In its commitment to human rights and the dignity of the person, the United Nations has focused on the underserved needs for mental health. The message of October 10, Mental Health Day has made it clear that mental disorders are truly universal. Mental and behavioral disorders are found in all regions, all countries and all societies, among rich and poor, in both urban and rural areas. The overall prevalence is the same among men and women. The prevalence of the severe mental disorders, schizophrenia and bipolar disorder, is also the same. But depression is more common among women, and substance abuse disorder is more common among men.

Rare is the family that is free from an encounter with mental disorders. One out of four people around the world, about 1.7 billion, experience some kind of passing mental illness in their lifetime. In fact, one in four families is likely to have at least one member with a behavioral or mental disorder. 12% of the world's population, about 800 million people, have a mental disorder. These numbers are staggering. Such illnesses create a particularly heavy burden on individuals, families, and communities.

The UN is concerned about the disparities in resources available for treatment and care. The mentally ill are some of the most neglected people in the world. In many communities mental illness is not considered a real medical condition but viewed as a weakness of character, or as punishment for immoral behavior. Victim blaming!

More than 75% of people suffering from mental disorders in the developing world receive no treatment or care.

The UN message states: "Health care systems around the world face enormous challenges in delivering and protecting the human rights of people with severe disorders."

 Scaling up services should be a priority. The extra cost is modest. A study conducted by WHO revealed that in low-income countries the scaling up for 3 disorders, schizophrenia, bipolar disorder, depression, and for the risk factor,
hazardous alcohol use, requires an additional investment of $0.20 per person per year.

In the past, in some societies sufferers have been given high social status in the belief they could mediate with gods and the dead. In medieval Europe and elsewhere, these ill people have been burned at the stake. They have been locked into large mental institutions where they have been often beaten or abused.

Significant progress in psychopharmacology, the neuroleptic drugs and anti-depressants have helped. But even in the U.S., society has a long way to go to achieve basic human rights. According to Human Rights Watch, half of the prison population, somewhat over one million, have a mental health problem. Many, if not most, are not receiving needed services.

New approaches put forth in a recent UN report highlight the need for changing attitudes--replacing psychiatric institutions with community care and increasing investment in mental health research and care. WHO provides support to countries in developing mental health laws. It also provides assistance through technical information, regional and national training workshops. In this area the UN is guided by three principles. The first is that there should be no discrimination simply on the grounds of mental illness. Decisions should be job related. Another is that as far as possible, every patient has the right to be treated and cared for in their own community. A third is that treatment should be humane.

Many organizations are working to help. The World Federation For Mental Health (www.wfmh.org) is a good source for information and suggestions for action. The dignity of every person is one of the credos of ethical humanism. Mental health is central to human dignity.

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