Mental Health, a burning injustice: Time to close the prevention gap

For many people, the origins of later mental health difficulties are in their youth. Over half of the cost of addressing emotional and behavioural problems of children and young people falls on front-line education. Three quarters of life long mental ill-health starts before age eighteen.

The risks of poor mental health are not evenly distributed. Social disadvantage increases the prevalence of mental health problems. People living in poverty, poor housing, or who are subject to violence, abuse, or neglect are at increased risk of poor mental health throughout their life – and young people in care or who are not in education, employment, or training are a particular high risk group.

The University of Birmingham has established a Policy Commission to build an evidence base for prevention and early intervention to reduce the prevalence of mental illness and promote better wellbeing for all. This statement is being issued as part of mental health awareness week (8th -14th May 2017).

A final report will be published in May 2018 when the Commission will make recommendations for investing in the most promising approaches to mental health prevention and early intervention.

From the Commission's work to date, it is evident that mental health needs to be core business for the whole of Government including front-line services, schools, and employers, as well as local authorities and the NHS. To achieve that the Commission calls on the incoming Government to take five key actions:

1. **A strong focus on prevention and early intervention:** Without dedicated resources and effort this is likely to remain an aspiration. Focus investment to prevent poor mental health on families, schools, and workplaces to prevent poor mental health and to reduce the impact of known risk factors such as violence, abuse, and discrimination. Take concerted action to address inequalities in mental health.

2. **Start early and start young:** To reduce the prevalence and costs of poor mental health, a proactive approach to identifying and meeting need is required to prevent mental distress entrenching into lifelong mental ill-health. This involves good perinatal support and ensuring that all maternity services have rapid access to psychological therapies and

the full range of perinatal mental health services. It also requires recognition of the critical importance of relationships in promoting good mental health and child development. This means offering timely support to parents to strengthen parenting and reduce parental conflict.

3. **Make mental health and wellbeing integral part of the life and work of schools, not a bolt on:** Embed mental health expertise in every school that ensures there is no wrong door for young people when it comes to getting the right help at the right time. Ensure that teacher training includes a grounding in child development and that Ofsted takes a whole school view wellbeing when inspecting.

4. **Strengthen the contribution primary care can make to prevention and promoting mental wellbeing:** Every GP should be able to call on appropriate tools to support mental as well as physical health including psychological services and social prescribing to connect their patients to community networks. GPs should be empowered to work with specialist mental health services to maximise the opportunities for early intervention. Every GP practice should also be taking concerted action to promote the physical health of people with longstanding mental health problems and co-morbid conditions to reduce unacceptable inequalities in life expectancy.

5. **Promote high standards for mental health friendly working environments to support the mental wellbeing of the workforce:** Create incentives for employers to support mental health and wellbeing as part of health and safety obligations. Employers should take part in placement and support schemes to aid the return to work of people who have experienced severe mental health problems.

Each of these actions will benefit from including people with lived experience of the mental health system in co-designing them.

The members of the University of Birmingham Mental Health Policy Commission have issued this statement as a contribution to Mental Health Awareness Week.

Further details about the Commission can be found here.