

The International Alliance on Brain Health (IABH): Bridging global efforts toward integrated brain and mental health plans and the promotion of local implementations

Claudio L.A. Bassetti^{a,b,*}, Christopher Chen^c, Steven L. Lewis^d, Indrit Bègue^e, Kristina Adorjan^f, Diego Aguilar^g, Suvarna Alladi^h, Roongroj Bhidayasiri^{i,j}, Kailash P. Bhatia^k, Paul Boon^l, Julián Bustín^{m,n}, Marcelo Cetkovich^{m,n}, Blas Couto^{m,n}, Nilton Custodio^o, Alexandre N. Datta^{p,bd,be}, Stephanie Debette^q, Rajinder K. Dhamija^r, Guido Dorman^{m,n}, Stefan Du Plessis^s, Mitchell S.V. Elkind^{t,bf}, Andrea Fiorillo^u, Oscar Gershanik^{m,n}, Diego A. Golombek^{v,w}, Maria Eugenia González Toledo^{m,n}, Agustín Ibáñez^{x,y,z,aa,ab}, Matías Irrarrázaval^{ac}, Matilde Leonardi^{ad}, Caroline Lustenberger^{ae}, Jacobo Mintzer^{af}, Pratima Murthy^{ag}, Alfred K. Njamnshi^{ah,ai}, Santiago O'Neill^{m,n}, Alessandro Padovani^{aj}, Joanne Pike^{ak}, Olivier Piguet^{al}, Ester Piovesana^b, Konrad Rejdak^{am}, María Roca^{m,n,an,ao}, Juan Rodríguez^{ap}, Natalia S. Rost^{aq}, Hernando Santamaria-Garcia^{ar,as,at}, Lenny Shallcross^{au}, Andrea Slachevsky^{av,aw,ax,ay}, Teresa Torralva^{m,n}, Victor Valcour^{ar}, Yongjun Wang^{az}, Andrea Sylvia Winkler^{ba,bb}, Danuta Wasserman^{bc}, Facundo Manes^{m,n}

^a Department of Neurology, University of Bern, 3010 Bern, Switzerland

^b Swiss Brain Health Foundation, 6595 Riazzino, Switzerland

^c Department of Pharmacology, Yong Loo Lin School of Medicine, National University of Singapore, 119228 Singapore, Singapore

^d World Federation of Neurology, London WC1N 3BG, UK

^e Department of Psychiatry, University of Geneva, 1205 Geneva, Switzerland

^f Department of Psychiatry and Psychotherapy, University of Bern, 3008 Bern, Switzerland

^g Alzheimer's Disease International, London SE1 4PU, UK

^h Department of Neurology, National Institute of Mental Health and Neurosciences (NIMHANS), Bengaluru 560029, India

ⁱ Chulalongkorn Centre of Excellence for Parkinson's Disease and Related Disorders, Department of Medicine, Faculty of Medicine, Chulalongkorn University and King Chulalongkorn Memorial Hospital, Thai Red Cross Society, Bangkok 10330, Thailand

^j The Academy of Science, The Royal Society of Thailand, Bangkok 10330, Thailand

^k Department of Clinical and Movement Neurosciences, UCL Queen Square Institute of Neurology, University College London, London WC1N 3BG, UK

^l Department of Neurology, Ghent University Hospital, Ghent University, 9000 Ghent, Belgium

^m Institute of Cognitive Neurology (INECO) Foundation, C1060AAF Buenos Aires, Argentina

ⁿ Favaloro University, C1078AAI Buenos Aires, Argentina

^o Department of Neurology, Instituto Peruano de Neurociencias, Lima 15046, Peru

^p Department of Pediatric Neurology, Developmental Pediatrics and Neurorehabilitation of Northwest Switzerland, University Children's Hospital UKBB, 4056 Basel, Switzerland

^q Paris Brain Institute (ICM), INSERM U1127, CNRS UMR 7225, Sorbonne Université, 75013 Paris, France

^r Department of Neurology, Institute of Human Behaviour and Allied Sciences (IHBAS), New Delhi 110095, India

^s Department of Psychiatry, Stellenbosch University, 7602 Stellenbosch, South Africa

^t Department of Neurology, Vagelos College of Physicians and Surgeons, Columbia University, New York, NY 10032, USA

^u Department of Psychiatry, University of Campania Luigi Vanvitelli, 80138 Naples, Italy

^v Laboratorio Interdisciplinario del Tiempo (LITERA), Department of Life and Behavioral Sciences, Universidad de San Andrés and CONICET, B1644 Victoria, Buenos Aires, Argentina

^w UNESCO Chair for the Interdisciplinary Study of Time, Buenos Aires, Argentina

^x Latin American Brain Health Institute (BrainLat), Universidad Adolfo Ibáñez, 7941169 Santiago, Chile

* Corresponding author at: Department of Neurology, University of Bern, 3010 Bern, Switzerland.

E-mail address: claudio.bassetti@unibe.ch (C.L.A. Bassetti).

