health approaches

People directly engaged in introducing and or running innovative mental health promotion programmes will participate in the session. We hope to be able to include people with lived experiences of using mental health services – and need to be able to ensure they can be supported to contribute their “expert by experience” perspective.

### Online discussion on Moodle

Each week, students are encouraged to post their inquiries, learning or any reflection arising from the session or group work using online platform **Discussion Forum** on Moodle. When posting, please title the slide/ notes for ease of reference and access. Please also use this forum to share your views, interesting readings/ new articles relevant to the subject of class discussions.

Further information about the module is below:

- Completion of all core reading as a minimum.
- Attendance at all classes/seminars.
- Full and active participation in all classroom discussion.
- Active engagement in Moodle Discussion Forum.
- Completion of all tasks set in advance.
- Submission of a short blog of 600 word (see page 7)
- Submission of one assessed essay of 3,000 words (see page 7 & 8)

## Bibliography

The following books are useful to read for advanced engagement with the module:

Bährer-Kohler, S. and Carod-Artal, F. (Eds.) (2017) *Global Mental Health: Prevention and Promotion*. Switzerland: Springer International Publishing.

Eaton, W. and Fallin, M. (Eds.) (2019) *Public Mental Health (2<sup>nd</sup> Ed.)*. New York: Oxford University Press.

Fernando, S. (2014) *Mental Health Worldwide: Culture, Globalization and Development*. Basingstoke: Houndmills.

Funke, M., Drew, N., Freeman, M., Fayde, E. and WHO (2010) *Mental Health and Development: Targeting People with Mental Health Conditions as a Vulnerable Group*. Geneva: World Health Organisation.

Knifton, L. and Quinn, N. (Eds.) (2013) *Public Mental Health: Global Perspectives*. Maidenhead: McGraw Hill.

Marmot, M. and Wilkinson, R.G; (2005) *The Social Determinants of Health*, Oxford University Press; Chapter 6 by Marmot, M. and Wilkinson, R.G; Health and the psychosocial environment at work DOI:10.1093/acprof:oso/9780198565895.003.06

Patel, V., Minas, H., Cohen, A., & Prince, M. J. (Eds.). (2013). *Global mental health: principles and practice*. Oxford University Press.

Mills, C. (2014) *Decolonizing Global Mental Health: The Psychiatrization of the Majority World*. Hove: Routledge.

Sorel, E. (2013) *21<sup>st</sup> Century Global Mental Health*. Burlington: Johns and Bartlett.

United Nations High Commissioner for Human Rights. (2017) Report of the Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health. A/HRC/35/21 <https://documents-dds-ny.un.org/doc/UNDOC/GEN/G17/076/04/PDF/G1707604.pdf?OpenElement>

WHO (2019) *mhGAP Intervention Guide: for Mental, Neurological and Substance Use Disorders in Non-specialized Health Settings (Version 2.0)*. Geneva: World Health Organisation.

### Selected indicative readings

Jessica Allen, Reuben Balfour, Ruth Bell & Michael Marmot (2014) Social determinants of mental health, *International Review of Psychiatry*, 26:4, 392-407, DOI: [10.3109/09540261.2014.928270](https://doi.org/10.3109/09540261.2014.928270)

Bemme, D. , & D'souza, N. A. (2014) Global mental health and its discontents: An inquiry into the making of global and local scale. *Transcultural Psychiatry*, 51 (6), 850–874. doi: 10.1177/1363461514539830

Collins, P. Y., Patel, V., Joestl, S. S., March, D., Insel, T. R., Daar, A. S., ... & Walport, M. (2011) Grand challenges in global mental health. *Nature*, 475(7354), 27-30.

