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**Improving mental health and well-being  
by promoting the social inclusion of (ex)users of mental  
health services  
means taking a decisive step towards the eradication of  
poverty and social exclusion**

**Position of Mental Health Europe on the occasion of the 6<sup>th</sup> Round Table on Poverty  
and Social Exclusion, Azores, Portugal 16-17 October 2007**

Good mental health and well-being of the European population is a valuable resource, which enables citizens to realise their full intellectual and emotional potential and to find and fulfil their roles in society, in school, in working life and in retirement. For the European Union, mental health and well-being will contribute to the attainment of some of the EU's strategic policy objectives, such as the Lisbon Strategy for Growth and Jobs<sup>1</sup>.

Low social and economic status increases people's vulnerability for mental ill-health. Job loss and unemployment also can lower self-esteem and lead to depression and poverty. Young people, women, migrants, homeless people, older people and other marginalised groups are at an increased risk for mental ill-health.

In today's Europe where important demographic and social changes, such as the ageing of the population, falling birth rates, increased immigration both from within and outside the European Union, are under way, these changes will have far reaching consequences for all vulnerable groups, their mental health and well-being. These changes require a fundamental reassessment of how health and social and other relevant resources are organised and utilised, and a serious political debate on how to best face and deal with these challenges.

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<sup>1</sup> European Commission. Green Paper. Improving the mental health of the population: Towards a strategy on mental health for the European Union. (COM(2005)484)

## **How the OMC on Social Protection and Social Inclusion can help promoting mental health and well-being for all in Europe**

### **1. Include mental health and well-being in the framework for the OMC and for the National Action Plans for Social Inclusion**

In the latest National Action Plans as well as the Joint Report on Social Protection and Social Inclusion, there is hardly any mention whatsoever of mental health and well-being and of actions designed to tackle the social inclusion of people with mental health problems.

Disability is a general category referring to all people having a wide variety of different physical, intellectual and mental conditions. However, these conditions are indeed very different. Only by having sufficient knowledge about the differences can each of these groups be treated and dealt with adequately. Mental illness is an illness that can be cured; in general, people with mental illness have no intellectual impairment and can live, work and become active members of society when their mental health problem is controlled. Physical and intellectual disabilities, on the other hand, are in most cases life-long conditions. People with disabilities are not ill, unless they have a common illness, but they need easy-to-understand information, education or training to live included in society.

In the frame of OMC, Member States should consider the differences between the various groups at risk for poverty and social exclusion. Research, information and communication systems should be put in place that better support the acquisition, effective utilisation and dissemination of knowledge to promote mental health and well being and to prevent mental illness. The information obtained in cooperation with (ex)users of mental health services and civil society should be used to develop interventions that are tailored to the needs of the different groups at risk and to improve existing practices and to establish new priorities.

### **2. Engage different sectors and actors in the OMC process to promote mental health and well-being**

Good mental health is “a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community”<sup>2</sup>. Mental health and well-being

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<sup>2</sup> World Health Organisation. Promoting Mental Health : concepts, emerging evidence, practice (2004)

therefore contributes to the social, human and economic capital of society. Mental ill health, on the other hand, can drastically reduce the quality of life of affected individuals and their families. It is among the top three causes for absence from work and a leading reason for people taking early retirement or a disablement pension.

Promoting mental health and well-being of all European citizens is not only a challenge for the health sector. Although medical and therapeutical interventions play a central role in tackling challenges faced by people with mental health problems, they alone cannot address and change the adverse social determinants of ill health including mental ill health. A comprehensive approach is needed, covering the provision of treatment, care and services for individuals, but also action for the whole population in order to promote mental health and well being, to prevent mental ill health and to address the challenges associated with stigma, discrimination and social exclusion of people with disabilities.

In this regard, the OMC process should involve many actors from, in particular, the health and social policy sectors and other stakeholders, including governmental and non-governmental organisations, the public and private sector, whose decisions impact on the mental health of the population. Organisations of (ex)users of mental health services and civil society organisations should be at the forefront of building solutions.

### **3. Ensure effective implementation of mental health and well-being promoting action points and programmes**

National Action Plans on Social Inclusion should be prepared and planned, but also implemented. Effective implementation requires resources, personnel and infrastructures that are proportional to the size of the needs.

Available infrastructures and resources that could support implementation of prevention, promotion and social inclusion in mental health should be identified and partnerships developed. Furthermore, administrative, financial and management instruments should be created and strengthened to support multi-sectoral implementation.

Emphasis must be given to mechanisms to inform, involve and promote the development, influence and cross-linking with civil society.

Mental Health Europe is a European level non-governmental organisation (NGO) and network committed to the promotion of positive mental health and well-being, the prevention of mental disorders, the improvement of care, advocacy for social inclusion and the protection of the human rights of people with mental health problems and their families and carers.

MHE is a European level NGO and network, recognised under Belgian law as an international not-for-profit organisation, which represents associations, organisations and individuals active in the field of mental health and well-being in Europe. In 2007, MHE has 52 full members, 12 associate members and 55 individual members. All the Member States of the European Union are represented in the membership.

Membership of MHE is open to NGOs, individuals, professionals, volunteers and others, including people with mental health problems, who are active in the mental health field at local, national, regional or European level and who share and who support MHE's vision. MHE represents the common interest of these organisations and lobbies and advocate for it at the European level.

For further information about MHE's position on the occasion of the 6th Round Table on Poverty and Social Inclusion, please contact MHE at: [info@mhe-sme.org](mailto:info@mhe-sme.org), +32 2 280 04 68