^y Global Brain Health Institute, Trinity College Dublin, D02 PN40 Dublin, Ireland^z Department of Biophysics, School of Medicine, Istanbul Medipol University, 34810 Istanbul, Türkiye^{aa} BarcelonaPeta Brain Research Center (BBRC), Pasqual Maragall Foundation, 08005 Barcelona, Spain^{ab} Cognitive Neuroscience Center (CNC), Universidad de San Andrés, B1644 Victoria, Buenos Aires, Argentina^{ac} Pan American Health Organization (PAHO), Santiago, Chile; University of Chile, Santiago 8380453, Chile^{ad} Department of Neurology, Public Health and Disability Unit, Fondazione IRCCS Istituto Neurologico Carlo Besta, 20133 Milan, Italy^{ae} Neural Control of Movement Lab, Department of Health Sciences and Technology, ETH Zurich, 8092 Zurich, Switzerland^{af} Department of Psychiatry and Behavioral Sciences, Medical University of South Carolina, Charleston, SC 29425, USA^{ag} Department of Psychiatry, National Institute of Mental Health and Neurosciences (NIMHANS), Bengaluru 560029, India^{ah} Brain Research Africa Initiative (BRAIN), 1226 Geneva, Switzerland^{ai} The University of Yaoundé I, BP 337 Yaoundé, Cameroon^{aj} Department of Clinical and Experimental Sciences, University of Brescia, 25123 Brescia, Italy^{ak} Alzheimer's Association, Chicago, IL 60631, USA^{al} School of Psychology and Brain and Mind Centre, The University of Sydney, Sydney, NSW 2006, Australia^{am} Department of Neurology, Medical University of Lublin, 20-059 Lublin, Poland^{an} Institute of Translational and Cognitive Neuroscience (INCYT), CONICET–INECO Foundation–Favaloro University, C1060AAF Buenos Aires, Argentina^{ao} National Scientific and Technical Research Council (CONICET), Buenos Aires, Argentina^{ap} Global Council on Brain Health, American Association of Retired Persons (AARP), Washington, DC 20049, USA^{aq} J. Philip Kistler Stroke Research Center, Department of Neurology, Massachusetts General Hospital, Harvard Medical School, Boston, MA 02114, USA^{ar} Global Brain Health Institute, University of California San Francisco, San Francisco, CA 94143, USA^{as} PhD Program in Neuroscience, School of Medicine, Pontificia Universidad Javeriana, 110231 Bogotá, Colombia^{at} Center for Memory and Cognition Intellectus, Hospital Universitario San Ignacio, 110231 Bogotá, Colombia^{au} World Dementia Council, London SW1H 0EU, UK^{av} Memory and Neuropsychiatric Center (CMYN), Department of Neurology, Hospital del Salvador and Faculty of Medicine, University of Chile, Santiago 7500922, Chile^{aw} Neuropsychology and Clinical Neuroscience Laboratory (LANEN), Institute of Biomedical Sciences, Faculty of Medicine, University of Chile, Santiago 8380453, Chile^{ax} Geroscience Center for Brain Health and Metabolism (GERO), 8320000 Santiago, Chile^{ay} Department of Neurology and Psychiatry, Clínica Alemana–Universidad del Desarrollo, Santiago 7591538, Chile^{az} Department of Neurology, Beijing Tiantan Hospital, Capital Medical University, Beijing 100070, China^{ba} Department of Neurology, TUM University Hospital, TUM School of Medicine and Health, Technical University of Munich, 81675 Munich, Germany^{bb} Department of Community Medicine and Global Health, Institute of Health and Society, University of Oslo, 0450 Oslo, Norway^{bc} National Centre for Suicide Research and Prevention, Karolinska Institutet, 17177 Stockholm, Sweden^{bd} Children's Hospital KSA Aarau, 5001 Aarau, Switzerland^{be} University of Basel, 4001 Basel, Switzerland^{bf} American Heart Association, Dallas, TX 75231, USA

ARTICLE INFO

Keywords:

Brain health

Neurology

Psychiatry

Pediatrics

Neurodevelopmental disciplines

Global health

Prevention

Brain disorders

International collaborations

Reciprocal innovation, bidirectional learning

ABSTRACT

The convergence of neurological, psychiatric, neurodevelopmental, and public health approaches to brain health is reshaping global strategies for prevention, care, and policy. However, major gaps remain in the integration and implementation of brain and mental health frameworks across healthcare systems and regions.

This paper describes the foundation and early development of the International Alliance on Brain Health (IABH), established in Switzerland in 2025 to promote interdisciplinary collaboration, reciprocal innovation, and implementation-oriented exchange between the global North and global South. Drawing on the Alliances founding meeting in Bern, its contribution as a partner to the World Brain Health Forum organized by the Paris Brain Institute, and its subsequent meeting in Buenos Aires, the paper outlines the Alliance's global positioning and priorities for translating brain health frameworks into practice.

Key themes included integrated neurological and mental health approaches, prevention across the life course, digital innovation, brain capital, workforce development, and stronger inclusion of global South perspectives in international policy dialogue. The Alliance also emphasized bidirectional learning and locally adaptable implementation strategies aligned with WHO brain health frameworks.

Under the joint patronage of the World Federation of Neurology and the World Psychiatric Association, the IABH represents an emerging platform for cross-continental collaboration in brain health.

1. Introduction

Neurology and psychiatry share common historical and scientific foundations but have progressively evolved into distinct disciplines over time [1]. More recently, growing awareness of the interdependence of neurological, psychiatric, cognitive, behavioural, and social dimensions of health has renewed calls for more interdisciplinary approaches to brain health. As Bègue and colleagues emphasize, “the human brain does not recognize the boundaries we have constructed between neurology and psychiatry” [2], highlighting the need for collaboration across traditional disciplinary boundaries. At the same time, although brain health is increasingly reflected in international declarations and conceptual frameworks, translating these principles into coordinated action across fragmented healthcare systems remains a major challenge, particularly given the limited integration among clinical care, public health, research, and policy domains.

This perspective aligns with a broader global movement toward

interdisciplinary models of brain health, supported by evolving World Health Organization (WHO) policy frameworks and major professional society initiatives. Through the Intersectoral Global Action Plan on Epilepsy and Other Neurological Disorders (WHO IGAP), approved by 198 Member States at the World Health Assembly in 2022, WHO called for a transformative and coordinated approach to neurological and mental health based on shared objectives and common targets for global brain health [3]. WHO has also advanced a definition of brain health that increasingly informs international policy development. Additional WHO frameworks further support this transition. The Comprehensive Mental Health Action Plan 2013–2030 establishes that “there is no health without mental health,” with objectives spanning governance, community-based services, promotion and prevention, and strengthened information systems [4]. The World Dementia Report and the WHO Position Paper Optimizing Brain Health Across the Life Course define brain health as “the state of brain functioning across cognitive, sensory, social-emotional, behavioural and motor domains, allowing a

person to realize their full potential over the life course" [5].

Professional societies have similarly promoted interdisciplinary frameworks for brain health. The European Academy of Neurology's "One Brain, One Life, One Approach" strategy recognizes that brain health extends beyond the absence of disease to encompass "all cognitive, emotional, behavioural and social functions which are necessary to cope with life situations" [6]. The American Academy of Neurology and the European and World Psychiatric Associations have likewise emphasized life-course approaches linking neurological, psychiatric, mental, and social wellbeing [7,8]. Complementary initiatives, including the European Brain Health Mission and the Brain Health Roadmap, have further promoted coordinated research, prevention, and policy efforts in this field [9,10].

The Yaoundé Declaration on Brain Economy, Brain Health, and Brain Capital, adopted during the first African High-Level Science Summit in Cameroon and presented at United Nations, G7, and G20 forums in 2024 and 2025, further extends this vision by recognizing the central role of the human brain in education, science, culture, communication, and innovation [11]. The Declaration calls for international frameworks that support a transition toward a "brain-positive economy" and highlights the important contribution of Africa and other regions of the Global South in shaping this emerging agenda.

The Alliance's work is informed by pioneering initiatives across multiple countries, beginning with Poland's early initiative in 2015, followed by Norway's comprehensive National Brain Health Strategy, the first sustained national framework [12], and subsequent efforts promoted through foundations, professional societies, academic initiatives, and policy-oriented collaborations across countries including the United States, Switzerland, Germany, Italy, Finland, Spain, Brazil, South Africa, and Uruguay [7,13–15]. Asia-Pacific initiatives further illustrate the diversity of implementation efforts, including Singapore's healthy-aging models, India's Karnataka Brain Health Initiative, and Thailand's digital Parkinson's disease screening frameworks [16,17].

