



HEADWAY^o
2023
A new roadmap in Mental Health

«Headway 2023 – Mental Health Index»

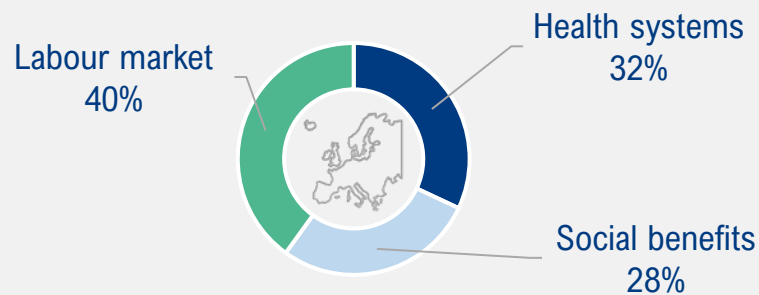
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The following presentation contains data from the Report “Headway 2023 – Mental Health Index”, which arises from the initiative “Headway 2023”, realized by The European House – Ambrosetti in collaboration with Angelini Pharma.

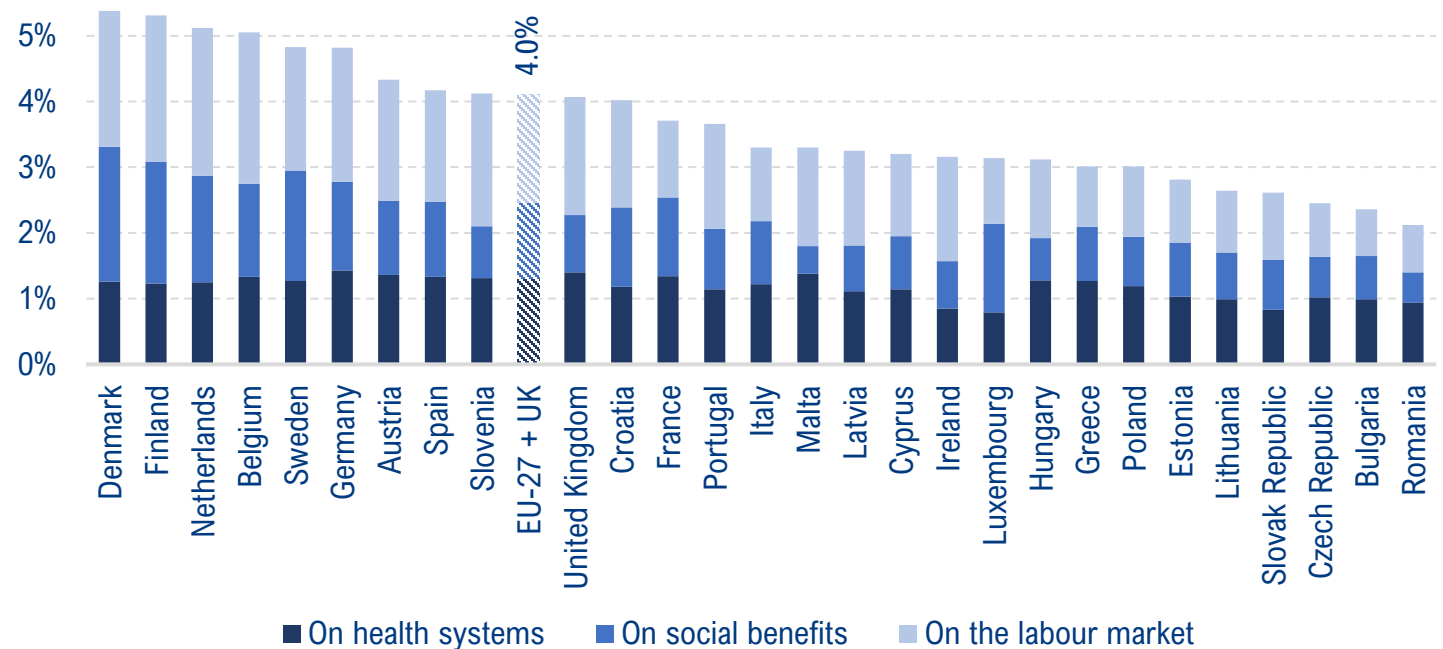
The **total costs**, both direct and indirect, of **Mental Health disorders** are more than **600 billion euro (4% of European GDP)** across Europe