Lisa Cosgrove, China Mills, Justin M. Karter, Akriti Mehta & Jayasree Kalathil (2020). A critical review of the Lancet Commission on global mental health and sustainable development: Time for a paradigm change, *Critical Public Health*, 30:5, 624-631, DOI:10.1080/09581596.2019.1667488

Eaton J, Ryan G. (2017) Making Universal Health Coverage a reality: bridging the gap between Global Mental Health and practical integration into local health systems. *Epidemiol Psychiatr Sci*. 2017 Jun;26(3):245-247. doi: 10.1017/S2045796016001001. Epub 2016 Dec 22. PMID: 28004627

Goodman, L. A., Smyth, K. F., Borges, A. M., & Singer, R. (2009) When crises collide: How intimate partner violence and poverty intersect to shape women's mental health and coping?. *Trauma, Violence, & Abuse*, 10(4), 306-329.

Patel, V., Saxena, S., Lund, C., Thornicroft, G., Baingana, F., Bolton, P., ... & Unützer, J. (2018) The Lancet Commission on global mental health and sustainable development. *The Lancet*, 392(10157), 1553-1598.

Puras, D. Reports of the United Nations Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health. See <https://www.ohchr.org/EN/Issues/Health/Pages/Dainius-Puras.aspx>

Wahlbeck, K. (2015) Public mental health: the time is ripe for translation of evidence into practice. *World Psychiatry*, 14(1), 36-42.

Jain S, Jadhav S. (2008) A cultural critique of community psychiatry in India. *Int J Health Serv*. 38(3):561-84. doi: 10.2190/HS.38.3.j. PMID: 18724582.

<b>Assessment Details</b>				
	<b>Length (words) / Duration (minutes)</b>	<b>Submission date / Exam Period</b>	<b>Assessment Weighting (%)</b>	<b>Learning Outcome(s) met</b>
Please add rows as necessary				
<b>Formative assignment</b>	<b>600 words (excluding bibliography)</b>	<b>Week 8 14<sup>th</sup> March 2022, 12pm</b>	<b>0</b>	<b>1-3</b>
<b>Essay on pre-determined topics</b>	<b>3,000 words (excluding bibliography)</b>	<b>Week 11 11 April 2022 12pm</b>	<b>100%</b>	<b>1-7</b>
<b>Please provide details of any formative assessment that will be offered in the module:</b>				
The formative assignment will be a short blog post in which students propose solutions to a real-life example (e.g. the impact of the Covid-19 lockdown on lone parents) to highlight the obstacles and benefits to reframing mental health more broadly than the absence of mental illness (see above).				
<b>Please provide details of how the assessment methods will be inclusive for all students:</b>				
Through its interactive and participative structure this module brings rich insights from diverse sectors (academic, policy, social movements) and geographies (UK/ Europe, South Asia) and critical pedagogical approaches that incorporate problem-based learning. As such it contributes to and engages with efforts to decolonise the broader public health academy.				
Given intersectionality's normative focus on social justice and issues of power and interlocking oppressions, the module's objectives are well aligned with principles of Equality, Diversity & Inclusion (EDI). This module flows from the course design which is rooted in an intersectionality-informed EDI framework developed by Kapilashrami which will guide teaching & learning via a decolonised approach to curriculum design and classroom delivery. The framework adopts intersectional thinking and principles and across stages of the teaching and learning cycle- content design, classroom delivery, and wider institutional contexts – to ensure inclusivity, diversity and responsibility in teaching practices. In this module, we will also engage Student wellbeing & Inclusivity Support (to identify and support those with learning difficulties and other disabilities).				
Teaching will combine instructional methods such as lectures- live and pre-recorded to aid flipped-classroom learning - and seminars employing participatory techniques of role play, simulated practice scenarios that				

draw on diverse sites of expertise. Students will also work in groups to identify key challenges in public mental health and work together to find evidence-based or local innovative solutions to address the identified issues. This will cater to a range of different learning styles as well as helping to develop reflexive skills and structured, critical assessment skills.

**Feedback, advice and module evaluation**

Students can receive feedback advice on their assessed work throughout the module. All essays are returned with detailed comments. Lecturers will provide support and information concerning the preparation of assessed work and feedback on completed module. Specifically, module leaders can read and offer feedback on a one-page plan of your coursework. Please note that we cannot read or comment on draft essays.