Impact of economic and social crisis on Mental Health of population: The case of Greece

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Greece's social expenditures as a percentage of GDP
Per Capita Income - 1000 Euros (europa)
Consumption Expenditure—billion euros (Eurostat)
Economic Crisis in Greece:
Main Facts

• The reduction of GDP amounts accumulatively in 10,2% (period 2009-2011)
• Unemployment rate has increased by 103,5% (period 2009-2011)
• Unemployment rate: 23,6% (2nd quarter 2012)
• Youth unemployment rate (15-24): 53,9% (2nd quarter 2012)
• Final consumption expenditure has decreased by 9,1% (period 2010-2011)
We presume that the percentage of depression will substantially increase during 2012.

1 out of 6 Greeks 18-70 (1,200,000) develops clinically important psychopathology and 1 out of 12 severe psychopathology (600,000) (Mavreas, 2010)
Epidemiological Research for mental disorders, Greece, 2010

Socio-economic inequity and mental health

Occupation and Frequency of Severe Psychopathology

<table>
<thead>
<tr>
<th>Work Status</th>
<th>Frequency of Severe Psychopathology (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Working</td>
<td>5</td>
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<tr>
<td>Household</td>
<td>10</td>
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<tr>
<td>Unemployed</td>
<td>12</td>
</tr>
<tr>
<td>Retired</td>
<td>14</td>
</tr>
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</table>
Risk Social Factors affecting mental Health in Greece

- **Income Inequality**
  - In Greece, the income of the top 20% of the population is 43,145 USD a year, whereas the bottom 20% live on 8,969 USD a year (OECD, 2012). According to WHO, Income Inequality is a major factor for ill mental health along with social inequality.

- **Function and structure of Welfare State**
  - Asymmetrical and ineffective welfare state
  
  Greece spends annually about €4 billion more than Sweden, Holland, Portugal and Denmark (based on per capita figures).
Mental Health System - Risk Factors affecting mental health in Greece

1. Fragmented, inadequately coordinated services
2. Inadequate evaluation and monitoring procedures
3. Not needs-led
4. Unequal development
5. Treatment Gaps for groups such as “children, adolescents, aged and other sensitive teams”

Mental Health System in Greece: Facts

• Treatment gap
  - 75% of the population with at least one common mental disorder does not receive any treatment at all for its condition. (Mavreas, 2010)

• Lack of continuity of care – involuntary admissions
  – 60.2% involuntary admissions in the biggest mental health hospital in Athens
  – More than 84% of all the admitted were not referred to Community Services
    (Stylianidis, Peppou, Drakonakis, 2012)
Economic Crisis and Mental Health
E.U. –wide study

Findings of study conducted in 26 EU countries (1970-2007):

- every 1% increase in unemployment is associated with a 0.79% rise in suicides at ages younger than 65 years
- every +3% increase in unemployment is associated with a 4.45% rise in suicides.

(Stuckler et al, 2009)
Impact of Crisis and Mental Health in Greece - Suicide Rate

Suicide rate in Greece according to Greek Statistical Authority:
- 2.8 per 100.00 (2008 - prior to crisis)
- 3.8 per 100.000 (2009)
- 3.4 per 100.000 (2010)
No data available for 2011
Impact of Crisis and Mental Health in Greece - Suicidal Behavior

- Stuckler et al. (2011) report a 17% increase in suicides in Greece
- 36% increase of the self-reported suicide attempts from 2007 to 2011 (Economou et al., 2011)
- Recent research (Giotakos, Karabelas, Kafkas 2011; Stuckler et al., 2009) associates unemployment and increase in homicides and suicidal behaviour.
Epidemiological Study
NGO Klimaka (2011)

• Sample: 140 suicides committed 2011
• Sex: male 83.3% (117) – female 16.6% (23)
• Age range: 14-83
• Age groups: higher prevalence 50-59 (30), 30-39 (24), 40-49 (23)
• Marital status: higher prevalence married with children
• Mental Health status: mental health problems affected 20 of the sample
Study of NGO Klimaka (2011)

- **MEN**: 117
- **WOMEN**: 23
Impact of Crisis and Mental Health in Greece: Use of services

• Psychotropic Drugs
  – 18.59% increase in the use of antipsychotics (2006-2011)
  – 34.80% increase in the use of antidepressants (2006-2011)

  (Kyriopoulos, 2011)

• Hospital Admissions
  – 24% rise in hospital admissions (general health) (2009-2011) and decrease in private health services. (Kentikenelis, 2011)
  – 50% reduction estimated in the use of private health services in 2012 (National School of Public Health)
Impact of Crisis and Mental Health in Greece

- Cutbacks in pensions and benefits of people with psychiatric disabilities
- Psychiatric medication access problems
- Decreased funding for mental health services
Social Protection Measures to tackle impact of crisis

- Promotion of social enterprises
- Employment and social inclusion programs for the socially vulnerable groups
- Social work programs
- Regional integrated programmes for the support of employment (TOPSA)
Social Protection Measures to tackle impact of crisis

- Local support and care services for poor families with children
- Medical care provision for the unemployed through prolonging the period of insurance coverage
- Continuation of the programme “help at home”.
Mental Health Programs to tackle impact of crisis

• Program for the psychosocial support of unemployed
• National Program for the prevention of suicide
• Help Line for people suffering from depression
Economic Crisis and Psychiatric care in Greece - Threats

- Governmental sector
  - Understaffing of mental health services due to non replacement of retired staff and transfer of remaining staff to non-psychiatric health services and clinics

- Non governmental sector
  - Diminishment of network of community mental health services due to inadequate funding
Opportunities

• Abolition of institutionalized care and reallocation of funds to community mental health services
• Use of EU structural funds to ameliorate the effects of crisis
• Development of cost effective services
Austerity Programs - Role of E.U. & European Commission

Taking into account that mental health is a stigmatised and undervalued health sector, the following prerequisites should be met when economic austerity programs are implemented:

• An economic crisis and subsequent austerity programs should not signal a regression to institutionalized care

• The sufficient level of care of people with severe mental disorders must be a priority

• At the very least the % of mental health spending cuts should not exceed the % of total social spending cuts

• At the very least a fixed minimum percentage of health budget must be allocated to mental health