

Health in austerity: hard decisions for hard times



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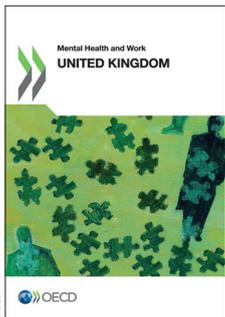
Investment in health and wealth act synergistically to the benefit of both. This point is acknowledged by the Greek Government as President of the Council of the European Union, yet seems overlooked in domestic policy, where 6 years of economic contraction compounded by poorly targeted budget cuts have reversed health gains. In today's *Lancet*, Alexander Kentikelenis and colleagues explain how short-sighted measures intended to improve the country's economy have been counterproductive for the health of the Hellenic people.

Without doubt, inefficient health practices in Greece need reform. But in the blunt approach to reduce spending that has characterised advice to the Greek Government, cuts appear to have been made where they have resulted in the greatest harm instead of the greatest good. Rather than tackle underlying cultures of overinvestigation and inappropriate prescribing that might face opposition from vested interests, softer targets such as public health, mental health, and drug misuse programmes were slashed. The sadly inevitable consequences of

increased prevalence in HIV and other infectious diseases, plus a rise in suicide among working-aged citizens, have followed. Wider effects, including deterioration in maternal and child health outcomes, are reported by a chorus of letters also in this issue. Meanwhile, increased expenses associated with care and medication have been transferred from the government to consumers, while access to services and products has decreased.

The warning for other countries and health systems is that although health can be placed in jeopardy during times of financial hardship, loss of health gains is not inevitable. Experience elsewhere in Europe shows that those countries which prioritise social protection (including health) in the midst of austerity, and favour fiscal stimulation, secure better outcomes for their populations. Anticipating areas of increased need, such as mental health, and maintaining—rather than dismantling—public health resilience is key to preventing the downward spiral of a financial recession becoming a health recession. ■ [The Lancet](#)

Mental health in the UK: a work in progress



OECD

On Feb 10, the Organisation for Economic Co-operation and Development (OECD) released a report, *Mental Health and Work: United Kingdom*, which examines the policy challenges in mental health and employment in the UK. As well as its huge personal toll for people and their families, mental illness costs the UK economy an estimated £70 billion annually due to lost productivity at work, welfare costs, and health-care expenditure.

In 2012, more than 2.5 million people were claiming disability benefit in the UK, with up to 370 000 Britons moving on to benefits every year. The leading cause for such benefit claims is mental illness, which accounts for about 40% of all new claims. The good news is that the UK is recognising the importance of mental health awareness and reduction of stigma, and has begun to integrate access to treatments with employment services. However, in view of the country's weak economic recovery and tight fiscal constraints, future funding for promising initiatives might prove uncertain. Furthermore, the UK's welfare system has gone through comprehensive reforms, and the consequences for

people with mental health problems remain to be seen.

The OECD makes several recommendations, such as assuring early intervention to avoid the progression from sickness to disability benefit; paying attention to mental health and its effect on employability and work capacity in welfare systems; promoting better employment outcomes and active labour market programmes for people with mental health problems; and expanding access to treatment for people with mental illness, boosting GPs' knowledge about treatment options for common mental disorders.

Strengthening the link between mental health and employment is reflected in specific indicators in the National Health Service's Outcomes Framework for 2012–13. In the future, the UK Government should prioritise funding for development of better mental health services as an integral part of its plan for a sustainable and healthy economic recovery. But employers, too, must play their part, by ensuring that their organisations have clear and strong policies against discrimination, and working practices that promote good mental health ■ [The Lancet](#)

For the OECD report on *Mental Health and Work: United Kingdom* see <http://www.oecd.org/els/emp/mentalhealthandwork-unitedkingdom.htm>