Against this backdrop, the International Alliance on Brain Health (IABH) was established as an inclusive and internationally oriented platform dedicated to fostering reciprocal learning between the global North and the global South across neurology, psychiatry, neuro-rehabilitation, pediatrics, neuroscience, public health, policy, patients' organizations, and industry [18]. Rather than proposing a new stand-alone framework, the IABH seeks to connect existing initiatives through implementation-oriented and intersectoral approaches across regions and disciplines. The Alliance aims to facilitate dialogue among stakeholders from diverse settings, promote knowledge exchange and partnerships, and support the translation of shared experiences into concrete actions. At the same time, it seeks to strengthen political engagement and advance brain health within national and international policy agendas.

2. Foundation and governance of the International Alliance on Brain Health

The IABH was founded with the support of the Swiss Brain Health Foundation (SBHF) in Bern in June 2025. Crucially, the Alliance operates under the distinguished patronage of the two leading world organizations in brain health: the World Federation of Neurology (WFN) and the World Psychiatric Association (WPA).

The joint patronage of the WFN and WPA reflects the Alliance's commitment to strengthening collaboration between neurology and psychiatry at an international level. Representing neurological and psychiatric societies in more than 126 and 140 countries respectively, the two organizations are among the leading global bodies in their fields and provide the IABH with broad interdisciplinary representation and international reach.

3. Key events of the International Alliance on Brain Health

The IABH has convened two major international meetings and contributed to a landmark international brain health forum, each helping to expand the Alliance's global reach, interdisciplinary engagement, and implementation-oriented agenda.

3.1. Bern symposium: founding of the alliance (June 12–13, 2025)

The inaugural symposium, "National, Regional and International Plans for Brain and Mental Health: Bridging the Gaps," was held at the Embassy of Italy and *sitem-insel* in Bern, Switzerland. This two-day event, which was organized by the Swiss Brain Health Foundation (SBHF, <https://swissbhf.ch>) and the University of Bern, brought together representatives from international organizations including the World Health Organization (WHO), the European Brain Council (EBC), the European Academy of Neurology (EAN), the European Psychiatric Association (EPA), the World Federation of Neurology (WFN), the World Psychiatric Association (WPA), the American Academy of Neurology (AAN), American Heart Association (AHA), and the European Paediatric Neurology Society (EPNS).

The symposium featured presentations of 22 brain plans and initiatives across five continents, spanning societal, regional, and national levels, including those from India, Singapore, Argentina, Cameroon, Switzerland, Italy, the United States, Canada, Germany, Norway, Poland, Spain, and Finland. Swiss perspectives were provided by leaders from the Federal Office of Public Health, Health Promotion Switzerland, and the Canton of Bern.

Comparative discussions across these initiatives highlighted several recurring challenges, including fragmentation between neurological and mental health services, disparities in financing and workforce development, limited implementation capacity, and the lack of standardized measures for brain health. At the same time, participants identified shared priorities across regions, particularly the need for prevention-oriented approaches, stronger intersectoral coordination, and better integration of brain and mental health within public policy frameworks.

Key outcomes included the formal establishment of the IABH, the adoption of the Bern Declaration on Brain Health articulating 10 core principles for global brain health action [18], and the initiation of a broader collaborative process aimed at strengthening international coordination and implementation-oriented partnerships.

3.2. World brain health forum: Paris (January 14–15, 2026)

Coinciding with the 15th anniversary of the Paris Brain Institute, the World Brain Health Forum 2026 was held at the Paris Brain Institute and UNESCO House. The International Alliance on Brain Health (IABH) contributed to the Forum as a partner alongside the Cure-ND European Alliance. The event represented a major international multi-stakeholder gathering dedicated to advancing brain health.

The Forum was inaugurated by His Excellency Ban Ki-moon, 8th Secretary-General of the United Nations, and Dr. Tedros Adhanom Ghebreyesus, Director-General of the World Health Organization, reflecting the growing political recognition of brain health. The Forum also underscored the increasing recognition of brain health as a societal, economic, and political priority requiring coordinated global action [19].

The scientific program addressed integrated approaches to brain health, prevention and therapeutics, artificial intelligence and data science, precision medicine across the lifespan, and international collaboration for equitable innovation.

The Forum was organized by the Paris Brain Institute in partnership with the Cure-ND European Alliance and the International Alliance on Brain Health, together with an international organizing committee including leaders from Europe, North America, South America, Africa, Asia, and Australia. Strategic directions emerging from the Forum were

further developed the following day at a roundtable held at the Institut de France – French Academy of Sciences.

3.3. Buenos Aires meeting: Latin American perspectives (April 24–25, 2026)

Held in Buenos Aires following the approval by Argentina's Chamber of Deputies of a pioneering national bill advancing brain health promotion and addressing Alzheimer's disease and other dementias, the meeting coincided with the 20th anniversary of the INECO Foundation and was co-organized with the SBHF. The event brought together representatives from major international brain health, neurological, psychiatric, public health, dementia, and patient advocacy organizations, including the Alzheimer's Association and the World Dementia Council.

Addresses were delivered by leaders from several international organizations and professional societies, reflecting broad global engagement in brain health initiatives. The event convened more than 1500 participants from 24 countries and featured speakers from all major world regions.

The first day focused primarily on dementia prevention and cognitive health. Increasing evidence supporting interventions for the prevention of cognitive decline was discussed, emphasizing the importance of implementing prevention strategies across the life course — from early home experiences and schools to workplaces and community environments — while highlighting the value of structured and personalized prevention pathways [20,21].

The second day focused on collaboration between neurology and psychiatry and the development of synergistic international initiatives. Opportunities and challenges in aligning strategies across regional, national, and global frameworks were reviewed in the context of recent WHO recommendations integrating mental health, brain health, and substance use approaches [22].

Additional discussions addressed several emerging priorities: 1) the

role of sleep and circadian health as fundamental pillars of brain health and predictors of physical and mental wellbeing [23–25]; 2) advances in artificial intelligence and multimodal data analysis, including exposome-related data, to support prediction and early intervention strategies for brain disorders [26–28]; 3) the implications of brain health for societal productivity and economic development [29–31]; 4) the need for new educational approaches to address workforce shortages in neurology and psychiatry [32]; and 5) the environmental and exposome-related determinants of neurodegeneration and brain health, including discussion of environmental risk factors and prevention-oriented public health strategies [26–28,33].