- **190 billion euro** (or 1.3% of GDP) is **direct spending on health care**
- **170 billion euro** (1.2% of GDP) is **spending on social security programmes**
- **240 billion euro** (1.6% of GDP) is caused by **indirect costs in the labour market**, driven by lower employment rates and reduced productivity due to mental illness

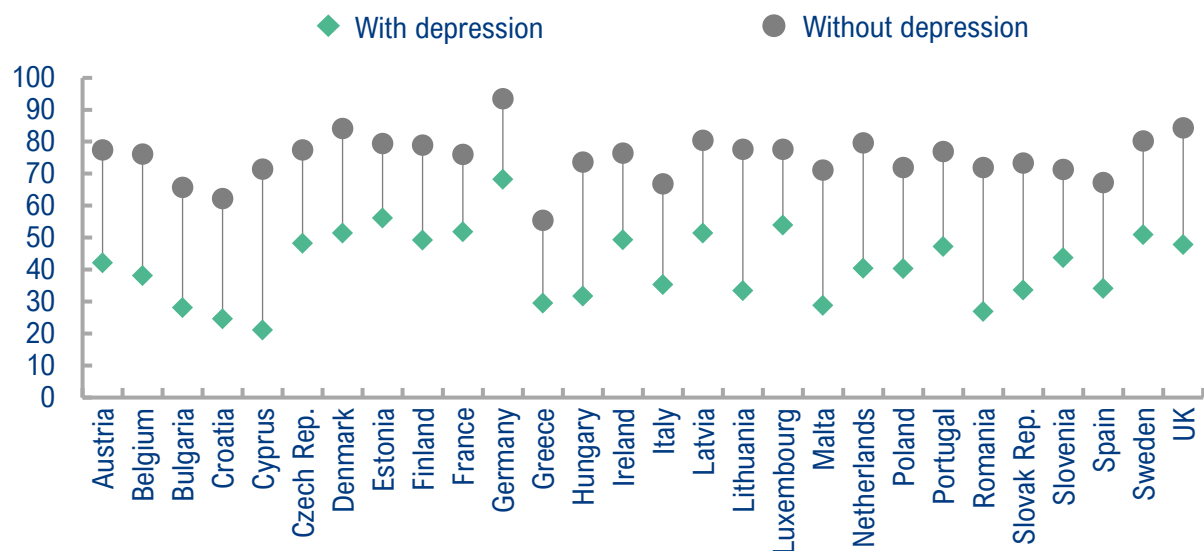
Distribution of direct and indirect costs of mental health problems in EU (% of total)



Direct and indirect costs of mental disorders in Europe (% of GDP)



Employment rate of people reporting chronic depression vs. without depression in EU27+UK (% of working age population aged 25-64), 2018



Mental ill-health, especially of the mild-to-moderate kind, affects as much as **20% of the working-age population** at any given moment in their lives, while **70% of the employed population** report **mild to moderate forms of mental disorders**

The two main issues concerning labour market are: **employment gaps** and **job quality and work performance**

-58%

Difference between the **wage/hour ratio** of workers with severe mental disorders with the median value

13%

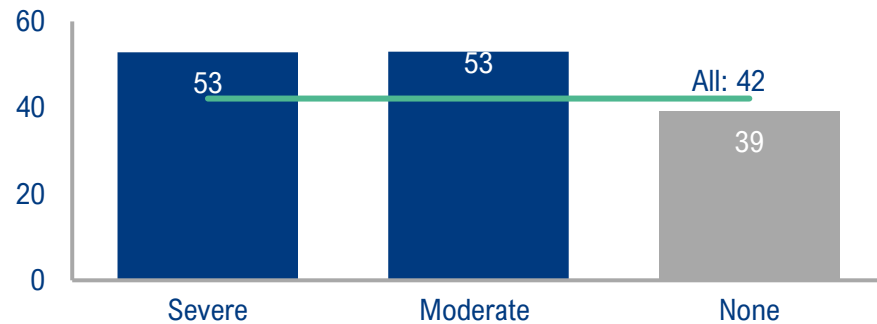
Of workers with moderate mental disorders **are satisfied** with their job (vs. 34% of workers with no ill-health)

