SOCIAL DETERMINANTS OF MENTAL HEALTH
Public health implications

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Key findings and recommendations of “Social Determinants of Mental Health”

Public health use of knowledge on social determinants
  - High-income countries

Implementing the public health implications in LMICs
  - MDGs
  - Post-2015 Development Agenda
  - MGMH Position Statement on Mental in the post-2015 Development Agenda
“Social Determinants of Mental Health”

- Social distribution of CMDs
  - Social class gradient
  - The gradient is more marked in men than in women
  - Gradient varies for different types of CMDs
  - Poor and disadvantaged have increased risk of CMD

- Mental health risk differs by age, gender, ethnicity, income, income, education, employment, level of social support, geographic area of residence

- Differential risks occur before birth, patterns of inequality in mental health emerge in childhood, and accumulate over the life course
Interventions

- We know enough to apply and evaluate policy and practice interventions to improve mental health.
- There is evidence for effectiveness of a variety of public health interventions across sectors.
- Sources of risk and opportunities for intervention
  - Life-course approach
  - Parents, families, households
  - Community
  - Local services
  - Country-level factors
“Social Determinants of Mental Health”

Principles and recommended actions

- Proportionate universalism
- Action across sectors
- Life-course approach
- Early intervention
- Health mind and healthy body
- Partnerships
- Prioritising mental health
- Mental health equity in all policies
- Knowledge for action
- Country-wide strategies

- Many of these approaches have been implemented to varying extents in several high-income countries.

- The VicHealth approach incorporated into national and State mental health policies.
VicHealth Mental Health Promotion Action Plan 2005

Key Social & Economic Determinants of Mental Health & Themes for Action

Social Inclusion
- Supportive relationships
- Involvement in community & group activities
- Civic engagement

Freedom from discrimination & violence
- Valuing of diversity
- Physical security
- Self determination & control of one’s life

Access to economic resources
- Work
- Education
- Housing
- Money

Population Groups & Action Areas

Population groups
- Children
- Young people
- Women & men
- Older people
- Indigenous communities
- Culturally diverse communities
- Rural communities

Health promotion action
- Research, monitoring & evaluation
- Direct participation programs
- Organisational development (including workforce development)
- Community strengthening
- Communication & social marketing
- Advocacy
- Legislative & policy reform
**Settings for Action**

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<thead>
<tr>
<th>HOUSING</th>
<th>COMMUNITY SERVICES</th>
<th>EDUCATION</th>
<th>WORKPLACE</th>
<th>SPORT &amp; RECREATION</th>
<th>HEALTH</th>
<th>JUSTICE</th>
<th>ACADEMIC</th>
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<tr>
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<td>CORPORATE</td>
<td>PUBLIC</td>
<td>ARTS</td>
<td>LOCAL GOVT</td>
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**Intermediate Outcomes**

**Individual**
Projects & programs which facilitate:
- Involvement in community & group activities
- Access to supportive relationships
- Self esteem & self efficacy
- Access to education & employment
- Self determination & control
- Mental health literacy

**Organisational**
Organisations which are:
- Inclusive, responsive, safe, supportive & sustainable
- Working in partnerships across sectors
- Implementing evidence-informed approaches to their work

**Community**
Environments which:
- Are inclusive, responsive, safe, supportive & sustainable
- Value civic engagement
- Are cohesive
- Reflect awareness of mental health & wellbeing issues

**Societal**
A society with:
- Integrated, sustained & supportive policy & programs
- Strong legislative platforms for mental health & wellbeing
- Appropriate resource allocation
- Responsive & inclusive governance structures

**Long-term Benefits**

- Increased sense of belonging
- Improved physical health
- Less stress, anxiety & depression
- Less substance misuse
- Enhanced skill levels

- Resources & activities integrated across organisations, sectors & settings

- Community valuing of diversity & actively disowning discrimination
- Less violence & crime
- Improved productivity

- Reduced social & health inequalities
- Improved quality of life & life expectancy
Implementation in Australia

- Whether it is producing population-level mental health benefits is not yet clear.