The Buenos Aires meeting reinforced the Alliance's commitment to bidirectional learning and reciprocal innovation by promoting the exchange of approaches across diverse healthcare settings and strengthening partnerships with Latin American academic institutions, clinical networks, and policymakers. Discussions highlighted several recurring strategic priorities, including the centrality of brain health across the lifespan, the preventability of many brain disorders through modifiable risk factors, the interdependence of cardiovascular and brain health, the need to overcome professional silos, and the importance of regional implementation alongside global frameworks.

These discussions also informed a series of implementation-oriented recommendations focused on advocacy coordination, legal and financial frameworks, measurement standardization, and public engagement, which will contribute to the Alliance's next phase of work (Fig. 1; Table 1).

4. Scope and unique global positioning of the International Alliance on Brain Health

The Alliance recognizes that brain health extends beyond clinical treatment to encompass cognitive, emotional, and social capabilities that enable individuals to realize their full potential across the life

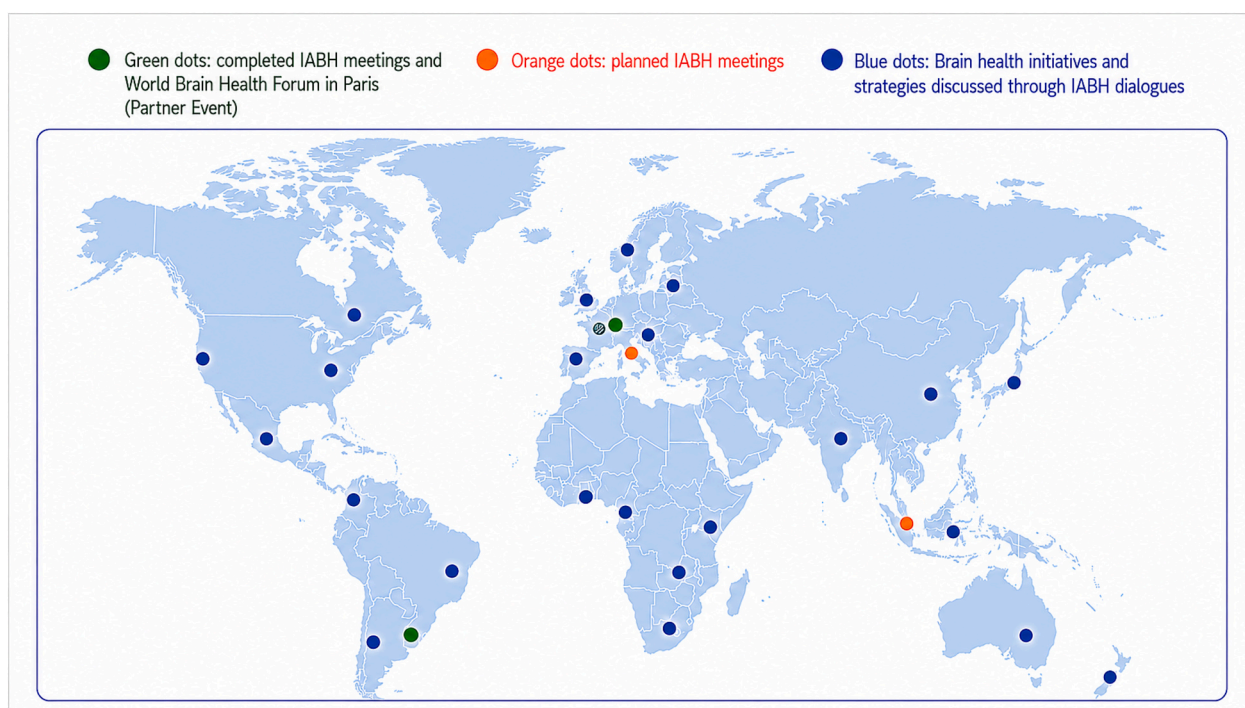


Fig. 1. International Alliance on Brain Health (IABH): global engagement and brain health initiatives. World map showing countries and regions engaged through IABH meetings, collaborations, and policy dialogues. Green dots represent completed meetings (Bern and Buenos Aires) and the World Brain Health Forum in Paris, to which the IABH contributed as a partner, orange dots represent planned meetings (Rome and Singapore), and blue dots represent countries with regional or national brain health initiatives discussed within IABH activities. (For interpretation of the references to colour in this figure legend, the reader is referred to the web version of this article.)

Table 1

Selected brain health related plans, strategies, initiatives, and policy frameworks discussed within IABH activities.

Region / Country	Initiative / Framework	Year	Strategic Focus	Distinctive Contribution
Argentina	Brain Health and Alzheimer's Bill	2025; approved by the Chamber of Deputies and pending consideration by the Senate	Brain health promotion, dementia prevention, diagnosis, and care	A pioneering national parliamentary initiative advancing the transition from a disease-specific dementia approach toward a broader brain health framework
Cameroon	Yaoundé Declaration on Brain Economy, Brain Health, and Brain Capital	2024	Brain health, brain capital, and sustainable development	Positions Africa as a leader in reverse innovation
Chile	National Dementia Plan	2017; updated 2025–2035	Dementia prevention, brain health promotion, and integrated care	Embeds brain health promotion and prevention within a national dementia policy framework and supports implementation across the health system
China	National stroke prevention and control system initiatives	2025	Stroke prevention and integrated neurological care	Demonstrates large-scale multilevel implementation and health-system coordination
Finland	The Finnish Brain Health Network	2021	Prevention, research, and equitable access	Connects neuroscience innovation with public policy
Germany	German Brain Plan (Deutscher Gehirnplan Agenda 2030)	2022	Prevention, rehabilitation, and awareness	Elevates traumatic brain injury as a public health priority
Ghana	Inclusive Education Policy	2015	Neurodevelopmental conditions	Links brain health with inclusive education
Italy	Italian Brain Health Strategy 2024–2031	2024	Dementia prevention and lifelong brain health	Combines policy, neuroscience, and community engagement
Karnataka	Karnataka Brain Health Initiative	2022	District multidisciplinary brain care	Demonstrates scalable regional implementation
Kenya	National NCD Strategy 2021/22–2025/26	2021	Epilepsy and neurological disorders	Expands neurological care within public health systems
Norway	Norwegian Brain Health Strategy	2018	Lifelong brain health and coordinated care	First governmental national brain health strategy
Poland	Polish Brain Plan	2015; updated subsequently	Public awareness and policy coordination	Strong stakeholder mobilisation and youth engagement
Singapore	National Mental Health and Well-being Strategy	2023	Mental health, healthy aging, and cognitive well-being	Integrates mental health and healthy aging within a national public health strategy
South Africa	National NCD Strategy 2022–2027	2022	Neurological disorders within NCD policy	Integrates brain health into chronic disease frameworks
Spain	Spanish Brain Plan	2022	Early diagnosis, prevention, and equitable care	Addresses regional inequalities through national coordination
Switzerland	Swiss Brain Health Plan 2023–2033	2023	Life-course prevention and integration	Integrates neurology and psychiatry within NCD policy
Thailand	CheckPD digital Parkinson's disease screening initiative	2024	Digital screening, early detection, and lifestyle prevention	Illustrates scalable implementation of community-based neurological screening within public health systems
United States of America	American Heart Association Brain Health Initiative	2022	Brain health promotion and prevention	Links cardiovascular and brain health through prevention and public health strategies
United States of America	Brain Economy Initiative	2024	Brain health, innovation, and economic sustainability	Positions brain health and brain capital as drivers of societal resilience, productivity, and sustainable development
Uruguay	PAHO-supported primary healthcare transformation initiatives for mental, neurological, and substance use disorders	2023–2031	Community-based care, rehabilitation, and integration of MNS disorders	Aligns regional healthcare transformation with WHO and PAHO goals for integrated brain and mental health
Zambia	National Health Strategic Plan 2022–2026	2022	Epilepsy management	Strengthens neurological service delivery