1 in 2

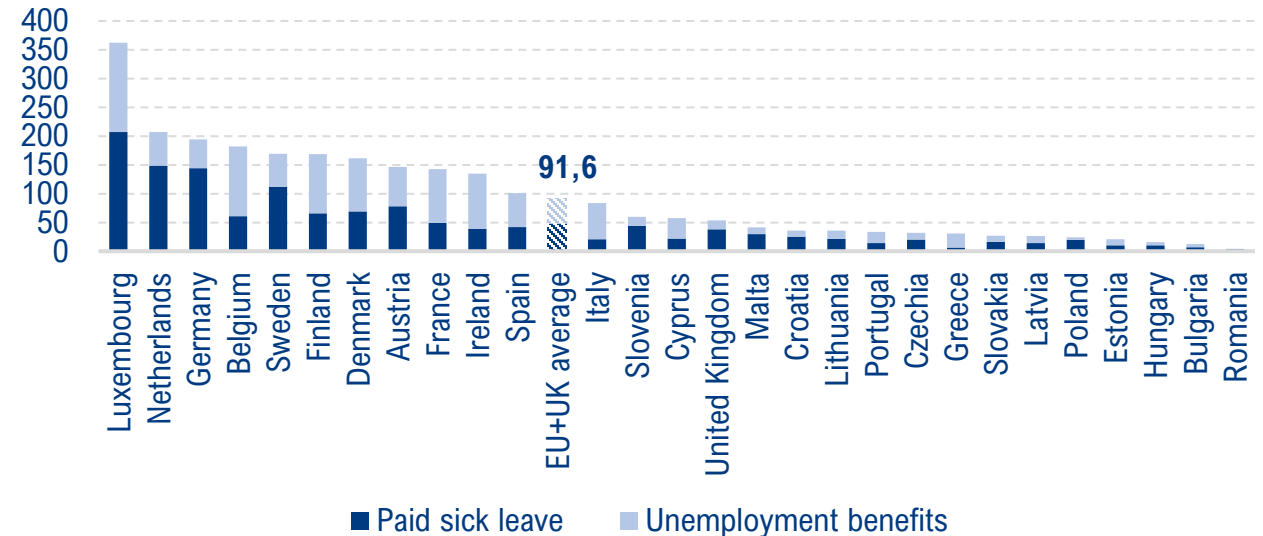
Workers with severe mental disorders declare to receive the **respect and recognition at work** that their efforts and achievements deserve (vs. 85% of workers with no ill-health)

Responsiveness to the needs of individuals with mental disorders in workplaces (2/2)

Incidence of presenteeism for workers affected by mental ill-health in Europe (% , average incidence over a selection of European countries)



Paid sick leave and unemployment benefits for mental health disorders (euro per capita), 2018



Presenteeism

- **3 in 4 workers** who **have not taken sick leave despite their mental ill-health** report having accomplished less than they would have wished

