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Delegations will find in Annex revised draft Council conclusions on Mental Health, as prepared by the Presidency and to be examined in the Working Party on Public Health on 23 October 2023.

Changes compared to the first draft are done in bold/underline and strikethrough. Additional changes compared to document 13041/23 are also highlighted in grey.

Draft Council conclusions on mental health

Introduction

Before the COVID-19 pandemic, mental health ~~conditions~~ **problems** already affected roughly 84 million people in the EU, i.e. ~~to~~ one in every six citizens, at a cost of EUR 600 billion or 4% of GDP¹.

According to the World Health Organisation (WHO), in the first year of the COVID-19 pandemic, the global prevalence of anxiety and depression **symptoms** increased by 25%. The pandemic particularly affected the mental health of **children and young people, as well as older people**. Furthermore, women have been more severely impacted than men and people with non-communicable diseases have been more likely to develop symptoms of **ill-mental disorders** **health disorders**.

Other **facts challenges** such as Russia's war **of aggression** against Ukraine, the climate crisis, **increasing** unemployment rates and rising living cost, as well as the pressures of the digital **sphere area** and social media, have only exacerbated **those** already poor levels of mental health, especially for children and young people **as well as people with ill-mental health or mental health disorders problems**.

Improving mental health is **an individual**, a social and economic imperative. Under Article 35 of the Charter of Fundamental Rights of the European Union (CFR)², everyone has the right of access to preventive health care and the right to benefit from medical treatment under the conditions established by national laws and practices. A high level of human health protection shall be ensured in the definition and implementation of all Union policies and activities.

¹ OECD/European Union (2018), Health at a Glance: Europe 2018: State of Health in the EU Cycle, OECD Publishing, Paris/European Union, Brussels, https://doi.org/10.1787/health_glance_eur-2018-en

² Charter of Fundamental Rights of the European Union (2000/C 364/01), Official Journal of the European Communities.: https://www.europarl.europa.eu/charter/pdf/text_en.pdf

~~In~~ On June 2023 the Commission adopted the "Communication on a Comprehensive Approach To Mental Health" to ~~help~~ **support** Member States and stakeholders address challenges in the area of mental health in the EU. The communication points out three guiding principles that should apply to every citizen: i) access to adequate and effective prevention, ii) access to high quality and affordable mental healthcare and treatment and iii) reintegration in society after recovery³.

The Communication **from the Commission** and ~~the individual and coordinated actions~~ **that are being** developed by Member States ~~during the last years~~ provide a basis for a new approach to mental health that is comprehensive, **promoting promotes well-being and is** prevention-based, **as well as** ~~and~~ multi-stakeholder oriented.

THE COUNCIL OF THE EUROPEAN UNION,

- ~~1. ACKNOWLEDGING that good mental health is a critical part of individual well-being, and the foundation for happy, fulfilled and productive lives¹.~~
- ~~2.1.~~ **1.** ACKNOWLEDGING the WHO Constitution, which states that health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity and that the enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being.
- 2. ACKNOWLEDGING that mental health is a state of mental well-being that enables people, to cope with the stresses of life, realize their abilities, learn well and work well, and contribute to their community¹.**
3. CONSIDERING that every person, without discrimination, should have access to quality essential health care services, as part of universal health coverage, and as acknowledged by the United Nations (UN)-2030 agenda in Goal 3, of the Sustainable Development Goals³.
4. CONSIDERING that every ~~child and young~~ person, **including children and young people,** should be able to **have the opportunity to live and/or** grow up ~~and develop~~ in conditions and settings that **promote and** ~~are positive and supportive~~ to their mental health.

³ COM(2023) 298. Communication from the Commission on a comprehensive approach to mental health.

⁴ UN Sustainable Development Goals. Goal 3: Ensure healthy lives and promote well-being for all at all ages: <https://www.un.org/sustainabledevelopment/health/>

5. ACKNOWLEDGING the vital role of families in fostering mental well-being of children.

5.6. WELCOMING the Commission Communication on a *Comprehensive Approach To Mental Health*, adopted on 7 June 2023, as well as its funding opportunities **of over EUR 1.2 billion** and ~~its~~ 20 flagship initiatives that aim to support Member States and stakeholders in substantially improving the mental health of citizens.

6.7. RECOGNISING the relevance of improving the quality of life of ~~patients~~ **people with mental health conditions problems**, their families and (in)formal caregivers, with a particular focus on addressing stigma and discrimination as stated in the Commission Communication on a *Comprehensive Approach To Mental Health*.