The table highlights governmental, regional, academic, and civil society efforts in brain health, emphasizing their contributions to prevention, integrated care, policy innovation, and multisector collaboration across the Global North and Global South.

course. This broader perspective moves beyond the traditional focus on disease absence to embrace the full spectrum of brain functioning—including executive function, emotional regulation, social cognition, adaptive capacity, and the continuous processes of development and learning across the life course, from early life to older age—which collectively underpin quality of life, productivity, and societal participation.

The IABH aims to advance, protect, and promote brain health globally through coordinated actions across research, policy, healthcare, and public awareness.

A central pillar of the IABH vision is the transition toward a truly integrated brain health framework that overcomes the separation of professional silos [8,34–36]. The longstanding “great divide” between neurology and psychiatry has increasingly been challenged by advances in neuroscience demonstrating the inseparability of brain, mind, and behaviour. Contemporary evidence indicates that neurological and psychiatric disorders share common genetic, environmental, and

pathophysiological mechanisms, as well as overlapping cognitive, emotional, and behavioural manifestations [8,22,37–39]. This convergence supports dimensional and transdiagnostic approaches that integrate biological, mental, psychological, social and environmental determinants across the life course, including the effects of urbanicity and the physical environment on brain health [33].

Under the joint auspices of the World Federation of Neurology and World Psychiatric Association, the IABH addresses a critical gap identified by professional societies and WHO frameworks: the need for systematic global collaboration that transcends traditional disciplinary and geographic boundaries. As an inclusive and interdisciplinary platform enabling direct interaction between neurology and psychiatry across all continents, and formally endorsed by both global organizations, the Alliance promotes integrated approaches to brain health through international meetings, interdisciplinary collaboration, and implementation-oriented exchange.

The joint patronage of the WFN and WPA is particularly significant



Fig. 2. Strategic Roadmap for Global-to-Local Brain Health Innovation. Illustration of the International Alliance on Brain Health (IABH) framework, highlighting the progression from global coordination to regional implementation and local innovation through integrated brain health initiatives, policy translation, prevention strategies, and bidirectional innovation between the Global North and Global South.

because it represents one of the first coordinated global efforts by these organizations to formally support a unified brain health initiative, breaking down traditional silos that have historically separated neurological and psychiatric approaches to brain disorders.

4.1. Building on national brain health momentum

The IABH leverages the growing global movement toward national brain health planning [40]. These emerging national and regional experiences provide practical models for implementation while ensuring that global collaboration remains grounded in diverse healthcare systems and sociocultural contexts [41,42]. The patronage of the WFN and WPA further facilitates the systematic exchange of lessons learned across neurological and psychiatric communities worldwide, supporting the development and refinement of brain health strategies across settings. Examples include district-level brain health clinics in India [16], community-based digital Parkinson's disease screening initiatives in Thailand [17], and large-scale stroke prevention networks in China, illustrating how locally adapted models can inform broader global strategies for brain health (Table 1).

Through international meetings and implementation-focused activities, the Alliance supports the adaptation of brain health strategies across diverse regional, cultural, and healthcare settings. It also promotes the exchange and comparison of implementation experiences, helping to identify strengths, gaps, and opportunities for more harmonized approaches and shared measures of brain health.

4.2. Bridging divides between ages, disciplines and professions through world organization leadership

Traditional medical education and practice have maintained separation between brain disciplines, despite growing evidence that many

conditions span several domains. The IABH challenges these traditional boundaries by serving as an international platform for interdisciplinary collaboration, shared learning, and exchange across diverse cultural and healthcare contexts.

4.3. Bridging global disparities through cross-continental collaboration

WHO data reveals that over 70% of people with neurological disorders live in low- and middle-income countries, yet access to services remains severely insufficient, with only one in ten people with dementia receiving a diagnosis in low-income countries [5]. Comparable gaps exist across other neurological conditions, including Parkinson's disease, stroke, epilepsy, and rehabilitation-sensitive disorders, where delayed recognition, limited specialist access, and fragmented long-term care continue to represent major barriers in many low- and middle-income settings. These disparities are further shaped by social determinants of brain health, including education, socioeconomic conditions, and social inclusion, which influence both exposure to risk factors and access to prevention and care.

The global reach of the IABH brings together brain health specialists from both resource-rich and resource-constrained settings, enabling the exchange of challenges, experiences, and innovative solutions. This includes advances in prevention, community-based care, and service delivery emerging from low- and middle-income countries that may help inform broader global brain health strategies [41].

This international perspective is further strengthened through interactions with broader initiatives in brain health, prevention, education, innovation, and economic sustainability, including collaborations and exchanges involving the Global Brain Health Institute (GBHI), the Brain Economy Pathfinder initiative, and the Alzheimer's Association Brain Health Advancement Institute.

Table 2
Cross-Cutting Strategic Dimensions of the International Alliance on Brain Health (IABH).

