

# 1 Building a sustainable approach to depression

Depression is an urgent and growing public health problem, requiring a comprehensive policy response. This is the first in a series of briefs based on a policy report entitled *A sustainable approach to depression: moving from words to actions*. This brief considers the key elements of depression: why we should care, why we should act, and what we should do to support people who live with depression. (See page 4 for details on the rest of the series.)

# Depression: why we should care

*'A human being can survive almost anything, as long as she sees the end in sight. But depression is so insidious, and it compounds daily, that it's impossible to ever see the end. The fog is like a cage without a key.'*

—Elizabeth Wurtzel, *Prozac Nation*. Riverhead Books, 1994

## Depression can affect anyone, at any age or stage of their life.

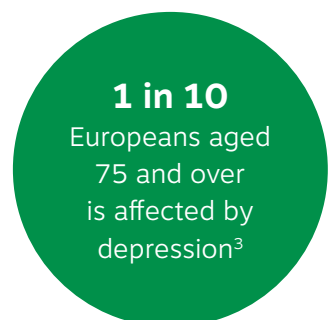
It is a complex condition, which can be devastating to the individual as well as to the people around them. Its triggers, risk factors and symptoms differ from one person to the next. In its mildest form, depression may present as feeling low; at its most severe it can be life-threatening, as around 15–20% of people with depression end their life by suicide.<sup>1</sup>

## Some people are at higher risk of depression.

The rise of depression among children and young people is particularly concerning. Poverty, unemployment and low educational attainment are associated with a higher rate of depression. It is also often linked to feelings of loneliness and social isolation, which can put many people at risk, particularly older people.

## Depression can have a huge impact on quality of life.

It may affect a person's education, work and personal life, and the impact on their family and people caring for them can also be devastating. It can also exacerbate the risk and effects of other chronic health conditions, including cardiovascular disease, diabetes, stroke, Alzheimer's disease and osteoporosis.



# Why we need to act

## Depression is on the rise.

The number of people living with depression rose by 18% between 2005 and 2015<sup>4</sup> – and by 2030, depression will be the leading cause of disease burden in high-income countries.<sup>5</sup>

## Yet current service provision is failing to offer an effective response to depression.

Mental health services are chronically underfunded, particularly in the non-hospital setting. There is too little focus on prevention, even though we could reduce the number of new cases of depression by as much as 21% through appropriate preventive efforts.<sup>6</sup>

## Depression is undertreated.

Effective treatments exist, but a minority of those affected by depression – in some countries, less than 10% – actually receive these treatments.<sup>7</sup>

## Depression takes a huge personal, social and economic toll.

It is a leading cause of low work-related productivity, as it makes people more likely to take sick leave or early retirement. The emotional and social cost to individuals and their families is mirrored by a high cost to society – even greater than that of stroke.<sup>8</sup>

**1 in 3**

people who contemplate suicide will attempt it<sup>9</sup>



Depression costs healthcare systems in Europe up to **€92 billion** every year<sup>8</sup>



# What we need to do

*Depression is an illness, and we must offer the same level of empathy for people with depression as for those with other illnesses, such as cancer or heart disease.*

**We must enable people with depression to engage in their own recovery**, by asking them what they want from mental health services and working with them to break down the barriers to accessing high-quality treatment and care.

**We also need to be careful to use language that resonates with people with depression.** Living with depression can be isolating and alienating enough without having to contend with unfamiliar and confusing terminology. Healthcare professionals and service providers should adopt a common and acceptable, non-stigmatising language that takes account of the nuances of depression.

# Moving from words to actions

*It is time to take policies targeting depression to the next level and provide sustainable funding to match policy goals. This will require an integrated, cross-service approach.*

**Ultimately, we need to invest more in the prevention, management and care of depression.**

This must start with taking the time to listen to people with depression – with empathy, and without stigma or judgement – and fully support them.

Future briefs in this series will explore areas in which policy efforts should be focused to tackle depression.



## Innovation:

how new models of care and digital tools can help enable more people to access and benefit from high-quality care



## Depression in youth:

how the rise of depression among young people can be combated by taking a whole-family approach, and how we must aim to build more resilience among young people



## Integrated services:

how embedding prevention at all levels and making it easy for people to access appropriate services can support people to find help with depression



## Suicide prevention:

how joined-up policies and a focus on empathy can help to prevent the worst outcome of depression

This series is based on a report – [A sustainable approach to depression: moving from words to actions](#) – which was developed to encourage governments and society to step up their commitment to preventing and tackling clinical depression. It identifies key recommendations to ensure mental health programmes are sustainable and have a real and lasting impact on people's lives.

The next brief in this series, focusing on innovation in mental health services, will be published in September 2019.

## References

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