Mental health: strengthening mental health promotion

There is no health without mental health

- The essential dimension of mental health is clear from the definition of health in the WHO constitution: "Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity." Mental health is an integral part of this definition.
- The goals and traditions of public health and health promotion can be applied just as usefully in the field of mental health as they have been in the prevention of infectious or of cardio-vascular diseases, for example.

Mental health is more than the absence of mental disorders

- Mental health can be conceptualized as a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community.
- In this positive sense, mental health is the foundation for well-being and effective functioning for an individual and for a community. This core concept of mental health is consistent with its wide and varied interpretation across cultures.
- Mental health promotion covers a variety of strategies, all aimed at having a positive impact on mental health. Like all health promotion, mental health promotion involves actions that create living conditions and environments to support mental health and allow people to adopt and maintain healthy lifestyles. This includes a range of actions that increase the chances of more people experiencing better mental health.

Mental health is determined by socio-economic and environmental factors

- Mental health and mental health disorders are determined by multiple and interacting social, psychological, and biological factors, just as health and illness in general.
- The clearest evidence is associated with indicators of poverty, including low levels of education, and in some studies with poor housing and poor income. Increasing and persisting socio-economic disadvantages for individuals and for communities are recognized risks to mental health.
- The greater vulnerability of disadvantaged people in each community to mental health disorders may be explained by such factors as the experience of insecurity and hopelessness, rapid social change, and the risks of violence and physical ill-health.
- A climate that respects and protects basic civil, political, socio-economic and cultural rights is also fundamental to mental health promotion. Without the security and freedom provided by these rights, it is very difficult to maintain a high level of mental health.

Mental health is linked to behaviour

- Mental, social, and behavioural health problems may interact to intensify their effects on behaviour and well-being.
- Substance abuse, violence, and abuse of women and children on the one hand, and health problems such as HIV/AIDS, depression, and anxiety on the other, are more prevalent and more difficult to cope with in conditions of high unemployment, low income, limited education, stressful work conditions, gender discrimination, social exclusion, unhealthy lifestyle, and human rights violations.
Enhancing the value and visibility of mental health promotion

- National mental health policies should not be solely concerned with mental health disorders, but also recognize and address the broader issues which promote mental health. These would include the socio-economic and environmental factors, described above, as well as behaviour. This requires mainstreaming mental health promotion into policies and programmes in government and business sectors including education, labour, justice, transport, environment, housing, and welfare, as well as the health sector. Particularly important are the decision-makers in governments at local and national levels, whose actions affect mental health in ways that they may not realize.

Cost-effective interventions exist to promote mental health, even in poor populations

- Low cost, high impact evidence-based interventions to promote mental health include:
  - Early childhood interventions (e.g. home visiting for pregnant women, pre-school psycho-social interventions, combined nutritional and psycho-social interventions in disadvantaged populations).
  - Support to children (e.g. skills building programmes, child and youth development programmes).
  - Socio-economic empowerment of women (e.g. improving access to education, microcredit schemes).
  - Social support to old age populations (e.g. befriending initiatives, community and day centres for the aged);
  - Programmes targeted at vulnerable groups, including minorities, indigenous people, migrants and people affected by conflicts and disasters (e.g. psycho-social interventions after disasters);
  - Mental health promotion activities in schools (e.g. programs supporting ecological changes in schools, child-friendly schools).
  - Mental health interventions at work (e.g. stress prevention programmes).
  - Housing policies (e.g. housing improvement).
  - Violence prevention programmes (e.g. community policing initiatives); and
  - Community development programmes (e.g. 'Communities That Care' initiatives, integrated rural development).

WHO is working with governments to promote mental health

- To implement these effective interventions, governments need to adopt a mental health framework as used to advance other areas of health and socio-economic development, and thereby engage all relevant sectors to support and evaluate activities designed to promote mental health.
- WHO supports governments by providing technical material and advice to implement policies, plans and programmes aimed at promoting mental health.

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