Strategic Dimension	Key Concept
Integrated Brain Health	Convergence of neurology, psychiatry, neuroscience, and mental health
Integrated Cardiovascular and Brain Health	Convergence of neurology, psychiatry, neuroscience, and mental health
Reciprocal Innovation	Reverse innovation and bidirectional exchange between global South and global North
Brain Capital & Brain Economy	Brain health as a driver of productivity and resilience
Life-Course Prevention	Prevention from pregnancy to healthy aging
Digital & AI Innovation	Tele-neurology, AI, exposome, and precision brain health
Sleep & Circadian Health	Sleep as a pillar of brain health
Community Engagement	Inclusion of patients, caregivers, and civil society
Workforce Development	Interdisciplinary education and training
WHO & Global Alignment	Collaboration with WHO and international societies
Tracer Conditions & Implementation Science	Use of selected neurological and mental health conditions to reveal system gaps, test care pathways, and scale practical interventions across health systems
Overview of the core strategic dimensions underpinning the IABH framework, including integrated brain health, prevention, innovation, brain capital, community engagement, and global collaboration.	

4.4. Operationalizing professional society visions globally

The Alliance provides a comprehensive and global platform where specialists and organizations from all six continents can contribute to the implementation of the WHO IGAP and its focus on optimizing global brain health and reducing the burden of mental and neurological disorders, alongside related initiatives including the EAN's "One Brain, One Life, One Approach", the AAN's emphasis on cross-disciplinary collaboration and preventive neurology, the EPA-EAN joint perspective on brain health and the WPA's mental health frameworks, and the recently established WFN Brain Health Strategy Committee.

Unlike traditional international medical organizations, which often maintain disciplinary silos even in global settings, the IABH is structured to promote interdisciplinary dialogue and collaboration across continents. This creates opportunities for specialists to learn from different healthcare systems, culturally diverse approaches to brain health, and innovative strategies developed across global and local care settings.

The third meeting of the IABH will take place in Rome (November 25–27, 2026), focusing on the prevention of brain disorders, sleep and brain health, comorbidity between neurological and psychiatric disorders, and national brain and mental health plans. The fourth meeting, planned for Singapore in 2027, will focus on longevity, social prescribing, and regional implementation models in brain health, including healthy aging, dementia prevention, and digital innovation (Fig. 2; Table 2).

5. Conclusion

Ultimately, bridging the collaborative divide in brain health represents a scientific necessity and a societal imperative, requiring integrated, life-course approaches that unify prevention, care, and innovation across disciplines.

The International Alliance on Brain Health provides a framework to translate global brain health strategies into coordinated action(s). Through its activities in Bern, its partnership contribution to the World Brain Health Forum in Paris, and its meeting in Buenos Aires, the Alliance has established a novel platform for North-South collaboration, bringing together leaders from academia, international organizations, industry, and the public sector across six continents. The Buenos Aires meeting in particular has generated concrete operational guidance through ten implementation strategies addressing advocacy coordination, regional adaptation, legal frameworks, measurement standardization, innovation deployment, workforce development, cardiovascular partnerships, behavioural design, public engagement, and research integration.

Under the collaborative joint patronage of the World Federation of Neurology and World Psychiatric Association, the IABH serves as the world's only comprehensive platform enabling direct interaction between stakeholders across all continents.

This integrated positioning advances the integrated approaches advocated by WHO, major professional, regional, and national societies and emerging evidence on prevention potential.

Use of artificial intelligence

Generative artificial intelligence tools (ChatGPT and NotebookLM) were used for language editing and to support the development of illustrative figures. All AI-assisted outputs were reviewed, edited, and approved by the authors, who take full responsibility for the manuscript.

CRedit authorship contribution statement

Claudio L.A. Bassetti: Conceptualization, Methodology, Supervision, Project administration, Writing – original draft, Writing – review & editing. **Christopher Chen:** Writing – review & editing. **Steven L. Lewis:** Writing – review & editing. **Indrit Bègue:** Writing – review &

editing. **Kristina Adorjan**: Writing – review & editing. **Diego Aguilar**: Writing – review & editing. **Suvarna Alladi**: Writing – review & editing. **Roongroj Bhidayasiri**: Writing – review & editing. **Kailash P. Bhatia**: Writing – review & editing. **Paul Boon**: Writing – review & editing. **Julian Bustín**: Writing – review & editing. **Marcelo Cetkovich**: Writing – review & editing. **Blas Couto**: Writing – review & editing. **Nilton Custodio**: Writing – review & editing. **Alexandre N. Datta**: Writing – review & editing. **Stephanie Debette**: Writing – review & editing. **Rajinder K. Dhamija**: Writing – review & editing. **Guido Dorman**: Writing – review & editing. **Stefan Du Plessis**: Writing – review & editing. **Mitchell S.V. Elkind**: Writing – review & editing. **Andrea Fiorillo**: Writing – review & editing. **Oscar Gershanik**: Writing – review & editing. **Diego A. Golombek**: Writing – review & editing. **Maria Eugenia González Toledo**: Writing – review & editing. **Agustín Ibáñez**: Writing – review & editing. **Matías Irrazábal**: Writing – review & editing. **Matilde Leonardi**: Writing – review & editing. **Caroline Lustenberger**: Writing – review & editing. **Jacobo Mintzer**: Writing – review & editing. **Pratima Murthy**: Writing – review & editing. **Alfred K. Njamnshi**: Writing – review & editing. **Santiago O'Neill**: Writing – review & editing. **Alessandro Padovani**: Writing – review & editing. **Joanne Pike**: Writing – review & editing. **Olivier Piguet**: Writing – review & editing. **Ester Piovesana**: Project administration, Visualization, Writing – original draft, Writing – review & editing. **Konrad Rejdak**: Writing – review & editing. **María Roca**: Writing – review & editing. **Juan Rodríguez**: Writing – review & editing. **Natalia S. Rost**: Writing – review & editing. **Hernando Santamaria-Garcia**: Writing – review & editing. **Lenny Shallcross**: Writing – review & editing. **Andrea Slachevsky**: Writing – review & editing. **Teresa Torralva**: Writing – review & editing. **Victor Valcour**: Writing – review & editing. **Yongjun Wang**: Writing – review & editing. **Andrea Sylvia Winkler**: Writing – review & editing. **Danuta Wasserman**: Writing – review & editing. **Facundo Manes**: Conceptualization, Supervision, Funding acquisition, Writing – review & editing. All authors critically reviewed the manuscript, approved the final version, and agreed to be accountable for all aspects of the work.

Funding

This work was primarily supported by the Swiss Brain Health Foundation (SBHF) and the University of Bern, Switzerland; and by the Institute of Cognitive Neurology (INECO) Foundation, Argentina.