- It is clear that long time-frames are necessary for impact evaluation.
Issues for implementation in LMICs

- Challenges
  - Steep social gradients in terms of wealth/poverty, access to resources of all kinds, ....
  - Profound geographic and population sub-group inequalities
  - Poor governance and dysfunctional systems
  - Low capacity for policy-making and implementation
  - Low population mental health literacy and high levels of discrimination and social and economic exclusion
  - Poorly developed rights protections
  - Low priority accorded to the most vulnerable, including people with mental disorders and with disabilities
Key conceptual development

- Development by UNDP and others since mid-1990s of the concept of human security

- “Good health, like so many things, is inequitably distributed. Entering the 21st century, about half the world’s people had been left behind, unable to achieve their full health potential. World health today spotlights the paradox of unprecedented achievement among the privileged and a vast burden of preventable diseases among those less privileged, the majority of humankind. Differing risks and vulnerabilities to avoidable health insults are found among people of different ages, sexes, communities, classes, races and nations. No surprise then that the poor, marginalized and excluded have a higher risk of dying than other groups. Especially vulnerable are children and women across all groups. These disparities are found not only among countries—but within countries, rich and poor.”

“Human security in its broadest sense embraces far more than the absence of violent conflict. It encompasses human rights, good governance, access to education and health care and ensuring that each individual has opportunities and choices to fulfil his or her own potential. Every step in this direction is also a step towards reducing poverty, achieving economic growth and preventing conflict. Freedom from want, freedom from fear and the freedom of future generations to inherit a healthy natural environment—these are the interrelated building blocks of human, and therefore national, security.”

Kofi Annan, 2003
Definition of human security: “to protect the vital core of all human lives in ways that enhance human freedoms and human fulfillment”.

Ogata and Sen, Human Security Now, 2003

- Protect fundamental freedoms
- Protect people from severe and pervasive threats
- Build on people’s strengths and aspirations
- Create political, social, environmental, economic and cultural systems that protect human survival, livelihood and dignity
“We stress the right of people to live in freedom and dignity, free from poverty and despair. We recognize that all individuals, in particular vulnerable people, are entitled to freedom from fear and freedom from want, with an equal opportunity to enjoy all their rights and fully develop their human potential. To this end, we commit ourselves to discussing and defining the notion of human security in the General Assembly.”

(UN General Assembly Resolution 60/1: 2005)

- The concept of human security is the conceptual foundation of the emerging post-2015 development agenda
- Provides the conceptual framework for responding to the social determinants of mental health and illness
Threats and vulnerabilities experienced by people with mental disorders

- Stigma and discrimination
- Violence and abuse
- Restrictions in exercising civil and political rights
- Exclusion from participating fully in society
- Reduced access to health and social services
- Reduced access to emergency relief services
- Lack of educational opportunities
- Exclusion from income generation and employment opportunities

People with mental illness:
- More likely to be poor and socially isolated
- More likely to have physical health problems
- Less likely to have the resilience and capabilities to deal with threats to their well-being
- More likely to suffer the multiple negative impacts of such threats
MDGS & the post-2015 development agenda

- MDGs - ‘a lost opportunity for mental health’?
- MDGs & social determinants of mental health
  - Substantial progress in extreme poverty; drinking water; slum dwellers; debt burden and trade; under-nourished; child and maternal mortality; malaria & TB; access to education.
  - Widely varying progress across and between countries, and across population sub-groups
- The challenge now is to ensure explicit attention to mental health as part of the post-2015 development framework
A NEW GLOBAL PARTNERSHIP: ERADICATE POVERTY AND TRANSFORM ECONOMIES THROUGH SUSTAINABLE DEVELOPMENT


Transformative shifts
1. Leave no one behind
2. Put sustainable development at the core
3. Transform economies for jobs and inclusive growth
4. Build peace and effective, open and accountable institutions for all
5. Forge a new global partnership
Possible post-2015 Goals

