


Editorial

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Severe mentally ill patients: our global migrants Neuroethical issues in psychiatry and pharmacology today. A brief manifesto toward The World Symposium 2020

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The overarching aim of this editorial is to present a dream: a World Symposium in the eternal city of Rome in which prominent psychiatric experts, neuroethicists, and lawyers dialogue on severe mentally ill (SMI) patients as our global migrants. The aim is to foster an inclusive and fruitful interdisciplinary conversation and draw up practical proposals in order to protect and promote the dignity of human persons afflicted by severe mental disorders.

Clausen and Levy define neuroethics as a real, systematic, and informed reflection on and interpretation of neuroscience and related sciences of the mind (psychology in all its many forms, psychiatry, artificial intelligence, and so on), in order to understand its implications for human self-understanding and the perils and prospects of its applications. Neuroethics has developed as a response to the increasing power and pervasiveness of the sciences of the brain and the mind.¹

According to the World Health Organization (WHO), good mental health is related to mental and psychological well-being. It is amply documented but little is known that mental disorders affect one in four people around the globe. Moreover, we are still facing the complex and social issue of abolishing the stigma of mental illnesses. Mental dysfunctions rooted in the nervous system's disorders are still not considered on the same level as cardiovascular disease, cancer, kidney disease, and other illnesses. Although public knowledge about neurosystemic mental diseases is usually seen as valuable, knowledge about SMI is often disregarded. As a consequence, many persons suffering from severe mental disorders still avoid asking for help, and they may not receive appropriate therapeutic and social support also due to the community's lack of awareness.² Out of a world population of 7.7 billion, 2% suffer from an SMI. Depression affects about 264 million people (2.7% males; 4.1% females); anxiety disorders strike around 284 million individuals (2.8% males; 4.7% females); bipolar disorder amounts to 46 million, whereas eating disorders and schizophrenia affect around 16 million and 20 million, respectively (<https://ourworldindata.org/mental-health>).

To give a sense of the scale of the problem, the contemporary global migration crisis involves roughly the same amount of individuals.

The subject of psychiatry is not a brain, a dysfunctional piece of neural tissue, but human patients, whom can be compared to our society's eternal migrants who have never had a home. In addition, there is the correlated tragedy of suicide: one person dies every 40 seconds. Every suicide has long-lasting effects on the people left behind.

Inspiring by Pope Francis Message for the 105th World Day of migrants and refugees 2019 (September 29, 2019) in which he repeatedly highlights the fact that the contemporary migration burden is not just about migrants, but instead is about evil, terrorism, violent conflicts, all-out wars that continue to tear humanity apart. Injustices and discrimination follow one upon the other, economic and social imbalances on a local or global scale, individualism, utilitarian mentality, indifference, and so forth. At the end, and above all, it is the poorest of the poor and the most disadvantaged who pay the price.

How can we not fail to recognize a very close analogy, or even, an identification between our severe mental illness (SMI) patients and today's migrants? They are all extremely vulnerable people seeking help.

In order to promote mental well-being, to prevent severe mental disorders, and to protect human rights and the care of people affected by those painful conditions, herein, we propose a *global call for action* focused on a gathering in Rome of experts in the field of medicine, psychiatry, pharmacology, and neuroethics, as well as law, and others. The aim is to foster an inclusive and fruitful interdisciplinary dialogue and present proposals able to protect and promote the dignity of the human person afflicted by severe mental disorders. Our speakers could organize their topics around Pope Francis' four key verbs—“welcome, protect, promote, integrate”—concerning the nature, treatment, ethical issues, and policies related to SMI. Our “guiding star” of reflection is the protection and promotion of all SMI patients as human persons. They are also members of our

Common Home: our real existential peripheries, which we need to attend with specific and effective proposals.³

Designed by Stephen M. Stahl, Donatella Marazziti, Armando Piccinni, and myself, the First World Symposium 2021 on “Severe Mentally Ill Patients: Our Global Migrants. Ethical, Legal, and Social Issues in Psychiatry and Pharmacology today” will take place in Rome at the European University of Rome (via degli Aldobrandeschi, 190). Numerous institutions are involved, among which I want to mention and thank the Pontifical Academy for Life in the person of its President, Bishop Vincenzo Paglia.

Each day, experts in medicine and neuroethics will discuss the main questions related to SMI migrants. For example, is there free will when you are psychotic? Does incompetence entail loss of free will? What is the meaning of life if you suffer from schizophrenia? Why has this illness been shunned by humanity over the centuries?

Can religious faiths help find the right options? What does SMI teach us about ourselves?

During the symposium, Pope Francis himself will speak on the relevance of ethical reflections in psychiatry.

Over the coming weeks, Prof. Stahl and I will send the formal invitation letter to our 25–30 potential speakers.

Disclosure. Alberto Carrara has nothing to disclose.

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