



MHE supports the Sustainable Development Goals



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Introduction

The Agenda 2030 for Sustainable Development represents a unique opportunity for improving mental health and achieving human rights worldwide. With its 17 Sustainable Development Goals (SDGs) it seeks to achieve a better and more sustainable future for all. The SDGs address key global challenges we face, such as poverty, inequality, climate, environmental degradation, corruption, prosperity, peace, justice, and health, including mental health.

Countries across the world, including the European Union (EU) and its Member States have committed to implement the SDGs by 2030. In this paper, Mental Health Europe (MHE) analyses how the SDGs can contribute to a human rights perspective on mental health, and what role the EU can play in this regard.

Sustainable Development Goals and the human rights perspective on mental health

What is the 2030 Agenda for Sustainable Development?

The Agenda 2030 for Sustainable Development (Agenda 2030) is an ambitious action plan, comprising 17 SDGs and 169 targets, framing the global development from 2015 to 2030. It seeks to end all forms of poverty, fight inequalities and tackle climate change, while ensuring that no one is left behind¹. Adopted by the United Nations General Assembly in 2015, the Agenda 2030 pursues five priorities – the five Ps – people, planet, prosperity, peace and partnership. These priorities are further translated into the individual, yet interconnected, SDGs, following up and going beyond the Millennium Development Goals².

The adoption of the SDGs represents a fundamental improvement in the way of assessing development in every area of human activity. The SDGs apply to all levels of governance and to all countries independently of their development level. Moreover, the goals are not to be considered as individual, independent elements, but rather as deeply interconnected with one another: implementing one goal has implications for the implementation of the others. The SDGs are clearly articulated and supported by measurable targets and indicators for all areas of societal activity. Their achievement should lead to a more sustainable future for everyone.

The underlying principle of the Agenda 2030 to “leave no one behind” calls for the participation of all elements of society, as well as for the active engagement of all 193 United Nations Member States. An inclusive approach needs to guide the implementation of the SDGs, emphasising their multisectoral nature, and taking into account that development and progress in one sector impacts another and synergies can lead to better results for all.³

1 For more information on Sustainable Development Knowledge Platform, see: <https://sustainabledevelopment.un.org/>

2 For more information on Sustainable Development Knowledge Platform, see: <https://www.un.org/millenniumgoals/>

3 DYBDAHL Ragnhild, LIEN, Lars. Commentary Preventive Medicine and Community Health, 2017, Volume 1(1): 1-3 ISSN: 2516-7073, available at: <https://www.oatext.com/pdf/PMCH-1-104.pdf>

Mental Health in the Sustainable Development Goals – a cross-cutting issue

It is a welcome turn of events that, for the first time, mental health is explicitly included in the UN development agenda.⁴ With the adoption of the Agenda 2030, mental health has become a human development indicator. The declaration introducing the Agenda 2030 acknowledges that “we envisage a world [...]with equitable and universal access to quality education at all levels, to health care and social protection, where physical, mental and social well-being are assured.”⁵ It continues with an appeal “to promote physical and mental health and well-being, and to extend life expectancy for all, we must achieve universal health coverage and access to quality health care.”⁶

Goal 3 seeks to ensure healthy lives and promote well-being at all ages and its target 3.4 explicitly includes the promotion of mental health and well-being in reducing mortality from so called non-communicable diseases. Target 3.8 talks about access to safe, effective, quality and affordable effective medicines.

Besides Goal 3, most of the other SDGs are directly or indirectly related to mental health. Poor mental health, for instance, hinders students to achieve educational outcomes (Goal 4 – Education).⁷ Mental health problems are also the main cause of disability and early retirement in many countries, which represents a major burden to their economies and to their social welfare systems.⁸ This has direct significance for Goal 1 – No poverty, and Goal 8 – Decent Work and Economic Growth.⁹ Goal 16 targets on developing transparent institutions and reducing corruption and bribery are also key to the delivery of quality mental health care that is free of bias and solely motivated to improve the health of service users.¹⁰

To tackle the health, social and economic impact of mental ill-health, it is important to take action at all levels of prevention, primary (i.e. working on the causes of risk factors), secondary (i.e. early intervention and support) and tertiary (i.e. focusing on advanced recovery)¹¹. Interventions to prevent mental health problems and promote good mental