1. End Poverty
2. Empower Girls and Women and Achieve Gender Equality
3. Provide Quality Education and Lifelong Learning
4. Ensure Healthy Lives
5. Ensure Food Security and Good Nutrition
6. Achieve Universal Access to Water and Sanitation
7. Secure Sustainable Energy
8. Create Jobs, Sustainable Livelihoods, and Equitable Growth
9. Manage Natural Resource Assets Sustainably
10. Ensure Good Governance and Effective Institutions
11. Ensure Stable and Peaceful Societies
12. Create a Global Enabling Environment and Catalyse Long-Term Finance
Possible post-2015 Goals

- 12 Possible Development Goals
  1. End poverty
  2. Empower girls and women and achieve gender equity
  3. Provide quality education and lifelong learning
  4. Ensure healthy lives
  5. Ensure food security and good nutrition
  6. Achieve universal access to water and sanitation
  7. Secure sustainable energy
  8. Create jobs, sustainable livelihoods and equitable growth
  9. Manage natural resource assets sustainably
  10. Ensure good governance and effective institutions
  11. Ensure stable and peaceful societies
  12. Create a global enabling environment and catalyse long-term finance

- Admirable goals
  - Will promote mental health and prevent mental disorders
  - People with mental disorders should not be excluded from the benefits of development
  - The transformative shift focusing on equity – “leave no-one behind” – must be vigorously implemented. Include people with mental disorders.
1. Promote protection of human rights and prevent discrimination against people with mental ill health and psychosocial disabilities.

2. Bridge the massive mental health treatment gap and improve access to health and social care.

3. Explicitly integrate attention to mental health into development initiatives.
1. *Promote protection of human rights and prevent discrimination against people with mental ill health and psychosocial disabilities*

- Promote the full implementation CRPD & strengthen human rights protections
- People with psychosocial disabilities – full partners in decision-making
- Equal access to health, education, livelihood and other development projects
2. Bridge the massive mental health treatment gap and improve access to health and social care

- Support full implementation of the WHO Comprehensive Mental Health Action Plan & Integrate mental health into NCD services
- Parity of access to care with physical health services
- Equity through universal health coverage which also includes the most marginalised
3. Explicitly integrate attention to mental health into development initiatives

- Attention to mental wellbeing will support success in health, education, economic reform and human rights
- Paying specific attention to the most vulnerable groups
- Integrating mental health will maximise the impact of interventions among the general population.
- Develop and implement specific outcome measures related to mental wellbeing
To realise the public health benefits of what we know about social determinants mental health interventions have to be implemented at the necessary scale:

- Leadership matters most.
- Massive increase in MH investment by governments and integration of MH into all types of development programs.
  - Multilateral agencies (e.g. development banks); bilateral development agencies; iNGOs and INGOs; philanthropic, research and educational organisations....
- Global partnerships for mental health as an essential component of development
  - Actions across sectors, across the life course, all types of mental disorders (CMDs and SMDs), mental health promotion, illness prevention, treatment and rehabilitation/recovery.
Social Determinants > Public Health

- Mental health as integral part of the post-2015 development framework
  - human security as the conceptual underpinning
  - a commitment to equity, and
  - the intention to “leave no-one behind”

Enabling development environment for substantial progress in global mental health

- WHA adoption of the MH comprehensive action plan
  - A major advance
  - Rhetorical support > practical action informed by what we know about social determinants
An emerging development architecture that can deliver effective interventions to deal with social determinants

The global development enterprise and the post-2015 framework is the only program of sufficient scale and authority to bring together the necessary political commitment, resources, expertise to achieve global mental health objectives in LMICs – e.g. effective policy and practice responses to the social determinants.

Program do not have to be explicit “mental health” programs to deliver substantial mental health benefits. The social determinants “determine” much more than than mental health.

We need in mental health to better understand the language, conceptual underpinnings and organisational approaches of the development sector to establish partnerships for mental health benefit.
Thank you for your attention