Declaration of competing Interest

Agustín Ibanez is supported by grants from the Multi-partner consortium to expand dementia research in Latin America [ReDLat2, supported by Fogarty International Center (FIC), National Institutes of Health, National Institutes of Aging (R01 AG057234, R01 AG075775, R01 AG21051, R01 AG083799, CARDS-NIH, R01 AG057234), Alzheimer's Association (SG-20-725707), Rainwater Charitable Foundation – The Bluefield project to cure FTD, and Global Brain Health Institute)], ANID/FONDECYT Regular (1250091 and 1210176 and 1220995); ANID/PIA/ANILLOS ACT210096; JPI JPND-Care, DISCERN 2025 - Health and Social Care Research with a Focus on the Moderate and Late Stages of Neurodegenerative Diseases; FONDEF ID20I10152, and ANID/FONDAP 15150012; Wellcome Trust award for BRAIN-CLIMA: Investigating the Combined Impact of Heat and Air Pollution on Blood-Brain Barrier Integrity and Brain Aging in Latin America, (335293/Z/25/Z), Wellcome Leap CARE Program (Grant Number: CARE-2025-0883490149) for the project “Advancing Female-Specific Predictive Models and Risk Assessment Tools for Alzheimer's Disease in the US and Latin America, and the CliCBrain (Horizon ID: 101236426; DOI <https://doi.org/10.3030/101236426>, Marie Skłodowska-Curie Actions - MSCA).

Mitchell S. V. Elkind is a salaried employee of the American Heart Association.

Nilton Custodio is supported by grants from the Multi-partner consortium to expand dementia research in Latin America [ReDLat2, supported by National Institute of Health, National Institute of Aging: R01AG057234 and R01 AG075775, Alzheimer's Association (SG-20-725707)]; CliCBrain (Horizon ID: 101236426; DOI <https://doi.org/10.3030/101236426>, Marie Skłodowska-Curie Actions - MSCA); Global Latino Sequencing Study for Alzheimer's Disease (GLASS-AD, supported by National Institute of Health, National Institute of Aging: 1U01AG081817-01); Resilience in Andean American Indigenous with Alzheimer's disease (supported by Alzheimer's Association: 24AARG-D-1246942); and Latin American initiative for lifestyle Intervention to Prevent Cognitive Decline and reduce risk study (LatAm FINGERS supported by Alzheimer's Association: SG-21-715176).

Andrea Slachevsky is supported by ANID/Fondecyt (1231839), Alzheimer's Association (Global Real-World Data Platforms, ALZ-RWD-26-1466627 as well as the Multi-Partner Consortium to Expand Dementia Research in Latin America (ReDLat), supported by the National Institute on Aging (NIA) (grants R01AG057234, R01AG075775, and R01AG083799). Additional support was provided by the Bluefield Project to Cure Frontotemporal Dementia (Building Capacity for Frontotemporal Dementia Trial in ReDLat), the TAU Consortium and the Rainwater Charitable Foundation (Multi-Partner Consortium for Dementia Research in Latin America), and the Alzheimer's Association (Global Real-World Data Platforms, SG-20-725707).

The contents of this publication are solely the responsibility of the authors and do not represent the official views of these institutions. The funders had no role in study design, data collection and analysis, decision to publish or preparation of the manuscript. The other authors declare no conflicts of interest.

Acknowledgements

The authors gratefully acknowledge all participants of the International Alliance on Brain Health (IABH) Meeting and thank the Swiss Brain Health Foundation (SBHF), the University of Bern, the INECO Foundation, the Paris Brain Institute, the Brain Research Africa Initiative (BRAIN), the American Heart Association, the Alzheimer's Association, Prof. Cláudia Braga (University of São Paulo, Brazil), and all partner organizations, sponsors, and organizers for their support of the IABH meetings and the development of this work.

References

- [1] A.M. Kanner, When did neurologists and psychiatrists stop talking to each other? *Epilepsy Behav.* 4 (6) (2003) 597–601, <https://doi.org/10.1016/j.yebeh.2003.09.013>.
- [2] I. Bègue, P. Mohr, C.L.A. Bassetti, A. Fiorillo, P. Boon, E. Moro, et al., One Brain, One Mind: a joint EPA–EAN leadership perspective on brain health, *Eur. Psychiatry* 69 (2026), <https://doi.org/10.1192/j.eurpsy.2026.12222>.
- [3] World Health Organization, *Intersectoral Global Action Plan on Epilepsy and Other Neurological Disorders 2022–2031*, World Health Organization, Geneva, 2022.
- [4] World Health Organization, *Comprehensive Mental Health Action Plan 2013–2030*, World Health Organization, Geneva, 2021.
- [5] World Health Organization, *Optimizing Brain Health across the Life Course: WHO Position Paper*, World Health Organization, Geneva, 2022.
- [6] C.L.A. Bassetti, M. Endres, A. Sander, et al., The European Academy of Neurology Brain Health strategy: one brain, one life, one approach, *Eur. J. Neurol.* 29 (2022) 2559–2566.
- [7] N.S. Rost, J. Salinas, J.T. Jordan, et al., The brain health imperative in the 21st century—a call to action, *Neurology* 101 (2023) 570–579.
- [8] D. Wassermann, M. Oosue, A. Avan, V. Hachinski, Integral brain health: a collaborative approach for psychiatry and neurology, *World Psychiatry* 24 (2025) 452–453.
- [9] P.A.J.M. Boon, T. Berger, M. Leonardi, T. Marson, U. Kallweit, E. Moro, et al., A roadmap toward promoting and improving brain health in Europe and closing the awareness and funding gap, *Eur. J. Neurol.* 32 (2025), <https://doi.org/10.1111/ene.16589>.
- [10] European Academy of Neurology, *Brain Health Mission: The Story So Far*, European Academy of Neurology, Vienna, 2024.
- [11] A.K. Njamnshi, J.F. Ndongo, F.N. Ngoh, et al., African leadership in brain diplomacy: the Yaounde declaration advances the global brain economy playbook for better brain health, *Neuroscience* 577 (2025) 161–174.