4 For more information: FundaMentalSDG, available at: <https://www.fundamentalsdg.org/>

5 para 7, UN General Assembly, Resolution on Transforming our world: the 2030 Agenda for Sustainable Development, A/RES/70/1, 2015, available at: https://www.un.org/ga/search/view_doc.asp?symbol=A/RES/70/1&Lang=E

6 para 26, *ibid.*

7 WHO, Fact sheets on sustainable development goals: health targets. Mental health, available at: http://www.euro.who.int/_data/assets/pdf_file/0017/348011/Fact-sheet-SDG-Mental-health-UPDATE-02-05-2018.pdf?ua=1

8 Depression in particular comes with a high cost. The annual direct cost of depression was estimated to be €617 billion overall in the European Union in 2013 (27 Member States), with costs to employers (absenteeism) of €272 billion, to the economy (lost output through lost employment) of €242 billion, to the health sector (treatment of depression) of €63 billion and to the social welfare systems (disability benefits) of €39 billion. Matrix. Economic analysis of workplace mental health promotion and mental disorder prevention programmes and of their potential contribution to EU health, social and economic policy objectives. Luxembourg: Executive Agency for Health and Consumers;2013), available at: http://ec.europa.eu/health/sites/health/files/mental_health/docs/matrix_economic_analysis_mh_promotion.en.pdf

9 Examples taken from WHO, Fact sheets on sustainable development goals: health targets. Mental health, available at: http://www.euro.who.int/_data/assets/pdf_file/0017/348011/Fact-sheet-SDG-Mental-health-UPDATE-02-05-2018.pdf?ua=1

10 Mental Health Europe. Shedding light on transparent cooperation in healthcare. The way forward for sunshine and transparency laws across Europe, 2019, available at: <https://mhe-sme.org/wp-content/uploads/2019/01/MHE-SHEDDING-LIGHT-REPORT-Final.pdf>

11 More information primary, secondary and tertiary prevention WHO Regional Office for Europe, available at: <http://www.euro.who.int/en/health-topics/Health-systems/public-health-services/policy/the-10-essential-public-health-operations/epho5-disease-prevention,-including-early-detection-of-illness2>

health can bring life-long benefits to individuals and their networks, as well as progress in addressing development issues such as social inclusion and equality, access to justice and human rights, and sustainable economic development.¹²

Social determinants of mental health – a psychosocial model of mental health

According to OECD's latest report, more than one in six people across EU countries, that is nearly 84 million people, had a mental health problem in 2016. However, mental health problems are not distributed evenly across the population, and various factors such as age, gender and socio-economic differences influence the state of mental health. For example, on average across EU countries, women and men living in the lowest income group are more than two times more likely to experience depression than those in the highest income group.¹³

Regrettably, rather than focusing on psychological, environmental, and social influences that impact on mental health, actions still rely excessively on a biomedical model of mental health which focuses purely on biological factors. This hinders advancement in the improvement of the lives of people with mental health problems and effective mental health promotion. In order to bring real change, a psychosocial approach to mental health has emerged as a response to this outdated and human rights non-compliant paradigm. It is based on the understanding that psychological and social experiences are significantly influencing the mental health and well-being of a person.

The psychosocial model states that individuals' mental health is a unique product of social and environmental factors, especially during the early life years. These include demographic (such as gender, ethnicity), economic (income and employment), neighbourhood (community, housing, built environment), environmental (climate change, war, migration), social and cultural (education, family, social networks) determinants. Mental health is indeed not only about biology but very much about the social issues and barriers we face, how we work, where we live, and our basic human rights: it cannot be addressed in silos.¹⁴

The UN, in its report on the realisation of the SDGs for and with persons with disabilities, acknowledged the strong links between mental health and the realisation of social, economic, and cultural rights. It reiterated the notion that mental health is a fundamental human right and that the circumstances undermining mental health should be challenged, including inequalities in income, living conditions, safety or food security.¹⁵

12 DYBDAHL Ragnhild, LIEN, Lars. Commentary Preventive Medicine and Community Health, 2017, Volume 1(1): 1-3 ISSN: 2516-7073, available at: <https://www.oatext.com/pdf/PMCH-1-104.pdf>

13 OECD/EU (2018), Health at a Glance: Europe 2018: State of Health in the EU Cycle, OECD Publishing, Paris/EU, Brussels, https://doi.org/10.1787/health_glance_eur-2018-en.

