

Mental health for global prosperity:

We cannot afford to ignore the impact of mental health on the global economy.



Summary: It is #TimeToAct

Mental ill-health lowers quality of life, depletes personal and family finances, feeds into the cycle of poverty, and has a potentially devastating impact on the global economy. **Every year, 12 billion working days are lost due to mental illness. Between 2010-2030, this will cost \$16 USD trillion in lost economic output— more than cancer, diabetes, and respiratory diseases combined.**

Cost-effective solutions exist, even for low-resource settings, but funding has not been made available to implement them. While mental illness is responsible for 13% of the global burden of disease, countries spend an average of less than 2% of their health budgets on mental health, and less than 1% of international aid for health goes toward mental health. As a result, we are missing out on the 4-fold return on investment in care for common mental illnesses like depression.

If we do not act urgently to improve mental health—by promoting good mental health, preventing mental illness, and providing adequate mental health care— we put our personal well-being, businesses and economies at risk.

Key Recommendations

- **Governments must deliver on commitments** under the WHO Mental Health Action Plan, Sustainable Development Goals and Convention on the Rights of Persons with Disabilities.
- **Employers should include mental health in their organizational strategies**, proactively identifying risks to mental wellbeing in the workplace and providing necessary support to those who need it.
- **Funders should increase aid for mental health prevention, promotion and care** with a focus on implementation and scale-up to maximize potential return on investment.

Global prosperity depends on mental health

Mental illness is a leading cause of poor health and disability worldwide. Mental illness causes more years lived with disability (32.4%) than any other health condition and is among the leading causes of poor health and disability, contributing 13% of the total global burden of disease. People living with mental illness are also more likely to develop physical health problems, less likely to receive quality healthcare and less likely to adhere to treatment for physical health problems, resulting in poorer physical health and high mortality rates. **People with severe mental health conditions often die younger – up to two decades early – due to preventable physical health conditions.**



Box 1. *Dementia: Just one example of a growing global crisis*

The burden of mental illness will continue to rise in coming years as population sizes and life expectancies increase. For example, the number of people living with dementia (including Alzheimer’s disease) nearly doubles every 20 years. The economic consequences are enormous. Over the five-year period between 2010-2015, the global cost of dementia increased by 35%. In 2018, it exceeded \$1 USD trillion. The biggest increases in the burden of mental illness will be in low- and middle-income countries, which are already home to nearly 60% of all people with dementia. **Further investment in mental health services to ensure prevention, treatment and care of people with dementia is needed,** while we work to improve our understanding of this illness through research.

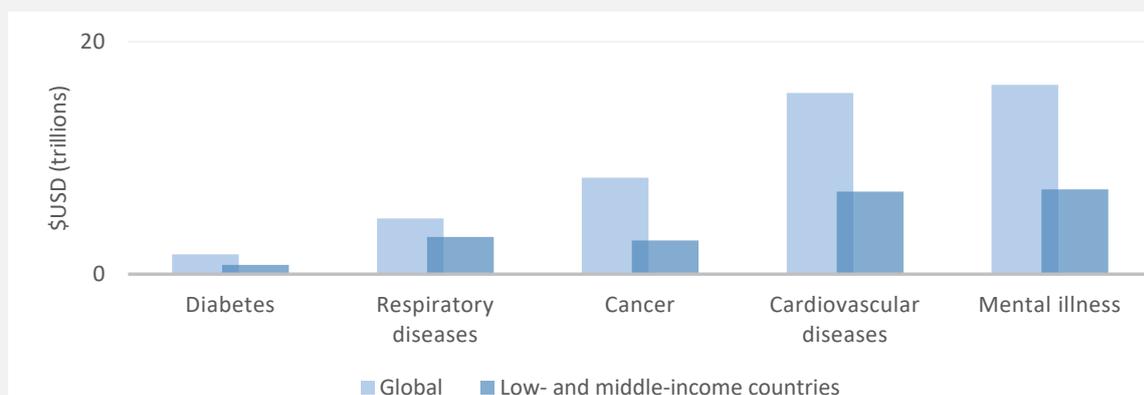
There is a cyclical relationship between poverty and mental illness. Lower educational attainment, unemployment, income inequality, poor nutrition, low quality housing and a lack of social support can be both risk factors and outcomes of mental illness. It is just not just the individual with the illness who is affected. Family members (usually women and girls) are often responsible for providing care, diminishing their opportunities to work and go to school.

Even those who are in employment are at risk. Although working and having a decent income are generally good for mental health, working environments can also have negative effects. In the UK, for example, over 60% of employees have experienced mental ill health either due to their work or due to issues related to their work.

The economic cost is huge. Every year more than 12 billion working days are lost due to mental illness. Between 2010-2030, mental illness will cost the global economy \$16 USD trillion in lost economic output— more than cancer, diabetes, and respiratory diseases combined [Box 2].

