

# The way to more equitable and integrated mental health care

**One in seven people worldwide lives with a mental disorder. Most receive no care at all. Enabel brings mental health care to the heart of communities and health systems, reducing inequities, closing treatment gaps, and transforming lives.**

Mental health is an essential component of overall health and well-being, and a fundamental human right (WHO, 2022a). Good mental health is a vital prerequisite for both human and social development. The promotion of mental health and well-being, along with the prevention and treatment of substance use disorders, are explicitly included among the targets of the Sustainable Development Goals (SDGs) (UN, 2015a, 2015b).

Nearly one in seven people globally live with a mental disorder, with anxiety and depressive disorders being the most prevalent (WHO, 2022b). An estimated 400 million people have alcohol use disorders, and 64 million people have other drug use disorders (not including tobacco) (WHO, 2025).

While the global burden of mental health conditions affects populations across all countries, the magnitude of unmet needs varies significantly across regions (WHO, 2022a). In low- and middle-income countries (LMICs), where treatment gaps remain the highest and resources most constrained, investing in scalable, integrated mental health approaches offers a particularly high potential for impact.

Despite this burden of disease, most healthcare systems continue to under-prioritise mental health. Between 76% and 85% of people with mental health conditions in LMICs do not receive any form of treatment. In 2021, across all ages, mental, neurological and substance use (MNS) disorders are the leading cause of years lived with disability. MNS disorders together accounted for one in ten disability-adjusted life years

worldwide. The economic consequences of mental health conditions are enormous and extend far beyond health care costs: depressive and anxiety disorders alone are estimated to cause global productivity losses of approximately USD 1 trillion each year (WHO, 2022a).

Mental health is a vital yet long-overlooked aspect of public health, especially in LMICs where health service gaps are extensive and the burden of untreated mental disorders is steadily increasing. Furthermore, fragility and crisis contexts, including armed conflict, gender-based violence, forced displacement and natural disasters are major contributors to the worsening burden of mental health disorders. The populations affected by these crises experience high levels of psychological distress, yet they are often the least served by existing mental health systems. The increasing impacts of climate change further exacerbate this burden, particularly in the most vulnerable settings (WHO, 2022c).

## Positioning

Mental health is a key determinant of public health and societal development. Enabel's approach focuses on the integration of mental health care into primary health care, delivering accessible, rights-based and person-centred care at the closest point to communities, within existing health structures. This approach is complemented by preventive and societal actions addressing the social determinants of mental health, including community engagement, stigma reduction and multisectoral action. Its integration into national health systems is fundamental to achieving universal health coverage.

Enabel's strategic framework is guided by the following core principles: (1) national system strengthening, (2) integration in primary health care, (3) stigma reduction, psychosocial support and community engagement, (4) local capacity building, and (5) evidence-based approaches through monitoring, evaluation and action-research.

Starting from the health system as the primary entry point, Enabel promotes coordinated action across sectors to support prevention, early identification, treatment and rehabilitation in mental health. Together, these principles ensure that mental health care is embedded within existing services and accessible to all, especially the most vulnerable populations.



### Mental health at Enabel: a 5-level approach

#### Integration into national health systems, policies and strategies

Enabel supports partner countries in the development and implementation of mental health policies and strategies, providing institutional and methodological support to national mental health programmes. This includes assistance in the formulation of strategic mental health plans and guidelines, strengthening coordination mechanisms and ensuring alignment with national budgets and health insurance systems, with a view to achieving sustainable and system-wide impact. The Rwandan experience illustrates this well: over 15 years, Enabel supported the decentralisation of services, the training of professionals and the integration of mental health into primary care and health insurance schemes. This long-term, system-wide investment demonstrates the feasibility and impact of sustained integration efforts.

#### Integration in primary health care

Enabel has worked closely with national authorities to develop guidelines, update essential medicine lists to include psychotropic drugs, and establish national health standards for mental health care. These actions enhance the quality of care and service delivery as well as ensure policy coherence. They contribute to improving the quality and consistency of service delivery in all primary healthcare facilities (district hospitals and health centres), while ensuring policy coherence and alignment across different levels of the health system.

#### Community engagement and stigma reduction

Stigma remains a major barrier to seek help and access mental health care. Enabel integrates community awareness-raising and peer-support strategies to reduce stigma and build trust at the community level. Trained community health workers play a critical role in the early identification of mental health conditions, stigma reduction, treatment adherence and public awareness. They also play a preventive role, raising awareness on mental health risk factors and promoting self-care at community level. Enabel prioritises this inclusive, people-centred approach, ensuring that mental health care is rights-based and firmly grounded in local realities.

#### Local capacity-building through skills and workforce development

Training healthcare providers is a cornerstone. A critical barrier in most low- and middle-income countries is the lack of qualified mental health professionals. To address this gap, a task-shifting and task-sharing approach is implemented, enabling non-specialist providers, such as general practitioners, nurses and community health workers to deliver essential mental health services. This strategy optimises available resources and strengthens access to care by bringing mental health services closer to communities.

Enabel has supported the training and supervision of hundreds of health professionals to identify, manage and

refer mental health conditions. By building the competencies of non-specialised personnel, this approach contributes to the development of national expertise and enhances the sustainability of mental health service delivery.

Sustaining a capable workforce requires more than training alone. Mental health workers, including professionals and caregivers, especially those working in fragile and crisis contexts, face high risks of exhaustion and burnout, a critical yet often overlooked gap in global mental health programming. Enabel recognises that the sustainability of services depends as much on their well-being as on their technical capacity, an approach actively developed in its programmes in Palestine and Ukraine.