Absenteeism

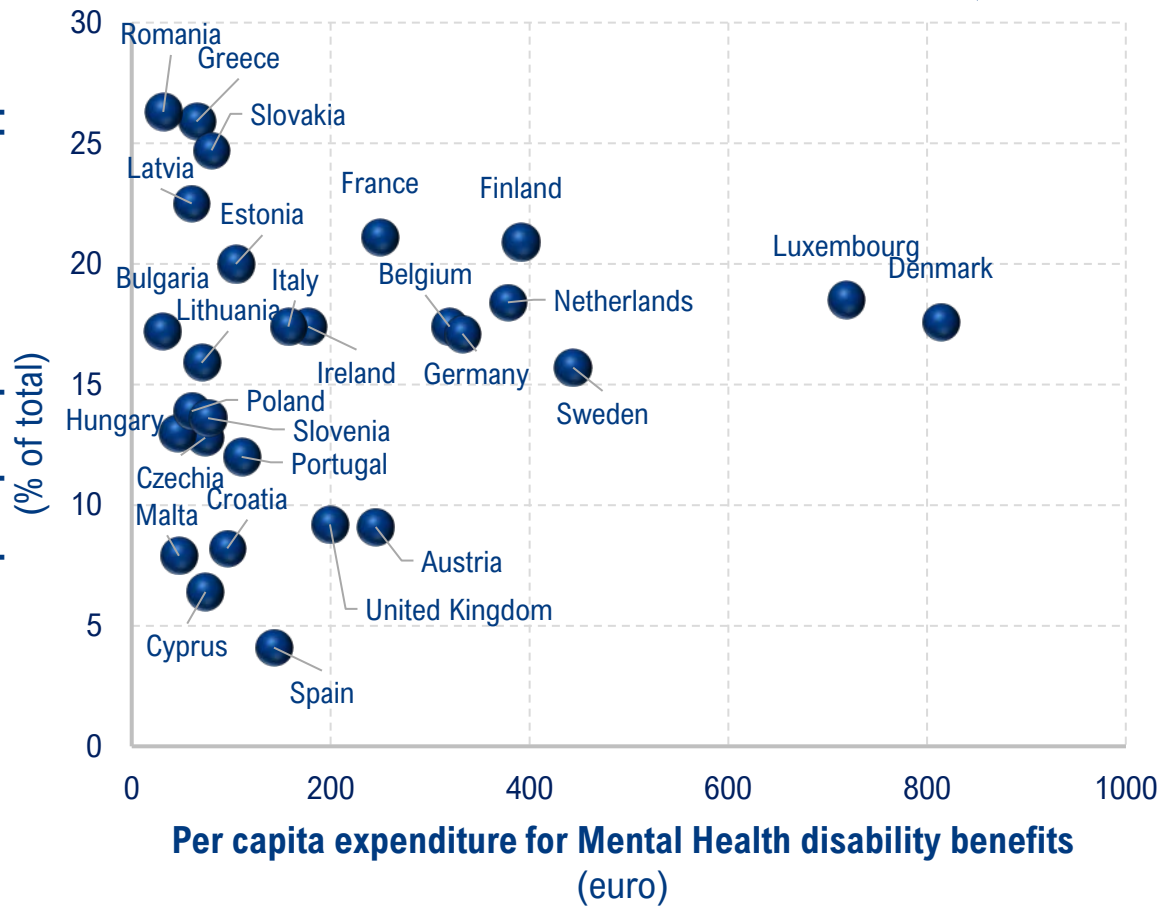


- The shares of sickness absence and early retirement for mental health problems. It increased the burden of unemployed people that receive specific **unemployment benefits**.

Responsiveness to the needs of individuals with mental disorders in society (1/2)

Social support positioning,
2020 or most recent available year

Individuals with poor perception of social support

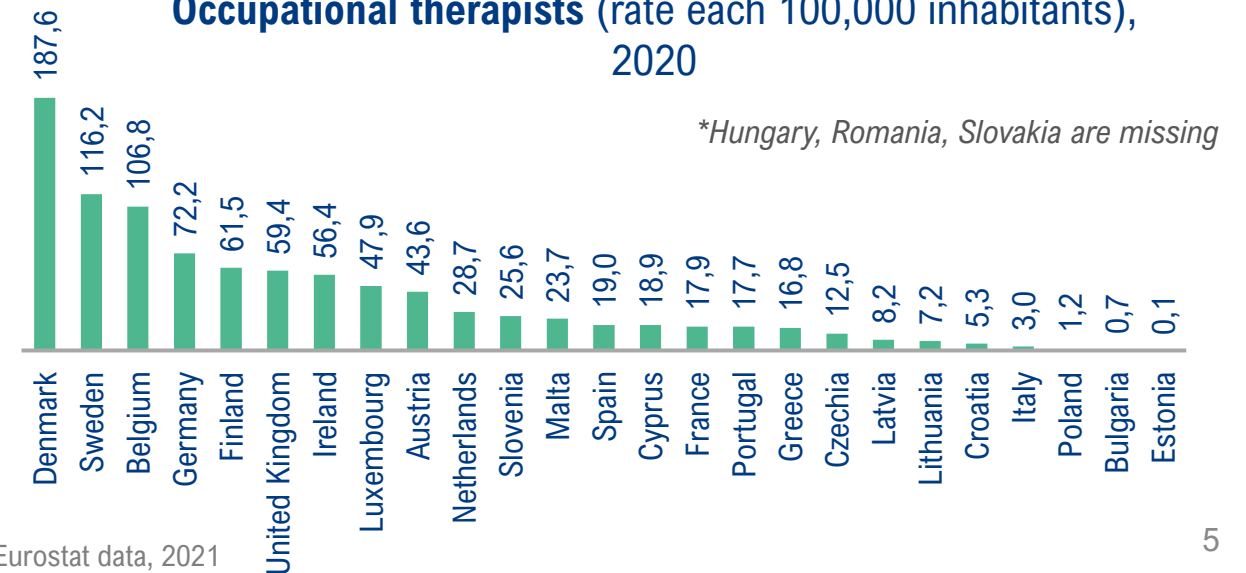


The **lower the investment** in benefits to support people with mental disorders is, the **higher is percentage of individuals reporting a poor perception of social support**



Human resources such as **occupational therapists, rehabilitation specialists, social workers** and **vocational therapists** vary a lot from Country to Country depending on the design of the health- and social care System