14 MHE Response to the Lancet Commission Report on Global Mental Health and Sustainable Development, 2018, available at: <https://www.mhe-sme.org/mhe-response-lancet-commission-report-global-mental-health-sustainable-development/>

15 UN Realisation of the Sustainable Development Goals By, For and With the Persons with Disabilities. Flagship Report on Disability and Development, 2018, available at: <https://www.un.org/development/desa/disabilities/wp-content/uploads/sites/15/2018/12/UN-Flagship-Report-Disability.pdf>

Nevertheless, as the Special Rapporteur to health stressed, current public policies continue to neglect the importance of the preconditions of poor mental health, such as violence, social exclusion and isolation, systemic socioeconomic disadvantage and unsuitable work and schooling conditions. He further warned that states will not achieve Goal 3 without a robust commitment to addressing social and psychosocial determinants of health, as well as inequalities in income, education, living and working conditions and distribution of resources.¹⁶

Sustainable Development Goals as a human rights framework

The Agenda 2030 is a rights-based framework. It is rooted in the Universal Declaration of Human Rights and other international human rights treaties and is informed by the Declaration on the Right to Development. It includes a commitment to be “implemented in a manner that is consistent with the rights and obligations of States under international law”.¹⁷ As such, the Agenda 2030 provides valuable support for a human rights model of mental health and well-being.

The highest attainable standard of health and well-being is a basic precondition for a happy and productive life. To be able to achieve this standard, good quality, effective, accessible and affordable health care services are essential. In his report on human rights, the UN Special Rapporteur to health has emphasised the connection of the human right of everyone to the highest attainable standard of physical and mental health with other rights relevant to the SDGs, including the right to education, freedom from torture, identity and equality before the law, meaningful engagement of persons with lived experience, their families and civil society as well as with the principle of accountability for the enjoyment of the right to mental health.¹⁸

The SDGs, and the right to health framing Goal 3, allow also for better implementation of the United Nations Convention on the Rights of Persons with Disabilities (UN CRPD) vis-à-vis persons with psychosocial disabilities. The UN CRPD, adopted in 2006 and ratified by the EU and all its Member States, introduces a social and human rights-based approach to disability. It states that people with disabilities, including those with psychosocial disabilities, must fully enjoy their human rights.¹⁹ The UN CRPD is not a catalogue of newly created human rights for persons with disabilities. It rather claims that all the rights previously granted by international human rights instruments such as the International Covenant on Civil and Political Rights and International Covenant on Economic, Social and Cultural Rights should apply to persons with disabilities without any discrimination. Many of the SDGs overlap with articles of the UN CRPD.

16 UN Report of the Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health, A/HRC/35/21, 2017, available at: <https://undocs.org/A/HRC/35/21>

17 Para 18, UN General Assembly, Resolution on Transforming our world: the 2030 Agenda for Sustainable Development, A/RES/70/1, 2015, available at: https://www.un.org/ga/search/view_doc.asp?symbol=A/RES/70/1&Lang=E

18 UN Report of the Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health, A/HRC/35/21, 2017, available at: <https://undocs.org/A/HRC/35/21>

19 MHE Response to the Lancet Commission Report on Global Mental Health and Sustainable Development, 2018, available at: <https://www.mhe-sme.org/mhe-response-lancet-commission-report-global-mental-health-sustainable-development/>

In particular, implementing the SDGs can be a chance to move towards human rights compliant mental health services that are community based, culturally appropriate, gender, age and sexual orientation sensitive, and designed to respect confidentiality and empower individuals to control their lives. Mental health services following the principles of the UN CRPD should also be respectful of the dignity, will and legal capacity of persons with mental health problems.²⁰

The SDGs can therefore provide an additional political momentum for the EU and its Member States to translate their actions towards the full implementation of the UN CRPD into reality and proceed in ensuring good mental health as a major determinant of quality of life, well-being and social participation in Europe.

