



Tuesday March 10, 2009
9:00 to 10:30

Lyon Convention Center
France

URBAN STRESS AND MENTAL HEALTH

Moderator

- **Maria Cattai**, Member of the Board of Directors of Petroplus Holdings AG, Switzerland

Speakers

- **Paul Corrigan**, Strategy and Commissioning Director, National Health Service, UK
- **Viviane Kovess-Masfety**, Professor, McGill University, Canada, Université Paris 5 Descartes, France
- **Ludo Lauwers**, Sr. Vice President, Vice Chairman Management Board Janssen Pharmaceutica NV, Belgium
- **Benedetto Saraceno**, Director Mental Health and Substance Abuse, World Health Organization, Switzerland

Challenger

- **Lou Marinoff**, Philosopher and professor at City College, New York, USA

Summary

GOAL

- The session's aim was to offer a debate on the presence of a link between urbanisation, stress and mental disorders. This talk was also trying to uncover what are the causes behind mental health disorders in relation with urbanisation.

THE COMPLEXITY OF THE PHENOMENA

- The main difficulty in finding a clear link between mental health and urbanisation is in properly defining what cities and what disorders will be taken into account.
- Indeed, the WHO will typically consider subjects of their studies as poor citizens of poor to middle-income towns, as these are the people that WHO traditionally help.
- However, psychologists, psychiatrists and pharmaceutical industries have difficulties obtaining good quality epidemiologic data in these parts of the world and tend to concentrate their efforts in industrialized countries, where such data is available.
- Finally, cities are highly heterogeneous between and amongst themselves and the panel warned against considering all cities are a unique entity.
- Cities of today are constantly renewing their population through national and international immigration which in turn results in dislocation of the urban inhabitants.



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- This forces people to cope with great new changes in the environment in a solitary way, without their cultural and familial environment to support them.

TENTATIVE CAUSES BEHIND MENTAL HEALTH DISORDERS IN CITIES

- Regarding the actual mental health “troubles”, it can be admitted that there is no agreement on the direct influence of urbanisation. However, the second hit theory exposed by Ludo Lauwers (where a favourable background is triggered by an event such as a geographic dislocation) is seen as highly interesting and requires in depth study.
- Indeed, a general consensus was found on the predisposition of a person regarding mental disorders, which Lou Marinoff linked to the Darwinian Theory where above a certain population density, members need to migrate or start braking down.
- This Theory was shared by Ludo Lauwers when he explained that this population density issue was responsible for triggering an inflammatory response, the second hit.
- Nevertheless Dutch cases show that density is not an automatic link towards mental disorders.
- This reason was recognized by the panel that noted that although genetic predispositions exist, studies show that the time one stays as a child in a city is much more influential in the buildup of a mental health issue.
- Urbanization can also be an indirect factor as substance abuse (licit and illicit) is higher in the cities than in rural environments, which in turn has a direct link to mental illnesses.
- In order to effectively reintroduce such people in urban life, it is crucial not only to treat the symptoms but also to reinstate a bond between them and the city with the help of local authorities.
- Such reinstating is more easily achieved if the society keeps some form of social tissue such as medical and economical safety nets.
- This double treatment (symptom and patient treatment) can only be achieved if the stigma of such illnesses can be removed and patients only considered as requiring assistance.
- During the debate, the panel of experts stressed that the context can be as important as the fact, such as in the perception of population Diaspora which can be perceived positively (Canada, USA) or not (Europe), leading to greatly divergent acceptance attitudes.

GENERAL CONSENSUS ON MENTAL HEALTH IN CITIES

- The dissatisfaction of donors who are bombarded on multiple diseases, for multiple demands (sometimes even contradictory ones) and without clear success data for these funding demands must be addressed and changed.
- The lack of hard biology and a highly imperfect DSM (*Diagnostic and Statistical Manual*) mental disorders classification method which suffers from multiple lobbies hinders the study of such fields.
- The poverty of means and resources is critical and needs improvement.
- Scientific data are needed to successfully study these diseases and their factors.
- Finally, the importance of citizenship and reintegration of the patient into the urban society as a recovery prerogative.

Quotes

"Children are currently suffering from being over-drugged by ADD medicine, a TV culture and the deconstruction of the male social figure."
Lou Marinoff

"Mental Health is broader than psychiatry."
Benedetto Saraceno

"Nobody believes we are going to discover the schizophrenia gene."
Viviane Kovess-Masfety

"We need to dive deep in the biology of mental health, not just use soft diagnostic tools such as DSM-IV."
Ludo Lauwers

"If the dislocation goes well, fine, if not, the person could expose himself to serious mental conditions."
Paul Corrigan