

11 January 2018

MENTAL HEALTH INTEGRATION INDEX

Provision for supporting people with mental illness: a comparison of 15 Asia-Pacific countries

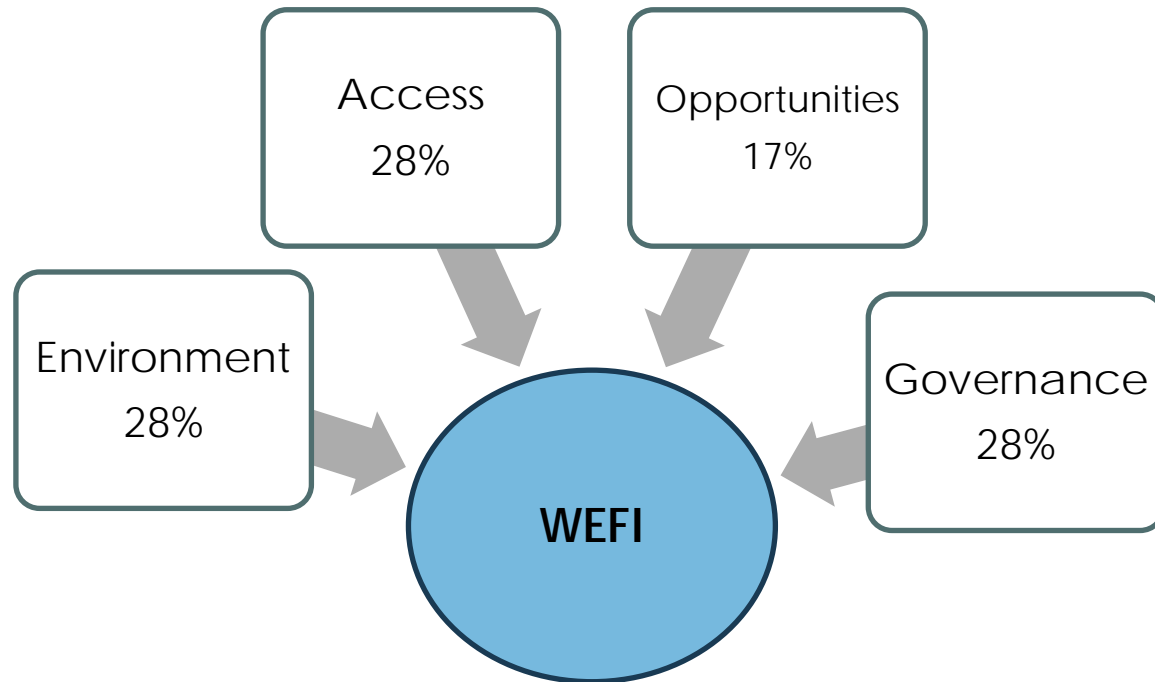
Presentation by:
Trisha Suresh, Senior Consultant
trishasuresh@economist.com

WHAT IS THE INDEX?

2

- Compares the **level of government effort** in each country in **integrating individuals suffering from mental health into society**
- Covers **15 APAC countries** and data was collected between March and May 2016. In 2014, EIU launched a similar index on Europe.
- Based on 18 indicators split across four categories. Indicators are a mixture of quantitative data and qualitative scores by EIU analysts
- Index aims to **contribute to the debate on integration** by showing the strengths and weaknesses of individual countries, and therefore where policy improvements may be needed

WHAT DOES IT MEASURE?



WHAT DOES IT MEASURE?

