

Exclusive: Britain's £100bn mental health crisis

Experts demand radical policy rethink, to focus on illness prevention rather than expensive and ineffective treatments

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She appears well, but looks can deceive. Annabelle Davis has an eating disorder so severe it has left her close to suicide. Hers is just one story among millions, and new figures show the misery at record levels

Mental illness in England cost the nation more than £100bn last year, highlighting some of the most serious emotional and psychological problems in Europe. More than £21bn was spent on such health treatments as antidepressants and social care such as befriending services, an increase of 75 per cent since 2003.

Experts warned that the figure is likely to rise as government cuts to public services start to have an impact. The statistics, released today by the Centre for Mental Health, show mental health-related sick leave and unemployment cost the economy more than £30bn. The true impact is likely to be much higher, as the costs of underperformance and poor productivity are not included.

The cost of the less tangible, human toll of mental illness is calculated to be £50bn: this figure takes into account the negative impact that conditions such as depression, anxiety, psychoses and bipolar disorder have on quality of life and life expectancy, as well as the costs of providing informal care.

Rates of reported mental illness have remained fairly stable since 2003 when the centre put the cost at £77.4 bn. The new figure – an increase of 36 per cent – takes into account inflation since 2003 and the rising cost of health and social care.

The most recent figures for Scotland and Northern Ireland are £8.6bn and £3bn respectively; there is no calculation for Wales.

The numbers are likely to trouble members of the coalition Government as it struggles to curb an annual deficit of £157bn by slashing departmental budgets. Mental health campaigners insist that all of the money being spent is essential but say it should be diverted towards prevention.

One in four people experiences some kind of mental health problem in the course of a year. Women are more likely to have been treated for a mental health problem than men, but men are three times as likely to die by suicide. About 10 per cent of children have a mental health problem at any one time. The UK has one of the highest rates of self-harm in Europe, at 400 per 100,000 population. About 45,000 people a year are sectioned under the Mental Health Act.

In less extreme cases, some eight million people of working age experience common mental health problems such as depression, anxiety and sleep problems. Cases such as those of Annabelle Davis, 20, from Weymouth, who was prescribed antidepressants for an eating disorder, illustrate the need for early counselling. Denied the right help when she became ill at 15, she has needed a range of interventions including adult intensive psychiatric care. She is still on powerful drugs, but finally has a counsellor and is struggling to catch up with school.

There is little sign that future cases like Annabelle's will fare much better. A survey by the charity Rethink, published last week, revealed that a third of GPs, who will soon take over commissioning services, believe mental health care is the most vulnerable under current proposals set out in the NHS White Paper. Two-fifths of GPs surveyed admitted they knew little about specialist services needed by people with psychoses and bipolar affective disorder.

The previous government invested heavily in community mental health services for adults, although services for inpatients, children, young people and the elderly lagged behind. The controversial 2007 Mental Health Act, opposed by this newspaper, has proven costly: 4,000 people were forcibly treated under community treatment orders in the first year – 10 times the number predicted.

But its radical and well-received 10-year New Horizons strategy recognised the urgent need to refocus resources away from only treatment. It outlined sweeping plans to improve the mental health of the nation and reduce rates of illness by making well-being and prevention a priority for local and national services. It has been abandoned by the coalition, which shows no sign of moving away from a treatment approach.

Andy Burnham, shadow Health Secretary, warned against cuts in funding for mental health. He said: "If mental health promotion is not placed front and centre of public health strategy, these costs will continue to rise. The Government needs to explain why it is abandoning New Horizons – a unique strategy that focused on changing attitudes to mental health.

"It enjoyed widespread support, so if the Government is changing direction it must explain why and what will replace it. As the coalition pushes ahead with its cuts, mental health services must not be seen as a soft target."

Dr Andrew McCulloch, chief executive of the Mental Health Foundation, said: "This invaluable new data once again underlines the fact that we need to revolutionise the way that we tackle mental health, to increase the focus on early intervention and preventative measures, rather than just treatment once an individual has reached crisis point. Figures like these show that, in times of fiscal stringency, there are also considerable economic benefits to this approach."

Sophie Corlett, of Britain's largest mental health charity, Mind, said: "You don't have to cut mental health services to put people's mental health at risk. Reducing benefits and pushing people into poverty, job losses, and less investment in community services are just some of the things that can have serious repercussions for our well-being. The recession has seen a greater need for the Government to look after the nation's mental health."

A Department of Health spokesman said yesterday: "The Government recognises that good mental health is as important as good physical health. That is why we are developing a new strategy for mental health, working across government, with local communities, the independent sector and health professionals to create a more personalised service tailored to individual needs. We want patients to be supported into their recovery."