7.8. TAKING NOTE of the European Parliament resolution of 5 July 2022 on mental health in the digital world of work⁵.

8.9. TAKING NOTE OF the Council Conclusions on Mental Health and Precarious work, which tackle the interlinkages between mental health and work.

8.9.10. RECOGNISING the significant and ~~unprecedented~~ worsening of the population's mental health, due to the COVID-19 pandemic ~~as described in the OECD report “Tackling the mental health impact of the COVID-19 crisis: An integrated, whole-of-society response”~~. This report indicates that from March 2020 onwards, the prevalence of anxiety and depression increased and the mental health of unemployed people and those experiencing financial insecurity was worse than that of the general population⁶.

9.10.11. ACKNOWLEDGING that loneliness can **harshly** affect mental health. In the EU, loneliness increased between 22% and 26% across regions, as a result of the pandemic⁷.

⁵ European Parliament resolution of 5 July 2022 on mental health in the digital world of work (OJ C 47, 7.2.2023, p. 63).

⁶ OECD (2021), "Tackling the mental health impact of the COVID-19 crisis: An integrated, whole-of-society response", OECD Policy Responses to Coronavirus (COVID-19), OECD Publishing, Paris, <https://doi.org/10.1787/0ccafa0b-en>

⁷ Baarck, J., Balahur, A., Cassio, L., d'Hombres, B., Pásztor, Z., Tintori, G., Loneliness in the EU – Insights from surveys and online media data, EUR 30765 EN, Publications Office of the European Union, Luxembourg, 2021, ISBN 978-92-76-40246-6, doi:10.2760/28343, JRC125873

- 10.~~11.12.~~ TAKING NOTE OF the *Final Report on the Conference on the Future of Europe: Key proposals and relevant positions* **Report on the final outcome**⁸, **that** called for improving the understanding of mental health ~~issues~~ **problems** and ways of addressing them, including the development of an EU Action Plan on mental health that would provide a long term Mental Health Strategy **in the EU**, including aspects such as research, tackling the issue of the availability of professionals, specific populations such as ~~minors~~ **children and young people** and the setting up in the near future of a dedicated European ~~y~~Year of ~~m~~Mental ~~h~~Health.
- 11.~~12.13.~~ TAKING NOTE OF the *OECD Recommendation of the Council on Integrated Mental Health, Skills and Work Policy*, advising for policy principles in health systems, education and youth systems, workplaces, and welfare systems, as the core of a mental-health-in-all-policies approach that contributes to breaking siloes in mental health policy⁹.
- 12.~~13.14.~~ TAKING NOTE OF the report “*Health at a Glance Europe 2022*” that concludes that one in two young Europeans aged 18-29, report unmet needs for mental health care, that ~~cases~~ **of symptoms** of **anxiety and** depression ~~in~~ **amongst** young people ~~in the EU~~ **increased** more than doubled **in several European countries** during the pandemic and that there is an alarming increase in reported rates of suicidal ideation (suicidal thoughts)¹⁰.
- 13.~~14.15.~~ RECOGNISING the effects of the ongoing **crisis and** health emergency, **including the war of aggression** in Ukraine and refugee receiving ~~and~~ host countries, resulting in mental health and psychosocial health deterioration¹¹ and the need for humanitarian response and assistance in psychosocial support **including referral to services for survivors of sexual and other forms of gender-based abuse-violence**.

⁸ Conference on the Future of Europe. Report on the Final Outcome. May 2022. Available on: <https://wayback.archive-it.org/12090/20230418091815/https://futureu.europa.eu/8933/22> https://commission.europa.eu/strategy-and-policy/priorities-2019-2024/new-push-european-democracy/conference-future-europe_en

⁹ OECD Recommendation of the Council on Integrated Mental Health, Skills and Work Policy, OECD/LEGAL/0420 (2022)

¹⁰ OECD/European Union (2022), *Health at a Glance: Europe 2022: State of Health in the EU Cycle*, OECD Publishing, Paris, <https://doi.org/10.1787/507433b0-en>

¹¹ World Health Assembly, 75. (2022). *Seventy-fifth World Health Assembly: Geneva, 22-28 May 2022: resolutions and decisions, annexes*. World Health Organization. <https://apps.who.int/iris/handle/10665/365610>. Resolution WHA 75.11.

~~14.15.16.~~ RECOGNISING the need for an effective transfer of the provision of mental health services from hospital-centred services to comprehensive, integrated mental health and social care services in community-based settings¹².