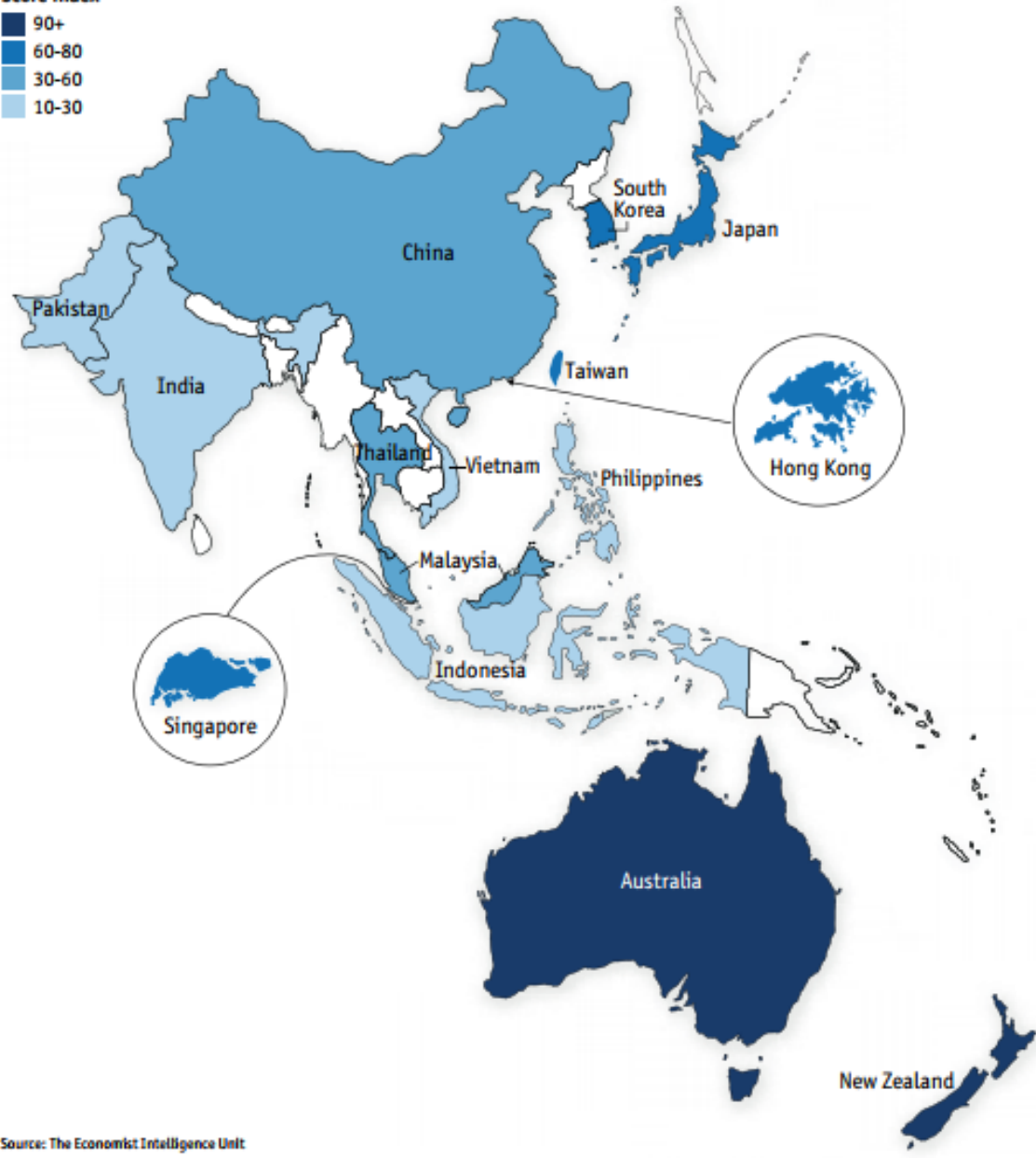
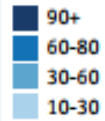
Environment (5 indicators)	
Benefits and financial control	Presence or absence of social welfare benefits, and control over personal finances, by those with mental illness.
Deinstitutionalisation	Presence or absence of a deinstitutionalisation policy, and degree of financial support for community-based, deinstitutionalised care.
Home care	Whether the number of people with mental illness who receive long-term support in the community is greater or smaller than the number in long-stay hospitals or institutions.
Parental rights and custody	Presence or absence of policies which protect the child-custody rights of parents with mental illness insofar as possible
Family and carer support	Presence or absence of funded schemes to assist carers, guarantees of legal rights of carers, and/or the presence or absence of family support organisations
Access (5 indicators)	
Assertive outreach	Presence or absence of community-based outreach services and other specialist community mental health services
Mental health workforce	A composite score reflecting the number of psychiatrists, psychologists, mental health nurses and social workers per 100,000 population
Advocacy within the healthcare system	Whether the country provides funding for advocacy schemes for mental health service users
Access to therapy and medication	A composite score reflecting the degree of access of people with mental illness to various therapies, mood stabilisers and/or antipsychotic medication
Support in prison	Prevalence of mental health support measures for incarcerated people who have a mental illness, including post-release

WHAT DOES IT MEASURE?