Role of the European Union in implementing the Sustainable Development Goals

The EU has been one of the leading forces behind the Agenda 2030 and it has fully committed itself to its implementation. Sustainable development is also a fundamental objective of the EU, laid down in the Article 3(3) of the TEU. Sustainability is defined as meeting the needs of the present without compromising the ability of future generation to meet their own needs. Therefore, sustainable development represents an important component of the debate on the future of Europe, encompassing growth, accountability, social inclusion and environmental protection.

In 2017, the European Commission published a White Paper on the Future of Europe²¹, followed in 2019 by a Reflection Paper: Towards a Sustainable Europe by 2030.²² The reflection paper presented different interesting scenarios upon which the EU's Strategic Agenda for 2019-2024 can be built. The most pertinent among the scenarios proposed calls for an overarching European SDGs strategy, in line with the recommendations of Multi-stakeholder Platform on the SDGs²³. Both the European Parliament and the EU Council support the development of such a strategy to implement the Agenda 2030 and the SDGs.²⁴

Despite these signals of commitment, not enough has been done towards the achievement of the SDGs four years after their adoption. The lack of a European Strategy for implementing the Agenda 2030 is a major barrier to reach the goal of a sustainable future in time.

20 MHE Position Paper on Article 12 of the UN CRPD – Legal Capacity. Position Paper on Article 12 of the UN CRPD – Legal Capacity. Autonomy, choice and the importance of supported-decision making for persons with psychosocial disabilities, 2017, available at: <https://mhe-sme.org/position-paper-on-article-12/>

21 European Commission. White Paper on the Future of Europe. Reflections and scenarios for the EU 27 by 2025, 2017, available at: https://ec.europa.eu/commission/sites/beta-political/files/white_paper_on_the_future_of_europe_en.pdf

22 European Commission. Reflection Paper. Towards a Sustainable Europe by 2030, 2019, available at: https://ec.europa.eu/commission/sites/beta-political/files/rp_sustainable_europe_30-01_en_web.pdf

23 For more info: European Commission, Multi-stakeholder platform on SDGs, available at: https://ec.europa.eu/info/strategy/international-strategies/eu-and-sustainable-development-goals/multi-stakeholder-platform-sdgs_en

24 European Parliament (2017), Resolution of 6 July 2017 on EU action for sustainability (2017/2009(INI)), (2017/2009(INI)), P8_TA(2017)0315, Strasbourg, 6 July 2017, available at: http://www.europarl.europa.eu/doceo/document/TA-8-2017-0315_EN.html, Council of the European Union, Council Conclusions on A sustainable European future: The EU response to the 2030 Agenda for Sustainable Development, 10370/17, available at: <http://data.consilium.europa.eu/doc/document/ST-10370-2017-INIT/en/pdf>

The EU has yet to fulfil its commitment to mainstreaming the SDGs in all relevant policies. Cuts in welfare, insufficient and inadequate investment in health services and infrastructure, increased health and social inequalities and persistent multi-dimensional barriers to healthcare access remain actual challenges across Europe. This represents a particular hardship for people facing vulnerable situations, such as people with disabilities, including those with psychosocial disabilities.²⁵ Therefore, an immediate political response from the EU to the social dimensions of sustainable development is required in order to achieve any progress in implementing all the SDGs targets.

The EU should translate without further delay its commitment to the sustainable development Agenda into a concrete plan of implementation concerning all goals and targets, with a clear timeline and investment plan and a well-defined monitoring mechanism. A successful European SDGs strategy should explicitly acknowledge and tackle the social determinants of mental health. The Strategy should support measures promoting gender equality, work-life balance, quality education, accessible and inclusive workplaces and equitable living environments, including community-based services vital for cohesive, fair and inclusive societies²⁶. Investments should also focus on the health and well-being of children and young people in order to break the cycle of disadvantage and social exclusion than can exacerbate mental health problems.