~~16.17.~~ **RECOGNISING that social, economic and environmental determinants such as natural disasters have a negative impact on mental health and increase the need for psychosocial support.**

~~17.18.~~ RECALLING the Council Conclusions of 2019 on the Economy of Wellbeing, which include an invitation to ~~that invite~~ the Commission to propose a Mental Health Strategy for the Union¹³.

~~18.19.~~ **RECOGNISING that there is an estimated shortage of health workers in the EU and that some Member States are facing shortages of mental health professionals whereas investing in health requires investing in health workforce. It is therefore essential that WELCOMING the blueprint (toolkit) for a multi-disciplinary approach to mental health capacity building, which the Commission plans to launch in 2024, and would reflect on this issue.**

~~15.19.20.~~ WELCOMING the progress made by the UN in the Convention on the Rights of Persons With Disabilities (CRPD) emphasising that discrimination against people based on physical or mental disabilities is a violation of their basic human rights, and also the progress made by the WHO, **for example by the initiative in its “QualityRights” which proposes tools to assess the respect of rights in mental health services and training tools, for example the e-training on Mental Health, Recovery and Community Inclusion, which for aims to** combating stigma.

~~16.20.21.~~ TAKING NOTES OF ~~that~~ the Comprehensive Mental Health Action Plan 2023-2030 from WHO and its objective number 2 **that** establishes the need to provide comprehensive, integrated and responsive mental health and social care services in community-based settings¹².

¹² Comprehensive mental health action plan 2013–2030. Geneva: World Health Organization; 2021. Licence:CC BY-NC-SA 3.0 IGO.

¹³ Council conclusions on the economy of well-being:
<https://data.consilium.europa.eu/doc/document/ST-13432-2019-INIT/en/pdf>

~~17.~~**21.22.** TAKING NOTE OF the WHO European framework for action on mental health 2021–2025 which shows that an estimated 119 000 lives were lost across the **European** Region in 2019 due to suicide, being the second leading cause of death among young people (15-29 years old) ~~after road accident~~¹⁴.

[~~18.~~**22.23.** RECOGNISING that mental health problems are associated with many forms of inequalities, **such as, for example,** that primarily affect people in vulnerable situations, **minorities, marginalised groups and those in disadvantaged socioeconomic situations including** such as those living in long-term care services, those experiencing loneliness and social isolation, ~~vulnerable groups such as children and young people,~~ **older people,** women, **LGBTQI people** ~~+ persons, the elderly,~~ cancer patients, persons with disabilities, refugees, migrants, prisoners **and,** the homeless **people,** and those in disadvantaged socioeconomic situations. **Also recognising that the gender equality perspective is vital in addressing inequalities in the area of mental health.**]

~~19.~~**23.24.** RECOGNISING that mental health ~~conditions~~ **problems** are related to health determinants (such as **access to healthcare,** biological and psychological factors, nutrition and ~~lack of~~ physical activity, ~~harmful~~ consumption of alcohol, tobacco and **illicit** drugs), as well as to environmental, **urban planning,** climatic, social, **cultural, economic** and commercial determinants.

25. RECOGNISING that strengthening protective factors, such as regular sports and exercise and participation in cultural activities, can boost the overall mental health and well-being of people and reduce the risk of mental health conditions;¹⁵

~~20. RECOGNISING Member States' concern and actions to raise awareness in the area of mental health through the exchange of views in the different Ministerial Conferences organised by the Presidencies of the Council of the European Union.~~

~~21.~~**24.26.** RECOGNISING the Exploratory Opinion from the European Economic and Social Committee from 2023 on “Measures to improve mental health” **which supports the development of person-centered mental health systems that empower individuals**¹⁶.

¹⁴ WHO European framework for action on mental health 2021–2025. Copenhagen: WHO Regional Office for Europe; 2022. Licence: CC BY-NC-SA 3.0 IGO.
<https://www.who.int/europe/publications/i/item/9789289057813>

¹⁵ CultureForHealth report. Culture's contribution to health and well-being: a report on evidence and policy recommendations for Europe. Final_C4H_FullReport_small.pdf (cultureforhealth.eu)

- 27. RECOGNISING that mental health and physical health are fundamentally linked and that people living with a serious mental health problem are at higher risk of experiencing a wide range of chronic physical conditions and have a life expectancy that is 10 to even 20 years lower as the general population.¹⁷**
- 28. STRESSING THE IMPORTANCE OF IMPLEMENTING the Convention on the Rights of People with Disabilities, especially regarding the protection of people with mental health conditions from arbitrary and degrading practices such as involuntary commitment and restrictions on the right to legal capacity.**
- 29. PROMOTING a human-rights-based evaluation of mental health services utilizing, inter alia, the WHO quality rights toolkit.**

