

**North West of England Public Health Community**  
***Position Paper***  
**Response to Consultation on the Mental Health Green Paper**  
**31 May 2006**

**Improving the mental health of the population: towards a strategy on mental health for the EU**

The European Commission opened a consultation on mental health in Europe, including the possibility of a future European Strategy for Mental Health. It is clear from the Commission's Green Paper that there are many gaps in knowledge and action in Europe around mental health, as well as many opportunities for learning and the North West of England public health community supports the Commission in its goal to improve mental health and well-being and tackle mental illness. In response to the questions posed by the paper, the North West public health community believes the following:

**How relevant is the mental health of the population for the EU's strategic policy objectives, prosperity, solidarity, social justice, quality of life?**

The North West believes that good mental health is paramount to achieving the EU's strategic policy objectives and economic and employment goals cannot be achieved without good mental health. Mental health is of central relevance to the EU and Member States due to the global burden of mental ill-health - 25% of the population - the significant contribution of mental health to economic and social productivity and health improvement and the challenge of human rights.

**An EU strategy is not only desirable but crucial** - poor mental health contributes to a loss to the European GDP of 3-4% per annum and suicide has been identified as the 3rd highest cause of death amongst young people, and these two reasons alone are cause to develop EU strategy. It is important however that the development of the strategy is based on supporting the whole community, involving not only those within traditional mental health services but also across the wider community and integrating the priorities across generic strategies and programmes. In addition to this, it is important that mental health is integrated into EU strategic policy objectives and other EU strategies and programmes.

The North West public health community believes that a comprehensive approach to mental health at every level is needed and an EU strategy will help to achieve this within and across Member States. The North West supports the move to a more upstream focus however, we do not feel it is helpful to set up in opposition to one another the social model and medical model - a more integrated model within the final strategy would be very welcome.

Mental health problems have a huge economic impact due to the 25% mental health burden within the population. This is manifested not only as days lost through sickness which equal a decrease in productivity but also as work and worklessness can significantly impact on quality of life and feelings of disempowerment, feeling unused and not making a valuable contribution to society. Therefore of **key significance to prosperity and solidarity is the priority to support people with mental health problems in their returning to work and to create mentally healthy workplaces.** A greater recognition of the workforce as assets, not just 'target performers' would also be beneficial in order to change corporate cultural attitudes and improve mental well-being. Further to the paid workforce, there is also the need to recognise those who contribute to prosperity through unpaid work, caring for others and being active citizens. It is also important to build the skills and opportunities of those who are unable to work in order to realise the valuable contributions of all citizens and enable

the whole population of Europe to live a meaningful life, without this purely being measured through paid employment.

The North West public health community believe that **inclusion and recovery are particularly significant to achieving solidarity and social justice**. People with mental health difficulties often withdraw but create networks and relationships as part of recovery. Encouraging a recovery model is important to achieving these two EU objectives. Community cohesion, community safety, social capital, community relations, social spirit, citizenship are all determinants of good mental health that underpin solidarity and social justice.

The North West supports the work of the New Economics Foundation and others that recognises the need to improve life satisfaction and not measure success purely through GDP: quality of life, not income, is a significant health outcome for all. Consistent monitoring of quality of life and mental health and wellbeing is therefore needed across Europe. A greater clarity on definitions and determinants of mental health and wellbeing would be useful in the strategy.

In addition to the above, health inequalities have a significant influence on achieving the EU objectives. Improving mental health can help to reduce inequalities and further information and research on mental health inequalities would be a useful outcome from EU activities.

**Would the development of a comprehensive EU-strategy on mental health add value to the existing and envisaged actions and does section 5 propose adequate priorities?**

The North West strongly supports a comprehensive EU-strategy, and believes that this would help to raise the profile of this crucial issue within member states as well as within the EU and other European and international bodies. A strategy could lead to further actions and a consistent and evidence-based approach across member states. It is envisaged that, once developed, the strategy would need co-ordinated implementation and evaluation with the commitment of resources to do so and agreed timescales for action.

In general, the four priorities proposed by the Commission are strongly welcomed:

- (1) Promote the mental health of all;
- (2) Address mental ill health through preventive action;
- (3) Improve the quality of life of people with mental ill health or disability through social inclusion and the protection of their rights and dignity; and
- (4) Develop a mental health information, research and knowledge system for the EU.

A clear communication strategy for this would also help to engage players across member states, including local and regional players and key national bodies. Involving the mental health, public health and patient communities within member states could help to support implementation. **It is essential that stakeholders and systems beyond mental health services and public health are engaged.**

The balance of these four issues is most welcomed. Priorities that move us away from solely addressing population mental health through provision of health and social care services to ones that re-orient health services and address the determinants of mental health are long overdue.

Particular gaps/ suggestions for strengthening the priorities included:

- Impact of community drugs, alcohol and violence, particularly amongst young people.
- Mental Health impact assessment of European legislation
- Early identification of mental health problems

- Education and training especially in Primary Care.
- Need to talk about supporting families not just children or parents
- Better knowledge on the impact of service on people's mental health
- Media as a key setting for action
- Community planning: mental health part of all local planning
- Links between food/ nutrition and mental health
- Addressing stigma of mental health
- Role of the voluntary sector
- Role of carers/ family members of people with a mental health problem

**Are the initiatives proposed in sections 6 and 7 appropriate to support the coordination between Member States, to promote the integration of mental health into the health and non-health policies and stakeholder action, and to better liaise research and policy on mental health aspects?**

The North West believes that the key to the success of identified initiatives is the weight that such a paper would carry. The development of a strategy would only be effective if it carried significant weight and led to changes. The initiatives proposed appear to be appropriate, however more detail on this would be useful. The development of an action plan would be welcome. It would be beneficial for both the dialogue with member states and the EU platform to address all the priorities.

An expert group for establishment of an interface between policy and research and the development of indicators would be most appreciated. Other expert groups may also usefully focus on the other priorities and related actions. An emphasis on knowledge management, not just research, would be useful. Cost-benefit analysis of promotion and prevention would be welcome.

The establishment of a platform is welcomed by the North West community and it is that communication and dissemination to localities is important, using existing networks within member states and regions. There needs to be additional consideration to the promotion of partnership working to support the ethos of shared priorities and initiatives, this will only be achieved via collaborative working and collective action. Furthermore, this is only possible across the EU when the partner organisations accept the different culture and sensitivities of stakeholders.

In conclusion, the North West strongly welcomes the Commission's initiatives in this area, and welcomes its attention to this very important issue. The North West supports the creation of an EU strategy for mental health, and believes that this is a necessary step in addressing mental health and wellbeing in the EU.

For further information please contact:

Monika Kosińska  
North West Regional Health Brussels Office  
North West of England House  
Rue du Marteau 21  
Brussels  
1000  
Belgium

[m.kosinska@nwhbo.org](mailto:m.kosinska@nwhbo.org)

+32 2 229 5388 (tel.) +32 2 229 5383 (fax.)  
**31 May 2006**

This paper represents the views of its author on the subject. These views have not been adopted or in any way approved by the Commission and should not be relied upon as a statement of the Commission's or Health & Consumer Protection DG's views. The European Commission does not guarantee the accuracy of the data included in this paper, nor does it accept responsibility for any use made thereof.