Occupational therapists (rate each 100,000 inhabitants),
2020



Responsiveness to the needs of individuals with mental disorders in society (2/2)

Responsiveness of the System to mental health needs in society (%), 2018 or last available data

	AT	BE	BG	HR	CY	CZ	DK	EE	FI	FR	DE	GR	HU	IE	IT	LV	LT	LU	MT	NL	PL	PT	RO	SK	SI	SP	SE	UK								
Awareness programs¹	Yes	Yes	Yes	Yes	N.D.	No	Yes	Yes	Yes	Yes	Yes	No	No	N.D.	Yes	N.D.	N.D.	No	N.D.	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes							
Social inclusion²	Green	Yellow	Red	Yellow	Yellow	Yellow	Green	Yellow	Green	Yellow	Green	Yellow	Yellow	N.D.	Green	N.D.	Yellow	Yellow	N.D.	Green	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow	Green	Yellow	Green							
Cooperation with employment services³	Yellow	Green	Red	Yellow	Yellow	Red	Green	Green	Yellow	Yellow	Green	Red	Red	N.D.	Green	N.D.	Yellow	Yellow	N.D.	Yellow	Yellow	Yellow	N.D.	Yellow	Yellow	Green	Yellow	Green								
Social determinants⁴	Yellow	Yellow	Red	Yellow	Yellow	Red	N.D.	N.D.	Green	Yellow	Yellow	Red	Yellow	N.D.	Yellow	N.D.	Yellow	N.D.	N.D.	Yellow	Yellow	Red	Yellow	N.D.	Yellow	Green	Red	Yellow								
	Red						Not at all implemented						Yellow						Implemented to some extent						Green						Fully implemented					

The **responsiveness to mental health needs in society** can be assessed by looking at the **existence of National Strategies** and other **relevant actions** focusing on **social inclusion, cooperation with employment services and social determinants**

¹ Existence of national programmes/strategies for mental health at schools

² Promote the social inclusion of people with long-term mental disorders

³ Develop structured cooperation between mental health services, social services and employment services

⁴ Action on social determinants of mental health

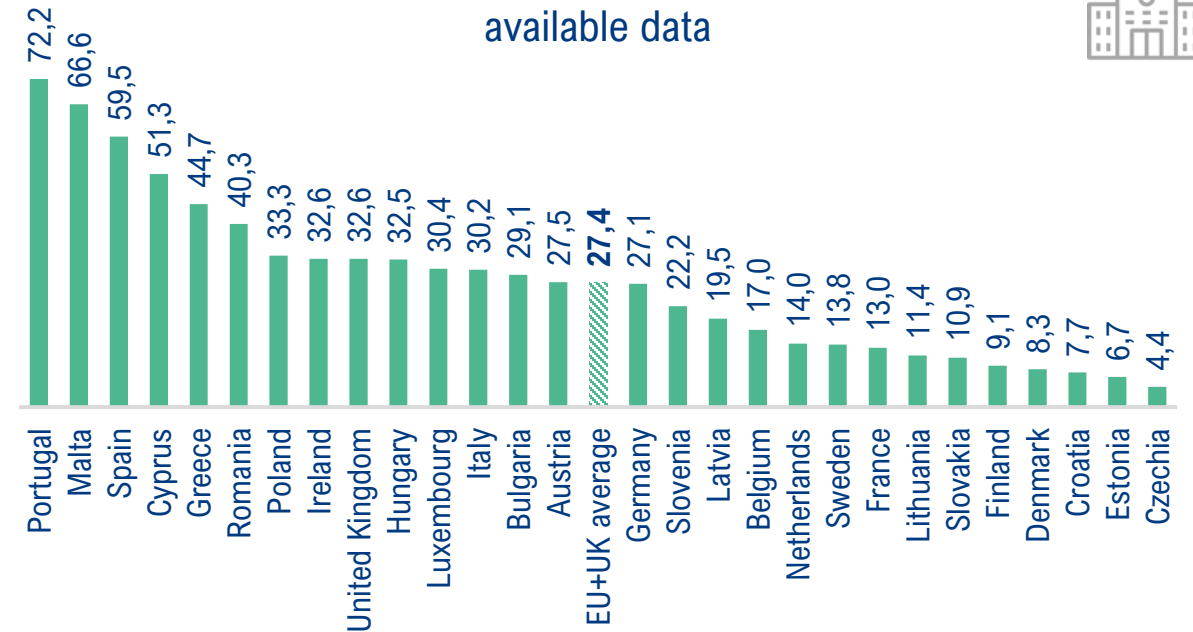
Responsiveness to the needs of individuals with mental disorders in schools (1/2)