Beside the European SDGs strategy, MHE advocates for the adoption of a European Mental Health Strategy focused on cross-sectoral impacts of different policy sectors on mental health. Such strategy could further support the implementation of the SDGs by emphasising effective intersectoral collaboration through a knowledge-based approach, early interventions, and implementation of the Social Pillar.²⁷

Key recommendations

The Agenda 2030 represents a unique opportunity to look at mental health as a complex, socially and environmentally determined human rights issue. The development goals included in the Agenda are closely interlinked, as are the factors conducive to good mental health and to better lives for people with mental health problems. Work on the social determinants of mental health can be achieved via the implementation of the SDGs, and prevention of mental ill health can support the achievement of such goals.

The SDGs also create a useful framework for the full implementation of the UN CRPD's human rights model of psychosocial disability, especially when it comes to providing access to human rights compliant, recovery-oriented and community-based services that promote social inclusion and offer support at all care levels.

25 SDG Watch Europe report on EU Reflection Paper on SDGs, In the best option: 4 years after the adoption of the UN 2030 Agenda for Sustainable Development, the EU considers this agenda as the overarching strategy for the Future of Europe, 2019, available at: <https://www.sdgwatcheurope.org/wp-content/uploads/2019/02/reaction-on-Reflection-paper-SDGs.pdf>

26 The Multi-Stakeholder Platform on the implementation of the Sustainable Development Goals in the European Union – the “EU SDG multi-stakeholder platform” – was established in May 2017 to support and advise the European Commission and all stakeholders involved on the implementation of the SDGs at EU level., available at: https://ec.europa.eu/info/sites/info/files/sdg_multistakeholder_platform_input_to_reflection_paper_sustainable_europe2.pdf

27 MHE's reaction to the Draft Council Conclusions on the Economy of Well-being, 2019, available at: <https://www.mhe-sme.org/reaction-to-the-draft-council-conclusions-on-the-economy-of-well-being/>

The EU can take advantage of the possibilities offered by the full implementation of the Agenda 2030, to which it committed, to achieve its own socio-economic goals. In this regard MHE:

Urges the EU to adopt a European SDGs Implementation Strategy

The EU should adopt an overarching European SDGs Strategy to guide all the actions of the EU and its Member States in implementing the SDGs as mentioned in the Commission's reflection paper "Towards a Sustainable Europe by 2030";

Calls on the EU to mainstream SDGs into relevant EU policies

The EU should fully integrate the SDGs in its policies and governance, providing guidance for both the EU institutions and the Member States in their implementation, monitoring and review of the Agenda 2030.²⁸ The human rights agenda, including the UN CRPD, must be reflected in all regional and national work to align to the Agenda 2030;

Calls on the EU to strengthen the social dimension of the EU

The EU should use the Agenda 2030 to further strengthen the social dimension of the European Semester in order to promote inclusion, equality, including gender equality, in line with the European Pillar of Social Right by monitoring the SDGs progress in the context of the European Semester;²⁹

Urges the EU to reflect SDGs in its Multiannual Financial Framework

The EU's political engagement should be reflected in the Multiannual Financial Framework (MFF) for 2021-2027;³⁰

Recommends the EU to create a European Mental Health Strategy

The EU should systematically employ an integrated approach to mental health, ideally through the establishment of a European Mental Health Strategy. Working across sectors in a coordinated way to create effective universal and targeted interventions for promoting mental health and recovery and reduce stigmatisation, discrimination and human rights violations should be a priority area in such strategy.

28 European Parliament Report, Annual strategic report on the implementation and delivery of the Sustainable Development Goals (SDGs) (2018/2279(INI)), 2019, available at: http://www.europarl.europa.eu/doceo/document/A-8-2019-0160_EN.html

29 European Health Forum Gastein, 3 – 5 OCTOBER 2018 Health and Sustainable Development Bold political choices for Agenda 2030, Conference Report, 2018, available at: https://www.ehfg.org/fileadmin/downloads/03-conference/2018/EHFG2018_Report.pdf

30 European Parliament Report, Annual strategic report on the implementation and delivery of the Sustainable Development Goals (SDGs) (2018/2279(INI)), 2019, available at: http://www.europarl.europa.eu/doceo/document/A-8-2019-0160_EN.html