#### Evidence-based approaches through monitoring, evaluation and action-research

Enabel promotes the integration of mental health indicators into national health information systems to inform public policy, assess the effectiveness of actions and strengthen data-driven planning and accountability. In addition, Enabel supports action-research and the implementation of national surveys and studies to generate robust evidence on mental health needs, service utilisation and outcomes. In this regard, Enabel is currently financing a national mental health survey in Burundi, contributing to improved knowledge generation and evidence-based decision-making at national level.

#### Mental health integration in Enabel partner countries: key findings

Across its programmes in Rwanda, Burundi, Niger and Palestine, Enabel supports the integration of mental health within national health systems as part of broader efforts to strengthen primary health care.

These efforts have led to measurable improvements in service availability and workforce capacity, including the training of several thousand of health workers and increased utilisation of mental health services.

While contexts and levels of progress vary, the actions are guided by a shared commitment to health system strengthening, national leadership, capacity building, active engagement of local stakeholders and improved access to essential mental health services, in alignment with national priorities.

**Rwanda's** experience demonstrates the feasibility and benefits of a comprehensive, long-term and system-wide approach to mental health integration in strengthened health systems. For 15 years, Enabel supported the integration of mental health care into primary health care and into the community-based health insurance scheme, covering both consultations and medications, underpinned by strong government ownership and sustained commitment from local stakeholders. Key achievements include the training and supervision of health workers across all levels of care, improved access to essential psychotropic medicines, the establishment of a functional referral and counter-referral system across levels of the healthcare pyramid, the development

of mental health indicators integrated into the National Health Information System and sustained community engagement, together forming a model of integration that is both replicable and instructive for other country contexts. (Ait Mohand et al., 2017).

In **Burundi**, mental health is now formally recognised as a national health priority, integrated into the essential packages of care and national health standards and supported by newly developed national guidelines. Through a multi-partner programme in which Enabel assumed lead responsibility for mental health, over 7,000 health workers were trained, contributing to a steady increase in mental health consultations in both district hospitals and health centres. Nevertheless, significant challenges persist: limited access to essential psychotropic medicines, coordination gaps, shortages of qualified mental health professionals and high staff turnover continue to constrain the effective integration and sustainability of services. These results are encouraging given that the programme is still new and the scale of the challenges remains considerable (Ait Mohand, 2025a & Ait Mohand, et al. 2025b).

In **Niger**, Enabel has a longstanding health system strengthening approach, combined with health insurance development. The importance of mental health is increasingly recognised. The country however faces challenges in translating policy commitments into effective service delivery. Limited financial and human resources, political instability and a fragmented health information system continue to constrain the expansion of mental health services. Nevertheless, growing prioritisation of mental health within the Enabel programme — alongside increased government attention to non-communicable diseases, of which mental disorders are a significant component — is creating emerging opportunities to strengthen mental health integration within broader health system reforms (Ortuño-Gutiérrez, 2025).

In **Palestine**, efforts to strengthen mental health integration take place within a highly constrained and protracted crisis context, where prolonged exposure to extreme violence, movement restrictions and socio-economic stressors significantly affect population well-being, generating high levels of psychological distress, behavioural challenges and caregiver strain, particularly among children, adolescents and families. Enabel-supported projects focus on reinforcing mental health and psychosocial support within community, school and primary healthcare settings, combined with capacity-building for local service providers, strengthened referral pathways and stigma reduction within an overstretched health system. Together, these approaches highlight the importance of combining service integration with psychosocial support, workforce capacity-building and community engagement to address both the individual and collective dimensions of distress in fragile environments (WHO, 2024).

## Recommendations

- 1. Position mental health as a core component of projects aimed at strengthening health systems.** National governments should integrate mental health into primary care policies, financing frameworks and national health insurance schemes, ensuring long-term sustainability and equity. Mental health care must be implemented at peripheral health facilities, with community involvement.
- 2. Promote community-based awareness and engagement.** Anti-stigma activities need to be systematically introduced in community health programmes, involving people with lived experience to raise awareness and normalise mental health help-seeking.
- 3. Secure long-term funding for mental health within health budgets for national-scale implementation.** There is a need to advocate for increased budget allocations to mental health within national health strategies and to support donor coordination to avoid fragmented funding.
- 4. Foster multisectoral collaboration.** Coordinated action across all relevant sectors (health, social, legal, community services, and others) should be actively promoted to address the social determinants of mental health and strengthen cross-sector accountability.
- 5. Prioritise gender, equity and inclusion in mental health service delivery.** Mental health projects should explicitly target populations at higher risk of exclusion, including women, adolescents, people living in poverty, people living with disabilities and populations affected by conflict and displacement. Equity-sensitive approaches are essential to reduce disparities and ensure that mental health services reach those most in need.
- 6. Integrate mental health into climate change and resilience agendas.** The well-established link between climate change and the increasing burden of mental health disorders reinforces the need to systematically include mental health considerations in climate adaptation, disaster risk reduction, and resilience policies, strategies and programmes.
- 7. Invest in the well-being of mental health workers.** The sustainability of mental health services depends not only on workforce capacity but also on the well-being of those who deliver care. Targeted support mechanisms to prevent burnout and exhaustion among frontline mental health professionals and caregivers should be developed and systematically integrated into health workforce strategies, particularly in fragile and crisis contexts.

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