- **50%** of mental disorders debut **before the age of 15** and **80%** of **before the age of 18**



- **35%** of young students report **at least one of the common mental disorders**

Children who drop out of school that also have a mental disorder (% of total school dropouts), 2018 or last available data



In the EU+UK area, almost **1 in 3** children who drop out of school have also a mental disorder, suggesting that more supportive tools are needed to **prevent students drop out of school when experiencing a mental distress**

Responsiveness to the needs of individuals with mental disorders in schools (2/2)

Responsiveness of the System to mental healthcare needs in schools (%), 2017 or last available data

	AT	BE	BG	HR	CY	CZ	DK	EE	FI	FR	DE	GR	HU	IE	IT	LV	LT	LU	MT	NL	PL	PT	RO	SK	SI	SP	SE	UK
Awareness programs ¹	Yes	Yes	No	Yes	N.D.	No	N.D.	N.D.	Yes	Yes	Yes	N.D.	N.D.	Yes	Yes	No	N.D.	No	N.D.	No	N.D.	Yes	Yes	N.D.	N.D.	Yes	No	Yes
Guidelines ²	Implemented to some extent	Fully implemented	Implemented to some extent	Fully implemented	Implemented to some extent	Implemented to some extent	Fully implemented	Fully implemented	Implemented to some extent	Implemented to some extent	Implemented to some extent	Implemented to some extent	N.D.	Implemented to some extent	Implemented to some extent	Fully implemented	N.D.	Implemented to some extent	N.D.	Implemented to some extent	N.D.	N.D.	N.D.	N.D.	N.D.	Implemented to some extent	Implemented to some extent	Implemented to some extent
Consulting children and families ³	Implemented to some extent	Fully implemented	Implemented to some extent	Implemented to some extent	N.D.	Not at all implemented	Implemented to some extent	Implemented to some extent	Implemented to some extent	Implemented to some extent	Implemented to some extent	Not at all implemented	N.D.	Implemented to some extent	Implemented to some extent	N.D.	N.D.	Implemented to some extent	N.D.	Not at all implemented	Implemented to some extent	N.D.	Implemented to some extent	N.D.	N.D.	Implemented to some extent	Implemented to some extent	Implemented to some extent
Training ⁴	Implemented to some extent	Implemented to some extent	Implemented to some extent	Fully implemented	Implemented to some extent	Not at all implemented	Fully implemented	Not at all implemented	Implemented to some extent	Implemented to some extent	Implemented to some extent	Not at all implemented	N.D.	Not at all implemented	Implemented to some extent	Implemented to some extent	N.D.	Implemented to some extent	N.D.	Implemented to some extent	Not at all implemented	Implemented to some extent	Implemented to some extent	N.D.	N.D.	Implemented to some extent	Implemented to some extent	Fully implemented

■ Not at all implemented
 ■ Implemented to some extent
 ■ Fully implemented

Some **best practices** such as having widespread **guidelines**, **consulting young individuals** and their **families** and **providing adequate training to school staff** and **teachers** are a good sign of responsiveness of the system



¹ Existence of national programmes/strategies for mental health at schools

² Preparing and sharing relevant guidelines for mental health and wellbeing promotion in schools jointly with other sectors, under the coordination of the education sector

³ Actively consult children and adolescents and their families when developing any programmes to ensure their best interests are taken into account

⁴ Training for school staff on mental health: review current practices in terms of initial and continuing professional development and carry out a consultation to define the training needs

Need to quickly adapt changes in mental health policies

- Mental health, **significantly impacts on all economic and social sectors of society**. Mental Health strategies and policies must therefore embody **all determinants of mental health and use the approach of mental health in all policies**
- **Mental health services need to be able to quickly adapt** to changing circumstances and environments so to maintain their continuity even during a state of emergency.
- This is only possible through **delivering support in community-based settings and across all sectors** (including workplaces, schools and society in general).



The “**Headway 2023 – Mental Health Index**” can be a **useful tool for the monitoring and planning for healthcare, welfare and education policies** in Mental Health across European Countries, in order to improve critical areas and leverage on good practices

Today, not seizing the moment would become a **lost opportunity for decision makers creating a threat to social cohesion, sustainability, and economic growth of the Country-wide System.**

