

SCHIZOPHRENIA IRELAND/LUCIA FOUNDATION
MEP Meetings Addressing the Issue of Poverty (November 2004)
Eliminating Poverty: What the European Parliament Can Do
Poverty and Mental Illness in Ireland

Schizophrenia is a serious mental illness characterised by disturbances in a person's thoughts, perceptions, emotions and behaviour. It affects approximately one in every hundred people worldwide, and there are an estimated 39,000 people with schizophrenia in Ireland alone.

For people with self-experience of a severe mental illness, poverty greatly adds to their distress. In light of this, policies at both the domestic and EU levels can greatly impact people's experiences.

Critically, the World Health Organization (WHO) has cited that it will address the issues of poverty and mental illness at the European regional level in 2005. At a WHO Regional Committee for Europe meeting, the following was highlighted:

Poverty and mental ill health form a vicious circle: poverty is both a major cause of poor mental health and a potential consequence of it. Widening disparities in society or economic changes in individuals' life courses seem to be of particular importance here. Whether defined by income, socioeconomic status, living conditions or educational level, poverty is an important determinant of mental disability and is associated with lower life expectancy and increased prevalence of alcohol and drug abuse, depression, suicide, antisocial behaviour and violence. As a cause of poverty, loss of status and mental distress, unemployment is a major issue in all European Member States. Raising awareness about the impact of political decisions and policy changes on the mental health of a population, especially with regard to unemployment and poverty and its association with depression, suicides and substance abuse, is one of the priorities for WHO's Mental Health programme in Europe.¹

Poverty affects the lives of people who experience severe mental illness in a variety of ways, including:

- Becoming severely depressed, anxious, frustrated or suicidal
- Not being able to afford appropriate accommodation or living in poor accommodation
- Lacking self esteem
- Having a poor diet and lacking exercise
- Struggling to make it through each day
- Not being able to afford a social life or holidays
- Not being able to engage in creative opportunities due to financial constraints
- Not being able to progress towards paid work because they cannot afford suitable clothing, child care, etc
- Not being able to provide for themselves for the future because they cannot afford to save money
- Not being able to afford insurance
- Relying on others, including their families, to subsidise them
- Being stigmatised because of their mental illness and/or poverty problems
- Being socially isolated
- Lacking motivation.²

Within the Irish context, the following areas are of particular concern:

Mental Health Needs to be Recognised as a Priority issue

In Ireland, mental healthcare as a proportion of the overall healthcare budget has dropped from 10.6% in 1990, to just 6.8% in 2003.³

Equity

It continues to be the case that Ireland's mental health services are inequitably distributed, with huge variations in per capita expenditure between regions, and lesser expenditure in areas of greater need. Schizophrenia Ireland recommends adjusting budgets to reflect an equitable level of expenditure per capita across all regions, with a positive loading in favour of regions, which are considered to be socio-economically deprived. A more equitable distribution of resources must be achieved without reduction in service provision in any region.

¹ Source: WHO Regional Committee for Europe, Fifty-third session, Vienna, 8–11 September 2003 (<http://www.euro.who.int/document/rc53/edoc07.pdf>).

² Abstracted from Rethink, Rethink Policy Statement 57, "Poverty and Severe Mental Illness", 2003.

³ Mental Health Commission Annual Report, (2002), p. 22.

Employment

While no accurate data exists for Ireland, figures in England would suggest that upwards of 76% of people with enduring schizophrenia are unemployed.⁴

Research

Better information about the prevalence of illness, assessment of needs for treatment and rehabilitation, and processes and outcomes of treatment/rehabilitation are essential. Without urgent action to address information gaps on the relationship between poverty and mental illness, the development of responses will continue to be piecemeal, inconsistent and inadequate to need.

Housing

Housing is a major cause of stress amongst people with self-experience of mental illness. Many people with severe mental illness find themselves having to remain in the family home beyond a time that is of their choosing. Through SI's contact with service users and relatives, housing is often cited as their most serious concern. Increased provisions for accommodation is paramount along with greater flexibility to meet the current needs. It is paramount that there is a coordinated response from a variety of statutory and voluntary agencies to ensure that a good supply of appropriate housing is available.

Homelessness

It has been well documented that a significant percentage of the homeless in Ireland have severe mental illness. Current reports suggest that up to 30% of the homeless population have some form of mental illness.⁵ In the Inspector of Mental Hospitals 2002 report, Dr. Walsh noted, "[o]ne of the most central difficulties facing the mentally ill, and those tasked with providing for them, is the fact that many are or become homeless."

Income Supports

Given the high level of unemployment amongst people with enduring mental illness, the provision of adequate and appropriate income supports is particularly important. A diagnosis of mental illness should not be a prescription for poverty.

Against this backdrop, Schizophrenia Ireland (SI) considers that examining the relationship between mental illness, poverty and public policy as fundamental in addressing the needs of people with severe mental illness. Specifically, at the EU level, Schizophrenia Ireland recommends the following actions:

- Mental Health needs to be prioritised on the EU working agenda.
- Research at the European level on the relationship between poverty and mental health must be promoted.
- A re-assessing of the appropriate interfaces between health authorities and social services, and determining whether changes are needed, both at the EU research and national levels, needs to take place.
- A European wide mental health promotion programme, including non-governmental agency⁶ project funding, needs to be established.
- Stigma is perhaps the single biggest issue for people with mental illness, and evidence shows it is a significant hindrance to recovery. Stronger efforts to promote mental health and to combat the stigma of mental illness are one way that the EU could have a positive impact on the greater European society in this regard. SI urges the MEPs to lobby for the establishment of a EU "Year of Mental Health".

About Schizophrenia Ireland/Lucia Foundation (SI)

Schizophrenia Ireland is the national organisation dedicated to upholding the rights and addressing the needs of all those affected by schizophrenia and related illnesses, through the promotion and provision of high-quality services and working to ensure the continual enhancement of the quality of life of the people it serves. Schizophrenia Ireland has offices in: Dublin, Ennis, Navan, Cork, Galway, Kilkenny and Longford. Head office contact details for further information: Tel: 01 860 1620, www.siri.ie

⁴ Office of the Deputy Prime Minister, U.K. *Mental Health and Social exclusion: Social Exclusion Unit Report*, p.51.

⁵ Fernandez, J, "The Homeless Mentally Ill: Aspects of Violence", *The Care of the Disturbed Mentally Ill*, Dublin 1996.

⁶ EUFAMI and PROSPECT are excellent examples of how voluntary organizations across Europe have collaborated to support recovery from mental illness and promote inclusion in the community for people with self-experience of mental illness, their family and their carers, for further details please see: <http://www.eufami.org/en/index.html>.