INVITES THE MEMBER STATES TO:

- a) PRIORITISE **integrated** policies and services addressing mental health and well-being and to **CONSIDER ELABORATING** define-action plans or strategies to tackle the most urgent and prevalent matters, such as:
1. Implementing a mental health, across all-policies approach that goes beyond health and includes issues in other key sectors as relevant **stressors****factors**, such as employment, education, digitalisation **(including the effects of Artificial Intelligence)**, **social protection**, research, urban planning, culture, **media and communication**, environment and climate;
 2. Recognising the social, environmental and economic determinants of mental health;

¹⁶ SOC/760-EESC-2023

¹⁷ WHO Guidelines for the management of physical health conditions in adults with severe mental disorders. Geneva: World Health Organization; 2018. Licence: CC BY-NC-SA 3.0 IGO. <https://iris.who.int/bitstream/handle/10665/275718/9789241550383-eng.pdf>

- 3. Improving education on mental health literacy from early ages and also for parents, in particular by using the European Code on Mental Health¹⁸ to be developed as of 2024 onwards;**
- 4. Promoting mental health and well-being in different contexts in the life course with a focus on strengthening protective factors for good mental health and mental health resilience such as participating in sports and culture;**
- 5. Preventing mental problems (including prevention of suicide, self-harm and depression prevention) in different contexts such as schools, workplaces, healthcare, neighborhoods, communities, including a mix of universal, selective and indicated preventive interventions and policy measures;**
- 3.4.6. Improving mental health systems and services to be responsive to the needs expressed of by people experiencing mental health conditions problems, towards a quality universal health care coverage;**
- 4.5.7. Improving timely and equitable access to and coordination of effective and safe mental health care, promoting early diagnosis and integrated care through community-based and recovery-oriented mental health services;**
- ~~5. Promoting mental health and the prevention of mental health conditions, focusing on vulnerable groups, as mentioned above;~~
- ~~6. Protecting people with mental health conditions by improving their social inclusion and by breaking through stigma and discrimination;~~
- 8. Promoting evidence-based practice in mental health care and services and guideline-based treatment including avoiding the use of polypharmacy;**
- 7.9. Promoting prevention, early detection and care of individuals with suicidal behaviour and its consequences;**

¹⁸ [HaDEA call](#) for stakeholders to establish a Code for mental health: [Funding & tenders \(europa.eu\)](#)

- ~~8-10.~~ Developing actions to tackle loneliness in ~~vulnerable~~ **the general** populations, **focusing on groups at risk for loneliness** especially in ~~for~~ people with mental health conditions;
9. Promoting mental health, prevention and managing psychosocial risks and strengthening mental resources in the workplace;
- 11. Ensuring the effective application of existing EU and national legislation to guarantee safety and health at work and promoting mental health, prevention and managing psychosocial risks and strengthening mental health resources in the workplace;**
- 12. Promoting actions to maintain or strengthen the mental health of health professionals.**
- ~~10-13.~~ Promoting mental health, early detection and screening in educational settings to support, manage and promote the mental health of children and young people;
- 14. Promoting access to specialised mental health services for school going children;**
- ~~11-12,15.~~ Supporting the development and establishment of an interdisciplinary mental health work force, integrating all key disciplines to provide a holistic approach to **promotion**, prevention, treatment and care;
- ~~12.~~ Collaborating on mental health policies and initiatives related to people in vulnerable situations;
- ~~13-16.~~ Regularly collecting recent and comparable data and information to monitor progress and to guide investments in areas where progress is needed **through international coordination**;
- 14.17. Strengthening actions to reintegrate people into society, in the workforce and decision-making processes for mental health policies and to prevent any relapses after deinstitutionalisation or reintegration**
- ~~14.~~ Using EU funding opportunities and collaborating in the identification, collection and transfer of best practices in mental health;

15. Implementing best practices for de-institutionalisation and reinforcing mental health community services.

18. Considering a team in each Member State to follow up mental health policies.

INVITES THE COMMISSION TO:

