



**GOOD PRACTICE SERVICES:  
PROMOTING HUMAN RIGHTS &  
RECOVERY IN MENTAL HEALTH**  
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**ABSTRACT FORM**

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<b>Title of the contribution/Titolo del contributo</b>	<b>The future of Mental Health</b>		
<b>Objectives/Obiettivi</b>	<b>To provide a personal view on strengths and weaknesses of Global Mental Health perspective</b>		

**Contents-text/Contenuto-testo:**

**Max. 400 parole/words**

The Global Discourse of Global Mental Health has not been able to determine any real transformation in countries: the insufficiency, inefficiency of mental health systems has not significantly improved. Human Rights violations still represent a global emergency.

The global discourse has undoubtedly contributed to reorient the governments approach towards a community model but too often the discourse has not been implemented in practical changes.

In the few countries where some innovation has been implemented the prevailing model is still the one of two parallel systems: community mental health services and traditional psychiatric institutions.

The rhetoric of “scaling up” of services should be criticized because too often simply tries to export packages of traditional biomedical models of interventions and does not address the need of radical change of mental health systems. There is an urgent need to continue fighting psychiatric institutions and to demonstrate the fallacy of the “balanced care model”.

Is Global Mental Health really global or rather Western?

Is GMH too unbalanced towards a biomedical model?

Is GMH concerned enough with modifying social determinants?

What is the real impact (if any) of GMH in low-income countries?

What are the consequences on the human rights of people in psychiatric institutions of the almost exclusive emphasis given by GMH on common mental disorders and on primary care level? Are

**people with severe mental disabilities living in institutions once again at risk to be forgotten?**