

Fact sheet – Mental health

Background

Mental health and mental disorders are one of the most significant public health challenges in the WHO European Region. Reduced opportunities to find employment, lack of control over one's life and poor social relations affect people's well-being.

About a quarter to a third of the population suffer from mental disorders every year, depending on what disorders are included (most commonly depression and anxiety). Only about 50% of people suffering from mental disorders receive professional help; far fewer receive adequate help. Mental disorders are more prevalent among the most deprived people. Their effects are magnified by the poor being the population group in which most risk factors cluster (tobacco and alcohol use, poor diet, obesity, physical inactivity, etc.) and with least access to good services. In addition, mental disorders affect men and women differently: depression is twice as common in women, while more men commit suicide.

Mental health is a state of well-being in which an individual can realize his or her own potential, cope with the normal stresses of life, work productively and make a contribution to the community.

Mental disorders comprise a broad range of problems, with different symptoms. They are generally characterized, however, by some combination of disturbed thoughts, emotions, behaviour and relationships with others. Examples are depression, anxiety, conduct disorders in children, bipolar disorders and schizophrenia. Many of these disorders can be successfully treated.

Key facts

- Mental disorders account for 44% of social welfare benefits and disability pensions in Denmark, 43% in Finland and the United Kingdom (Scotland), and 37% in Romania and 25% in the Republic of Moldova, one of Europe's poorest countries.
- Almost 9 out of 10 of people suffering from mental health problems say they have been affected by stigma and discrimination, and more than 7 out of 10 report that stigma and discrimination stopped them from doing things.
- The annual suicide rate is 13.9 per 100 000 on average in the European Region, but varies widely between countries. The countries with the highest suicide rates in the world are in the European Region.
- In several countries, suicide is the number-one cause of death in adolescents.
- In Europe, men are almost five times more likely to commit suicide than women.
- An estimated 20% of people who commit suicide had been in contact with their general practitioners (GPs) or psychiatric services within one week of their deaths, and 40% in the preceding month.
- The ageing of the population is resulting in increasing prevalence of dementia, typically 5% in people over 65 and 20% of those over 80.
- Unemployment, debt and social inequality are all risk factors for depression and associated with suicide.
- People with mental disorders tend to die at earlier ages than the general population: often more than 20 years younger. The main factor is the high prevalence of chronic diseases (such as cardiovascular diseases, cancer and diabetes) and poor access to and quality of treatment for them.
- Mental health is strongly related to the socioeconomic circumstances of people's lives. Factors such as poverty, unemployment, poor working conditions, substandard housing and poor education reduce well-being, as well as significantly increasing the risk of mental disorders.
- About half of all mental disorders start before the age of 14. Cost-effective interventions exist, but less than 1% of mental health budgets are spent on prevention.

Table 1 shows the large share of mental ill health in the burden of disease.

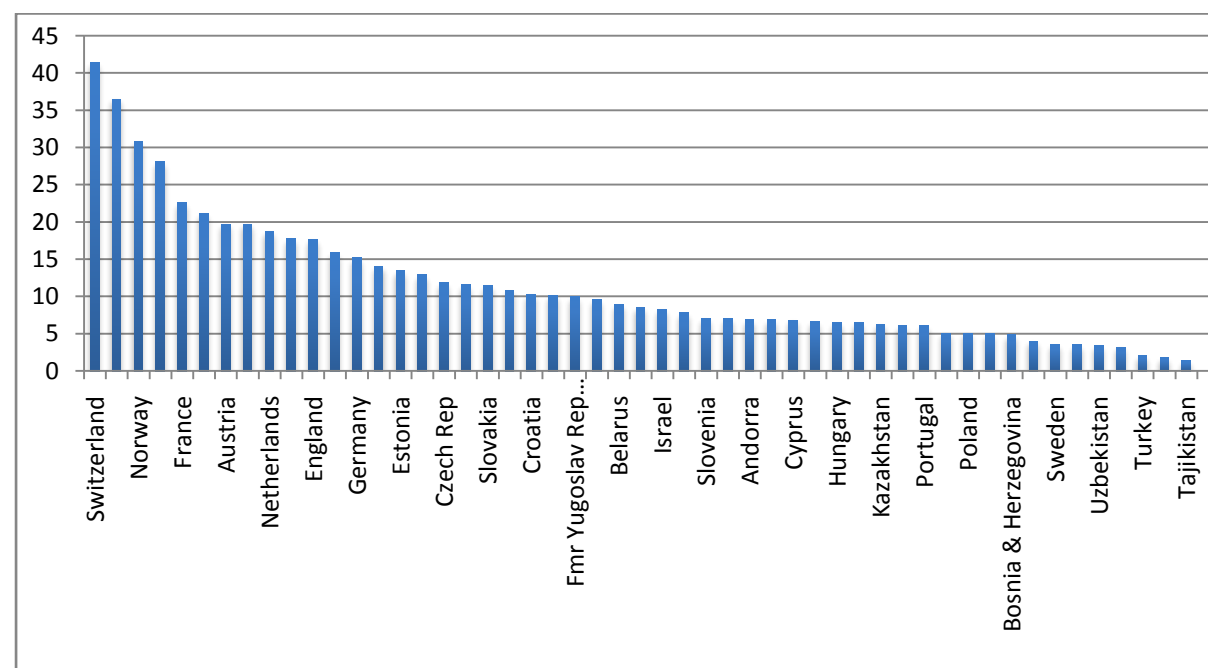
Table 1. Disability-adjusted life-years (DALYs) lost by cause

