

Better mental health and well-being

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Mental ill-health imposes a huge burden on individuals, their families, society, health systems and the economy. Mental health care remains a neglected area of health policy in too many countries.

This statement by the Organisation for Economic Co-operation and Development (OECD 2014) confirms the overall bleak assessment of the reaction to mental ill-health that prevails worldwide even in well-developed economies. Mental ill-health has accompanying costs in terms of reduced quality of life, loss of productivity, and premature mortality. Data from the European Union shows that stigma and the fear of its possible effects on personal, family and employment prospects prevents around half of those who need mental health care to come forward and request such care.

Health policy makers and service providers must reflect on the implications of such devastating statements that affect the personal life of a sizeable proportion of the population. The Maltese Parliament has provided an initial strong and meaningful response by approving unanimously a new Mental Health Act, which was developed with the contribution of hundreds of stakeholders and professionals. This Act comes fully into force on 10th October 2014.

The new Act provides a framework within which professionals and patients can interact on the basis of a set of nineteen rights and a number of obligations with specific timeframes and checks and balances ensuring that such rights are upheld and safeguarded. The full implementation of the Act will take a number of years but it is encouraging to note that the first steps are already being taken by service providers within the public mental health services.

In the past three months, my staff and I have had the privilege of visiting 43 different wards, units and services that cater for the needs of persons with mental disorder. The level of awareness to the new law is encouraging, staff is becoming more attuned to the new methods and approaches, and one visible proof is the introduction

of consent forms to treatment. Although not 100% complete, this exercise has been embraced by many professionals who realise the importance of dialogue with patients and carers and the opening up of service delivery to a multidisciplinary team of professionals each contributing to the wellbeing of the service user. There are many other changes that will occur in the coming months and the goodwill of most stakeholders is the best guarantee of success. It may seem an uphill struggle and the necessary resources may not be fully available but the evidence is now overwhelming: there is a very hefty price-tag attached to neglecting mental ill-health. These are the main challenges for the providers of specialised mental health services.

Prevention of disease has always been the main thrust of family medicine. In this regard, primary care is further empowered by the provisions of the new Mental Health Act. Beyond shared care with specialist teams, about which you can read further articles in this edition of the JMCFD, the family medicine specialist is challenged to reflect on the impact of the preventive approach to mental ill-health. This requires the ability to look for and recognise high risk situations which lead to mental disorder such as major life-events, trauma, family discord, etc.; the increased mental ill-health burden of chronic disease; and the increased severity of chronic disease in the presence of mental disorder. In all these aspects the family physician has a pivotal role in the early diagnosis and treatment or referral of those at increased risk of mental disorder. This is an integral part of the new challenge for the entire health system which is the mainstreaming of mental health in all aspects of care provision.

The deep concerns expressed by OECD regarding the impact of mental ill-health on economic growth and prosperity require a societal response. The determinants of better mental health for all in Malta and Gozo transcend the traditional health and social care boundaries and include individual behaviour and

lifestyles including ability to cope and good interpersonal relationships; better work-life balance; improved social and environmental factors like income, social status, education, employment, housing and working conditions; and finally good physical health which includes access to good quality health and social services. Tackling these determinants will alleviate the burden of mental disorders in our society. Every citizen has a personal responsibility for better mental health and well-being.

References

OECD, 2014. *Making Mental Health Count – The Social and Economic Costs of Neglecting Mental Health Care*. OECD Health Policy Studies: OECD Publishing.

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