- [12] Norwegian Health Ministry, National Brain Health Strategy (2018–2024), Norwegian Health Ministry, Oslo, 2020.
- [13] German Brain Council, Der Deutsche Gehirnplan Agenda 2030, Albert ZWEI media GmbH, München, 2022.
- [14] C.L.A. Bassetti, M.R. Heldner, K. Adorjan, et al., The Swiss Brain Health Plan 2023–2033, *Clin. Transl. Neurosci.* 7 (2023) 38.
- [15] L.D.S. Pilatti, C.R. Borges, S.L. Apostolos-Pereira, et al., Brain health: a new concept to the neurologist—an initiative of the lifestyle medicine commission of the Brazilian Academy of neurology, *Arq. Neuropsiquiatr.* 83 (8) (2025).
- [16] P. Mailankody, R. Parthasarathy, D. Randee, et al., Effectiveness of a training program in improving knowledge and skills about selected common neurological disorders among primary healthcare doctors: the Karnataka Brain Health Initiative (KaBHI) in India, *J. Family Med. Prim. Care* 13 (9) (2024) 3719–3729.
- [17] R. Bhidayasiri, S. Phumphet, J. Sringean, C. Anan, T. Laosombut, J. Meesri, et al., National implementation of a digital Parkinson's disease screening programme in Thailand: reach, adoption, and real-world performance of the CheckPD app, *BMC Public Health* (2026), <https://doi.org/10.1186/s12889-026-27654-0>.
- [18] C.L.A. Bassetti, I. Bègue, C. Chen, et al., The Bern declaration on Brain Health: a decalogue to launch an international alliance, *Lancet Neurol.* 24 (2025) 720.
- [19] S. DeBette, N. Rost, S. Chandran, et al., The World Brain Health Forum: breaking silos for coordinated action, 2026 (submitted).
- [20] G. Livingston, J. Huntley, K.Y. Lius, S.G. Costafreda, G. Selbaek, S. Alladi, et al., Dementia prevention, intervention, and care: 2024 report of the Lancet standing commission, *Lancet* 404 (2024) 572–628.
- [21] G.B. Frisoni, F. Ribaldi, G. Allali, et al., Brain health services for the secondary prevention of cognitive impairment and dementia: opportunities, challenges, and the business case for existing and future facilities, *J. Prev. Alzheimers Dis.* 12 (2025) 100098, <https://doi.org/10.1016/j.tpad.2025.100098>.
- [22] World Health Organization, WHO Mental Health Forum 2024, World Health Organization, Geneva, 2024.
- [23] D.C. Lim, A. Najafi, L. Afifi, C.L.A. Bassetti, D.J. Buysse, et al., The need to promote sleep health in public health agendas across the globe, *Lancet Public Health* 8 (10) (2023) 26, [https://doi.org/10.1016/S2468-2667\(23\)00182-2](https://doi.org/10.1016/S2468-2667(23)00182-2).
- [24] A. Vorster, E.J.W. van Someren, A.I. Pack, R. Huber, M. Schmidt, C.L.A. Bassetti, Sleep health, *Clin. Transl. Neurosci.* 8 (1) (2024) 8, <https://doi.org/10.3390/ctn8010008>.
- [25] R. Thapa, M.R. Kjaer, B. He, et al., A multimodal sleep foundation model for disease prediction, *Nat. Med.* 32 (2026) 752–762, <https://doi.org/10.1038/s41591-025-04133-4>.
- [26] J. Migeot, S.D. Pina-Escudero, H. Hernandez, et al., Social exposome and brain health outcomes of dementia across Latin America, *Nat. Commun.* 16 (2025) 8196, <https://doi.org/10.1038/s41467-025-63277-6>.
- [27] A. Ibanez, C. Duran-Aniotz, J. Migeot, S. Bez, S. Fittipaldi, C. Coronel-Oliveros, et al., Computational whole-body-exposome models for global precision brain health, *Nat. Commun.* 16 (2025) 11078, <https://doi.org/10.1038/s41467-025-67448-3>.
- [28] C. Coronel-Oliveros, J. Migeot, F. Lehue, et al., Creative experiences and brain clocks, *Nat. Commun.* 16 (2025) 8336, <https://doi.org/10.1038/s41467-025-55991-4>.
- [29] Editorial, Sustainable development demands brain health, *Lancet Neurol.* 22 (7) (2023) 547, [https://doi.org/10.1016/S1474-4422\(23\)00183-0](https://doi.org/10.1016/S1474-4422(23)00183-0).
- [30] H.A. Eyre, W. Hynes, R. Ayadi, F. Manes, P. Swieboda, Brain capital is crucial for global sustainable development, *Lancet Neurol.* 23 (1) (2024) 12–13, [https://doi.org/10.1016/S1474-4422\(23\)00362-2](https://doi.org/10.1016/S1474-4422(23)00362-2).
- [31] O. Nail-Beatty, A. Ibanez, R. Ayadi, et al., Brain health is essential for smooth economic transitions: towards socio-economic sustainability, productivity and well-being, *Brain Commun.* (2024) fcae360, [10.1093/braincomms/fcae360](https://doi.org/10.1093/braincomms/fcae360).
- [32] S. Jung, D. Tanner, Reis JBC, et al., The certificate of advanced studies in brain health of the University of Bern, *Clin. Transl. Neurosci.* 9 (3) (2025) 35, <https://doi.org/10.3390/ctn9030035>.
- [33] M. Beyer, S. Sudimac, M. Steininger, S. Kühn, Interplay between the physical environment and the human brain: A review of MRI research, in: S. Kühn (Ed.), *Environmental Neuroscience*, Springer, Cham, 2024, pp. 31–70.
- [34] S.C. Yudofsky, R.E. Hales, Neuropsychiatry and the future of psychiatry and neurology, *Am. J. Psychiatry* 159 (2002) 1261–1264.
- [35] B.H. Price, R.D. Adams, J.T. Coyle, Neurology and psychiatry: closing the great divide, *Neurology* 54 (1) (2000) 8–14.
- [36] A. Ibanez, E.R. Zimmer, Time to synergize mental health with brain health, *Nat. Ment. Health.* 1 (2023) 441–443.
- [37] C.L. Bassetti, L. Ferini-Strambi, S. Brown, Neurology and psychiatry: waking up to opportunities of sleep, *Eur. J. Neurol.* 22 (10) (2015) 1337–1354.
- [38] D. Silbersweig, Integrating models of neurologic and psychiatric disease, *JAMA Neurol.* 74 (2017) 759–760.
- [39] J. Senff, R.W.P. Tack, A. Mallick, et al., Modifiable risk factors for stroke, dementia and late-life depression: a systematic review and DALY-weighted risk factors for a composite outcome, *J. Neurol. Neurosurg. Psychiatry* 96 (2025) 515–527.
- [40] M. Leonardi, I. Colonna, D. Garcia-Azorin, D. Bereczki, B. Bopdini, N. Bregman, et al., Brain health and national neurological societies: results of the European Academy of Neurology survey on brain health awareness and areas of implementation for European countries, *Eur. J. Neurol.* 31 (2024), <https://doi.org/10.1111/ene.16516>.
- [41] M.O. Owolabi, M. Leonardi, C.L.A. Bassetti, et al., Global synergistic actions to improve brain health for human development, *Nat. Rev. Neurol.* 19 (2023) 371–383.
- [42] S.F. Winter, D. Walsh, C. Catsman-Berrevorts, et al., National plans and awareness campaigns as priorities for achieving global brain health, *Lancet Glob. Health* 12 (4) (2024) 706, [https://doi.org/10.1016/S2214-109X\(23\)00598-3](https://doi.org/10.1016/S2214-109X(23)00598-3).