Cause	Percentage
Cardiovascular diseases	22.9
Neuropsychiatric conditions	19.5
Malignant neoplasms	11.4
Unintentional injuries	9.6
Digestive diseases	4.9
Respiratory diseases	4.5
Intentional injuries	4.3
Sense organ diseases	4.1
Infectious and parasitic diseases	3.8
Musculoskeletal diseases	3.7
Respiratory infections	2.1
Perinatal conditions	1.8

Source: *The global burden of disease: 2004 update*. Geneva, World Health Organization, 2004 (http://www.who.int/healthinfo/global_burden_disease/2004_report_update/en, accessed 30 August 2013).

Services vary widely across the Region, as shown by the number of psychiatric beds and psychiatrists (Fig. 1) in a range of European countries.

Fig. 1. Number of psychiatrists per 10 000 population in European countries, 2011



Source: *Mental health atlas 2011*. Geneva, World Health Organization, 2004 (http://www.who.int/mental_health/publications/mental_health_atlas_2011/en, accessed 30 August 2013).

What can be done?

There is strong evidence for effective activities to promote mental health and prevent ill health in people at risk. Training home nurses to screen for depression, training parents to improve bonding and prevent abuse, providing preschool places and conducting education programmes in schools have all been shown to be cost effective. Training family doctors to detect and treat depression, closing large mental hospitals, establishing community centres and offering occupational opportunities will improve treatment and care for people suffering from mental disorders.

Such initiatives can improve well-being, increase productivity and prevent some suicides. Owing to poor accessibility, however, a large proportion of people with mental disorders either receives no treatment at all or experiences long delays. In addition, the stigma attached to mental disorders and fear of mental health services keep many people from seeking treatment.

At present, the availability of and investment in mental health services vary widely across the European Region. At a time of increased concern about jobs and reports of increased suicide rates, mental health services in some countries are unfortunately at risk of cuts due to austerity measures.

WHO response: European Mental Health Action Plan

The WHO Regional Office for Europe developed the Action Plan, which specifies interventions to make services accessible and affordable and advocates respectful, safe and effective treatment.

The Action Plan calls attention to the importance of protecting population well-being, safeguarding the rights of people with mental health problems and establishing accessible and affordable services.

It proposes a range of actions intended to accomplish its seven objectives, including:

- increased support for mental health needs in antenatal and postnatal care,
- screening for domestic violence and alcohol abuse;
- opportunities for employment, housing and education for people with mental health problems equal to those available to others, taking account of adjustments required to compensate for any disability;
- therapeutic hospital care, offering individualized and civil treatment, not merely confinement;
- community-based mental health services accessible to all groups in the population;
- effective treatment made available on criteria of both efficiency and fairness; and
- work to ensure that people with mental health problems have a life expectancy equal to that of the general population.

The Action Plan will run through 2020, and targets and indicators are being developed. Further information is available on the Regional Office web site (<http://www.euro.who.int/en/who-we-are/governance/regional-committee-for-europe/sixty-third-session/working-documents/eurrc6311-the-european-mental-health-action-plan>).