- a) SUPPORT ~~the coordination of~~ Member States' policies on mental health by continuing to provide support to the Member States in the implementation of the Communication on a comprehensive approach to mental health and its 20 flagship initiatives;
- b) **PRESENT INFORM and ENGAGE with Member States via the Expert Group on Public Health and in particular its subgroup on Mental Health on the an Implementation Roadmap for the flagship initiatives presented in Commission Communication on a Comprehensive Approach To Mental Health and its flagship initiatives against the internationally agreed indicators from the Sustainable Development Goals and the WHO targets.** the Commission Communication on mental health, which would also include progress indicators following the implementation of these flagship initiatives PROMOTE an Action Plan on Mental Health for the European Union;
- c) STRENGTHEN mental health ~~through an all across~~ policies ~~approach~~, both via ~~by~~ ~~creating~~ ~~ensuring~~ synergies within the Commission as well as ~~by~~ coordinating with international organisations and relevant stakeholders ~~and the existing actions, plans, text and tools;~~ **on actions, tools and funding related to mental health.**
- ~~d) — MONITOR and ANALYSE the effectiveness and results of the implementation of flagship initiatives as defined by the Roadmap in the Communication of the Commission;~~
- d) ENCOURAGE the understanding of mental health issues, CREATE awareness and PROMOTE the exchange of best practices as set out in the Commission Communication on a **Comprehensive Approach To Mental Health;**

- e) SUPPORT Member States and coordinate actions through **the fit for purpose and impactful EU4-health Programme, as well as and other** initiatives, including the EU4Health Programme, the Joint Actions and **such as** the Expert Group on Public Health, including its sub-group on mental health;
- f) PAY PARTICULAR ATTENTION to vulnerable and socioeconomically disadvantaged groups, as mentioned above;
- g) BETTER PROMOTE and MAKE VISIBLE the different EU funding possibilities for specific actions in the area of mental health, **with due consideration for matching these possibilities with Member States' needs and demands;**
- i) PROMOTE initiatives to support mental health and communication campaigns in the EU through the European Year of Mental Health in 2025;**
- ii) INTRODUCE Implement the multidisciplinary training and exchange programmes for health and social care professionals and other professionals encountering people in different situations (for example professionals working at schools, day-care, trainers, security business) in order to support and promote their mental health skills and the quality of care, as well as to strengthen their mental health resilience.**

INVITES THE MEMBER STATES AND THE COMMISSION TO:

- a) **PRIORITISE CONTINUE** addressing **moving towards a comprehensive approach to** mental health in 2024 and beyond;
- b) **ENCOURAGE** the design and implementation of an EU Action Plan on mental health **ENSURE a joint cooperation between Member States, the Commission and stakeholders in, which includes developing** recommendations related to **for** the prevention of mental health issues, **the empowerment of mental health** and the promotion of well-being **for all population groups across the entire age spectrum and the enhancement of mental health resilience. Additionally, the plan actions should focus on,** as well as to improve the accessibility and quality of care for persons with mental health **conditions problems with the ultimate goal of meeting the needs of the population;**

- e) **PROMOTE** a comprehensive approach to mental health and cross-sectorial collaboration in order to enhance broad, long-term policy perspectives and provide balanced policy recommendations;
- d) **FOCUS ON** reducing inequalities in mental health ~~status~~ that exist between and within Member States as well as between socioeconomic groups, in particular those in disadvantaged situations, **and promote equality and antidiscrimination as a tool for prevention, with special attention to those in vulnerable and marginalised situations;**
- e) **ENCOURAGE** cooperation between Member States and the Commission through the exchange of experiences and best practices in the area of mental health **in particular under the Expert Group on Public Health;**
- f) ~~PROVIDE an overarching structure~~ **CONTINUE cooperation** for ~~in~~ exchanging experience and integrating mental health ~~into all~~ **across** policies **via existing structures that engage by engaging** key **stakeholders** sectors of society, including the public, non-governmental/civil society, and private sectors;
- g) **FIGHT AGAINST** mental health stigma ~~and by create~~ **developing EU guidance on breaking stigma and discrimination including** awareness on mental health ~~conditions~~ **problems in all areas of society;**
- h) **INCREASE common efforts to combat discrimination, hate speech, any form of violence, in particular gender based violence and suicides;**
- i) **RECOGNISE and PROMOTE the active participation of people with lived experience (service users, family carers, etc.)** ~~and~~ **INTEGRATE this existing and new knowledge into multidisciplinary training, service organisation mental health reforms, research and policy development;**
- ~~ki)~~ **PROMOTE FACILITATE the exercise of rights as a lever for change in the organisation of mental health care organisations.**