INTRODUCTION

Global Mental Health: Students and Trainees Lead the Charge

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The field of global mental health precariously combines two fields not typically drawn to the other. Global health, and at the very least global health as popularly imagined, has historically emphasized communicable diseases such as malaria and AIDS. Despite the increasing shift in the global burden of disease toward noncommunicable disease, conditions such as heart disease, hypertension, and diabetes tend to come to mind. Even with frequently cited statistics that neuropsychiatric conditions actually constitute the largest share of worldwide causes of morbidity or that clinical depression ranks at or near the top of lists of disabling disease entities around the world, global health practitioners have not taken up the cause of mental health commensurate with the epidemiology.

On the other hand, psychiatry has historically dealt more with mental illness than mental health, putting it at odds with the public health ethos of global health. Psychiatrists and other mental health professionals tend to help those seeking help, reacting more than acting. Treatment far outstrips prevention, and it is left to a special breed of psychiatrists known as community or public psychiatrists to reach out to the world beyond clinics, inpatient wards, and consultation rooms. It also may well be in the nature of many psychiatrists and mental health professionals to hang back, observe, and listen more than to jump into the fray and become actors in the world.

We are therefore grateful to have the chance to focus this second issue of Annals on global mental health. It befits an up-and-coming field that up-and-coming members of the health community are often, in our experience, leading the charge. All of the contributions to this issue are therefore either by or about undergraduate or medical students, resident, fellows, or other trainees. We begin with some reflective pieces and then move into original research. The latter half of the issue then consists of reviews on topics in global mental health.

The research methodologies discussed in the research papers are not typically complex or technological. They are distinguished far more by their access to unique places and populations, whether in Japan, El Salvador, or India. We believe it is the best possible research that can be accomplished in the course of hastening to help meet the world’s mental health needs. It is not always easy to be scholarly when you are expected to be helpful, especially in low resource settings, but we hope the reader discerns the humanitarian and scholarly refrains in all that follows.