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Crazy bake: the black dog of development?

By [Brendan Rigby](#) | Posted in: [China & Development](#) | [June 8, 2011](#) | [2 comments so far.](#)

Crazy Bake is a well-known NGO in Beijing, which seeks to improve the lives of patients living in a mental health facility. It is a program

"Involving the mentally ill at their facility just outside of Beijing. Crazy Bake's goal is to improve the patients living conditions by giving the patients a meaningful task that is within their capabilities. The project was initiated by Yvonne Gerig and Natascha Prigge. In the past 3 years the project focused on a gardening project, crazy grow. Crazy Bake is an extension of the program designed to incorporate more patients and ultimately collect more funds for good use".

The bakery is attached to the private hospital at which the patients stay. There is no psychotherapy or occupational therapy available for the patients. The expenses incurred by the patients, for food, housing, care, and medication is 800RMB (AUD\$115) per month. Every patient (note: not beneficiary) receives a monthly 'salary' of 80RMB per month (AUD\$0.37 per day). Sales amount to 1000RMB per *week*. Money is also raised through sponsorship and gifts-in-kind received in donation. Furthermore, according to the organisation, the patients are directly involved and in control of the decision-making process. They decide what to acquire with the sales profits at the hospital. Some notable acquisitions over the past few years:

- Purchase of a karaoke machine
- Purchase of a fridge for ice cream

You can learn more about the organisation in this [MSNBC video spotlight](#).

Now, there are a few things to consider before we judge too harshly or otherwise. David Oaks, of [Mindfreedom International](#), urges us to find more inclusive language than 'mentally ill'. Crazy Bake's website is littered with the phrase, and, in addition to the name 'Crazy Bake', does not support their mission to change perceptions of mental health in China. Despite this, the organisation is up against one heck of a wall in terms of mental health support in China. There is widespread discrimination and misunderstandings about mental health in China. It was only in 2001, that homosexuality was **formally removed** from the official *Chinese Classification of Mental Disorders*. "Traditionally, Chinese consider mental disease to be a shame," and there is a fear of revealing issues to family and colleagues. In a society grounded in the cultural notion of 'face', this is of no surprise.

There is another way to approach this issue though, at it involves taking back previously inappropriate words (in much the same way that the African American community, people with disabilities, and **women** have done so) and hence, raising awareness of mental health issues in China. Through this lens, using the word "crazy" may raise awareness through its stark use:

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*"I feel words such as 'crazy' can actually be positive in certain contexts. Consider, 'I'm crazy in love,' or Apple's early motto for their computers, 'Insanely great.' The word origin for crazy is 'cracked,' and in Japanese art the pottery with a beautiful imperfection has a special **Wabi-Sabi** value. On the other hand, a newspaper editorial or journalist disparaging certain citizens as 'lunatics' ought to be opposed" (David Oaks).*

Of the health budget in China, which was 5.5% of GDP in 2009, only 2.35% of it goes towards mental health (although we should always proceed with caution when it comes to reported statistics, particularly budgetary, in China). This is in a country where **reportedly** 1 in every 13 suffer mental health problems.

"China has only about 14,000 qualified psychiatrists...about the same number as France, with 60 million people—compared to China's 1.3 billion [...] Two million Chinese try to kill themselves annually...and China's 750 or so state-run mental-health institutions can't keep pace with the rising demand for their services" (from [here](#), original article not found).

1 in 13 is about 100 million people. More alarmingly is the **estimation** that Chinese children account for 15-20% of children in the world with mental health problems. The mental health profession and services are still very much in their infancy. In 2005, there were only 572 institutions in the whole of China providing mental health services. That is only 1.4 beds per 10,000 people. The lack of services and support is further exacerbated in Chinese rural areas, where the majority (750 million) of the population lives.

It is an issue that I am only vaguely aware of, and one that I was completely oblivious to living here in Beijing. I may have even purchased some baked goods made by the Crazy Bakers without the slightest clue of its source. Mental health is not an issue that I am experienced or knowledgeable enough to address. Excuse the sports analogy, but if mental health were baseball, I would be the guy watching basketball. I can only highlight mental health as an issue that is rarely addressed, as far as I am aware (please speak up and correct me), in the mainstream aid and development community.

The stigma, discrimination and lack of inclusiveness is not just endemic to China. According to WHO, 450 million people globally are affected by mental health problems, which cause devastating and life-threatening human, social, and economic **costs**. Furthermore, there is a fear of losing 'face' not just in China, but across many different societies, albeit by a different name. According to **one recent survey** of attitudes towards mental health, 50% of those surveyed would be uncomfortable talking to their employers about a mental illness. Yet, if you were to take a sick day, it could likely be due to your mental health. According to *Mind For Health*, a UK-based advocacy group, mental health problems are responsible for an estimated 14% of the **Global Burden of Disease** (illness and deaths), but receive only 1% of world health expenditure.

Andrew Chambers, **writing** in the *Guardian*, calls mental health the invisible problem in international development. **Researchers** in 2003 found that of 191 countries studied, 32% did not have a specified budget for mental health. Furthermore, of the 89 countries which responded to the researcher's questionnaires, 36% spent less than 1% of their total budget on mental health. Invisibility is further exacerbated by the lack of interest from NGOs, charities and the wider international community. Vikram Patel, Professor of International Mental Health at the London School of Hygiene & Tropical Medicine, **writes** that if/when mental health in Low- and Middle-Income Countries gets attention, new and innovative approaches need to be taken. The approaches to public health found in High-Income Countries cannot be replicated or reproduced.

What comes out of these readings and thinking on mental health in the development context are some questions worth thinking about and discussing:

- Is suffering from an infectious disease, like TB, more important to individuals and to others than

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suffering from schizophrenia?

- Can we place a value on different dimensions and indicators of health? Have we already? How do we do it?
- Is there a perception that mental health is not a serious issue compared with say, education, income generation, etc.?
- Is mental health considered a 'valuable good' by poor people? By you? Should it be?
- Are investments in mental health cost-effective?
- What role does stigma play in the lack of interest?
- What would the social inclusion model offer in approaching mental health?

What 'Crazy Bake' shows, in working in such a highly stigmatised, invisible and underfunded area, is that actively including people in basic social and economic activities may not be such a crazy idea.

You might also like to read:

1. [Chinese migrants: Stuck in the middle](#)
2. [Disability in China and Australia: hardly worlds apart.](#)
3. [China's moth-eaten social safety net: who will catch the poorest of the poor? Not corporations.](#)



About **Brendan Rigby**

Brendan is a education specialist with over six years of experience working as a teacher, researcher and programme officer. Although he pursued the dreams of Indiana Jones in Uzbekistan, he eventually completed an MA in Development Studies at the University of NSW. After teaching, he became a Senior Researcher and Project Manager in Learning & Teaching at Macquarie University. Most recently, Brendan was an Education Officer with UNICEF in Tamale, Ghana.

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2 Comments to "Crazy bake: the black dog of development?"



jennie rothwell says:

July 9, 2011 at 9:33 pm

black dog doesnt go away but i hope this goes some way to helping all suffering this. you just try to live with it.

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Stuart says:

UNICEF United Nations World Vision

June 15, 2011 at 2:35 pm

<http://lens.blogs.nytimes.com/2011/06/14/chasing-...>

Mental Health in Indonesia.

"To be labeled as mentally ill is devastating to most people," Ms. Star Reese said. Many people, she said, would rather be thought of as possessed, or under a spell".

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