...but so is the return on investment. Every \$1 USD invested in care for common mental illnesses like depression yields a \$3-5 USD return. Research has demonstrated there are cost-effective ways of providing mental health even in low-resource settings. Just \$2 USD per capita could extend mental health care to nearly half of the population living with mental illness in low- and middle-income countries.

Box 2. *Economic burden of mental illness compared to other non-communicable diseases 2010-2030*



“ We need to act now because the lost productivity is something the global economy simply cannot afford.”

-Jim Yong Kim, Former President of the World Bank, 2016

The #TimeToAct is now

If we do not act urgently to improve mental health, we put our personal well-being, businesses and economies at risk. Conservative estimates suggest that among people with mental illness, between 32% (psychosis) and 78% (alcohol and substance use) do not receive care, partly as a result of chronic underfunding. This gap is much wider in low- and middle-income countries. However, mental illness would not disappear even if there were universal access to the most effective care currently available. That is why we must also promote good mental health and prevent mental illness from occurring in the first place.

Governments must deliver on their commitments

It is time to deliver on the Sustainable Development Goals and Mental Health Action Plan [Box 4]. The 2030 Sustainable Development Agenda and WHO Comprehensive Mental Health Action Plan 2013-2020 both set important targets for mental health, but WHO warns these cannot be achieved without substantial further investment of energy and resources. The average country allocates less than 2% of their health budgets to mental health, which does not reflect the high global burden of mental illness. Experts call for low- and middle-income countries to spend at least 5% and high-income countries to spend at least 10% of their health budgets on mental health.

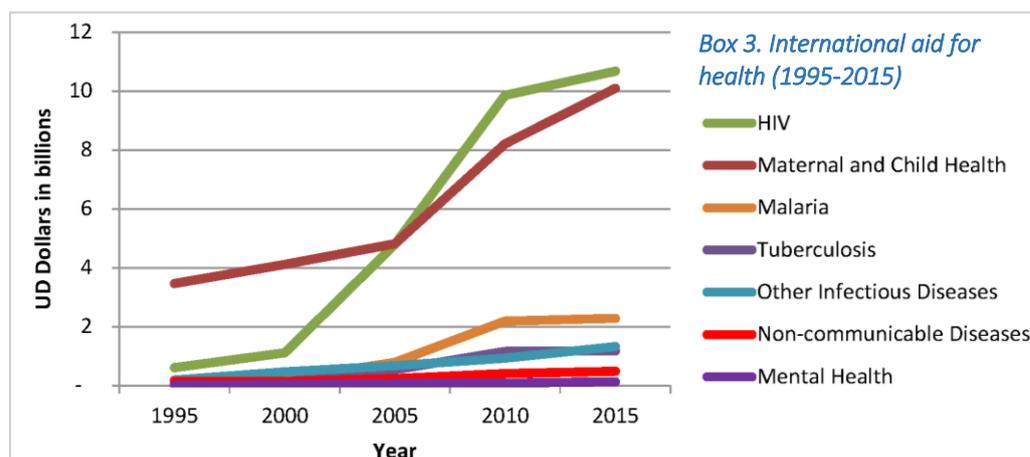
Human rights must not be forgotten. In line with the UN Convention on the Rights of Persons with Disabilities [Box 4], governments must ensure their mental health legislation, policies and plans take appropriate measures to tackle discrimination against people with mental illness and actively encourage more end-user involvement in developing and adopting more inclusive regulations and standards for care.

Employers need to do their part

Protecting the mental health of employees is not just a responsibility, it also makes good business sense. Including mental health in the overall organizational strategy, accounting for mental health in human resources and operations procedures are crucial steps to improve productivity. Building the capacity of staff to recognize and address potential stressors also helps to create healthier and more productive workspaces.

Funders need to take mental health more seriously

Less than 1% of international aid for health is spent on mental health. Every week, the UK spends more money on take-away coffees than the entire international development community spends on mental health in a year. Much of the funding that is available for mental health in low- and middle-income countries goes toward research, while cost-effective solutions that already exist are not being implemented or scaled up due to resource limitations. Although there have been modest increases in the aid available for mental health, these have not kept pace with increases in aid for other health conditions [Box 3].



Box 4. It is time to deliver on existing commitments



Objectives of the WHO Comprehensive Mental Health Action Plan 2013-2020

1. Strengthen effective leadership and governance for mental health.
2. Provide comprehensive, integrated and responsive mental health and social care services in community-based settings.
3. Implement strategies for promotion and prevention in mental health.
4. Strengthen information systems, evidence and research for mental health.

Sustainable Development Goals 2015-2030

Target 3.4: By 2030, reduce by one-third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being.

Indicators: Suicide mortality, alcohol consumption per capita and treatment coverage for substance use disorders.

UN Convention on the Rights of Persons with Disabilities

There should be no discrimination against people with psychosocial disabilities. This means being able to live in communities (Article 19), access civil and political rights (29), be treated with dignity in services (24/25), earn a living (27), and be able to make decisions about their own lives (Article 12/14).

More information

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Websites

United for Global Mental Health - www.unitedgmh.org

Mental Health Innovation Network - www.mhinnovation.net

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