Opportunities (3 indicators)	
Back-to-work schemes	Presence or absence of back-to-work schemes for people with mental illness; legal duty for employers to make reasonable adjustments to accommodate such employees; funding for practical support when returning to work; availability of “fitness for work” statements from physicians, for example.
Work-placement schemes	Presence or absence of mechanisms to help people with mental illness find work; funded schemes to provide individual work placements; training and vocational support programmes; and funding for individual “job coaches”.
Work-related stress	Whether countries have occupational health policies and safety regulations that include preventing work-related stress
Governance (5 indicators)	
Involuntary treatment	Presence or absence of appropriate criteria which must be fulfilled in order to confine or treat a person with mental illness against his/her will
Human rights protection	Whether a country has signed/ ratified human rights treaties, and whether it has review bodies to assess human rights protection of users of mental health services
Cross-cutting policies	Presence or absence of formal collaboration among government agencies (education, employment, housing) to address the needs of people with mental illness
Changing attitudes	Prevalence of mental health promotion programmes in the workplace and in schools
Assessment from patient perspective	Degree to which patients’ opinions and feedback are taken into consideration in measuring the quality of mental healthcare

Overall score

Score index



OVERALL SCORE

Rank	Country	Score
1	New Zealand	94.7
2	Australia	92.2
3	Taiwan	80.1
4	Singapore	76.4
5	South Korea	75.9
6	Japan	67.4
7	Hong Kong	65.8
8	Malaysia	54.1
9	China	45.5
10	Thailand	44.6
11	India	29.4
12	Philippines	25.5
13	Vietnam	20.6
14	Indonesia	16.7
15	Pakistan	12.8

TOP-LEVEL FINDINGS

7

- **Need to improve access to mental health services:** Less than half of those affected receive any medical treatment. The rural-urban divide also affects access to mental health services.
- **Mental illness has economic consequences:** Wide variance in how well Index countries support those living with mental illness, and trends in the findings point to an important link between success in this area and national wealth.
- **Gaps in epidemiological data:** Frequent lack of available data on mental illness prevalence, both in developed and developing countries.
- **Stigma underscores need for more action:** Stigma, especially for severe conditions such as schizophrenia, is pervasive across region.

COMPARING APAC AND EUROPE

8

- **Wealthier countries do better:** Leading countries in Europe index are Germany, UK and Scandinavian countries. They have long histories of overcoming barriers to community-based care
- **Europe and Asia have a long way to go:** Majority of European countries have more people in long-stay psychiatric hospitals than under community-based care. Every single country in both indices need better ways to integrate medical treatment and coordinate care with employment, housing and social services.
- **Key difference is cultural:** In the West, drive towards community-based care focused on dignity and wishes of individual patient. Some evidence of this in Asia (eg Taiwan) but not as widespread.

WHAT CAN WE CONCLUDE FROM THE RESEARCH?

9

- **Vision must have a concrete form:** Countries need mental health law (eg, missing in Vietnam and Philippines) and comprehensive mental health policy (eg, missing in HK)
- **Dedicated financial resources underline commitment:** Money matters, but more importantly for funds to be well-applied. Funding needs to follow goals, with less to hospitals and more to care in the community
- **Tap onto non-governmental resources:** Key to NZ's index performance are NGOs.
- **Understand nature of challenge:** To fill gaps, we need better data.
- **Encourage cultural acceptance:** Culturally appropriate anti-stigma efforts needed in tandem with community-based infrastructure.