Improving the mental health of the population, a strategy for the European Union. Green Paper

2006/2058(INI) - 06/09/2006 - Text adopted by Parliament, single reading

The European Parliament adopted a resolution based on the own-initiative report by John **BOWIS** (EPP-ED, UK) in response to the Commission's Green Paper on a strategy on mental health for the European Union. It pointed out that during the course of any one year, 18.4 million people in the EU aged between 18 and 65 were estimated to suffer from major depression. Economic costs to society of mental ill health were enormous, with some estimates putting them at between 3% and 4% of GDP in the Member States. Further statistics show that some 58 000 EU citizens commit suicide each year, more than the annual deaths from road traffic accidents or HIV/AIDS, and ten times this number attempt suicide.

Accordingly, Parliament welcomed the Commission's commitment to mental health promotion, and called for greater priority for this in health policies, with the emphasis on prevention, and in the Union's research policy. However, it felt that the gender dimension had not been duly taken into account in the Green Paper, and called for this dimension to be systematically considered in the measures proposed to promote mental health, in preventive measures and in research, in which studies had to date been insufficient.

Parliament called on the Commission to follow up the Green Paper with a proposal for a directive on mental health in Europe and the defence of and respect for the civil and fundamental rights of persons suffering from mental disorders. Any future proposal by the Commission should involve partnership and consultation with those who had experienced mental health problems, their families and carers and advocacy NGOs. People with learning disabilities should be included within any future strategy, as they faced similar issues as people with mental disorders, including social exclusion, institutionalisation, abuse of human rights, discrimination, stigma and lack of support for themselves and their families and carers.

Welcoming the Commission's highlighting of children, employees, older people and disadvantaged members of society as key target groups, Parliament stated that it would extend this to include those with severe mental illness, those with long-term and terminal illnesses, the disabled, prisoners, ethnic and other minority groups, rough sleepers, migrants, persons in precarious jobs and the unemployed, and the range of mental health and care issues of specific reference to women.

Parliament called for the defeat of stigma to be at the heart of any future strategy, e.g. by establishing annual campaigns on mental health issues in order to combat ignorance and injustice, as the stigma attached to mental ill health leads to rejection by society in every field.

Parliament went on to make several recommendations, the key ones being as follows:

- there should be a multi-disciplinary and multi-agency response to tackling complex mental ill health situations, such as how best to support children or adolescents with developmental or behavioural problems or eating disorders, and/or whose parents in many cases themselves suffer from mental ill health (or are kept in long-term institutions);

- employers should introduce "Mental Health at Work" policies as a necessary part of their health and safety at work responsibility;

- there should be greater recognition of the connection between discrimination, violence, and poor mental health, which underlined the importance of combating all forms of violence and discrimination as part of the strategy for the promotion of mental health through prevention;

- one of the greatest challenges in mental health is the ageing of Europe's population. Parliament urged that more emphasis be given to research into the mechanisms and causes of neurodegenerative diseases or other psychiatric illnesses in the elderly and to their prevention as well as their care, including the development of new therapies;

- emphasis should be placed on the link between the consumption of alcohol and illegal drugs and mental disorders;

- people with mental disorders should be treated with dignity and humanity; there should be a clear understanding as to their rights to be or not to be treated; they should be empowered wherever possible to participate in decisions about their own treatment and consulted collectively on services; when prescribed medicines, they should have the fewest possible side effects; and there should be information and advice for those who wish to withdraw safely from medication;

- there should be more research into therapeutic and psychological interventions, into the development of more effective drugs with fewer side effects, into determinants of mental disorders and suicide, into outcome measurements for investment in mental health promotion and into methods contributing to successful recovery and remission;

- the Commission should support continuing reforms in any Member State that practised the abuse of psychiatry, over-use of medication or incarceration, or inhumane practices such as caged beds or excessive use of seclusion rooms, particularly in some of the new Member States. In some of the latter mental health indicators in society were drifting in the wrong direction, with a lot of suicides, violence and dependencies, especially on alcohol. Parliament called on the Commission to place the reform of psychiatry on the agenda for EU accession negotiations, and felt that prison was not a suitable environment for those suffering mental ill health and that alternatives should be actively pursued.

Parliament went on to draw attention to the large number of children who grow up in state care institutions in some Member States, especially in some of the new ones. The Commission should support more effectively the creation of alternative systems, which would help parents from risk groups to care for their children properly. Parliament called for the "Child and adolescent mental health in an enlarged Europe: development of effective policies and practices" project, which would coordinate progress in children's mental health strategy in the Member States, to be started as quickly as possible and effectively implemented.

Finally, Parliament called for a "Mental Health Coordinating and Monitoring Group" to be established by the Commission to collect information on mental health practice and promotion in the EU, to assess the adequacy (in terms of numbers and training) of existing mental health professionals and infrastructure, and to disseminate information on best practice to all Member States and all parties involved in the treatment of mental health.