



## **Towards a European Mental Health Strategy**

### **S&D Group's Position Paper**

**May 2022**

#### **Introduction**

Mental and behavioural disorders are posing an increasing burden on today's society and can affect all of us. According to the World Health Organisation (WHO), almost a billion individuals worldwide are suffering from a mental health disorder. This is indeed an increasing concern in the EU, as in 2018 the European Commission reported 84 million people with mental health disorders in the European region, and this issue has only continued growing, with certain studies suggesting even higher incidence<sup>1</sup>.

Unquestionably, good mental health is an essential part of a person's wellbeing and has an important impact on physical health and quality of health (and vice versa), where certain studies present that mental disorders rank among the most substantial causes of death worldwide<sup>2</sup>. It is a fundamental component for living a productive, stable and healthy life at home, at work, in school, as well as in social life.

However, good mental health should not only be addressed in hospitals and in a therapeutic setting, rather it should be addressed early on in the everyday life of every citizen. Thus, it is imperative that the EU recognise mental health as a great concern for the well-being of its citizens and a cross-sectoral topic in Europe for individuals to live a fulfilled personal/professional life and be an active participating citizen in the Union both socially and economically.

The overall mental health and wellbeing of people has the utmost importance for the S&D Group. The aim of this position paper is to bring this issue into a broader and holistic discussion with the

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<sup>1</sup> 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](https://doi.org/10.1787/health_glance_eur-2018-en).

<sup>2</sup> Reisinger Walker E, McGee RE, Druss BG: Mortality in mental disorders and global disease burden implications: a systematic review and meta-analysis. JAMA Psychiatry, 2015; 4: 334-341.

objective of addressing and mitigating mental health issues and the related socio-economic burden throughout the EU. In this regard, we as the S&D Group call for a comprehensive and ambitious mental health strategy at an EU level, which would be in line with previous specific EU efforts in the area of mental health.

### **Systemic causes of mental health**

Understanding mental illness is a complex issue as mental health and mental health disorders are shaped beyond inherent biological factors, largely by socio-economic, social, environmental and lifestyle factors. It is a complex cross-sectoral issue relating to the economy, employment policy and public health, having an impact on inclusion, growth, productivity, well-being, quality and sustainability of both our society and economy. It could further be seen as a vicious circle, where social and environmental inequalities impact on health inequalities and in turn cause wider disparities between social groups. Consequently, it is essential to address structural determinants of poor mental health and mental disorders to improve the quality of life and mitigate the mental health disease burden. In that regard, one needs to analyse several issues such as living conditions, working conditions and education, as well as inequalities (including socio economic and territorial inequalities) and discrimination on the basis of gender, ethnicity, income and age. Common mental disorders (such as depression and anxiety) are often linked to poverty and poor housing. Moreover, this further relates to social security and scarceness of employment. At the same time, it is essential to take into account the impact of the EU and national policies in other areas on mental health. A cross-sectoral approach that aims to address health priorities holistically and comprehensively, will have greater chances to address established objectives and goals.

These socio-economic factors affect the majority of the population; however, women in particular are at greater risk of poor mental health than men. Women are about twice as likely to suffer from psychosomatic illnesses and mood disorders compared to men. Contributing factors includes gender inequalities, discrimination, and lack of a gender-sensitive approach in different healthcare systems<sup>3</sup>. In addition, a significant percentage of women experience violence including domestic violence throughout their lives. The violence, be it physical, sexual or psychological, is strongly correlated as a risk factor to pathologies related to mental health. Furthermore, psychological aspects are usually considered very marginally for women's reproductive health and attention to this issue is only recently emerging, due to the high rates of depression recorded among mothers with young children, particularly in disadvantaged communities. Women's psychological problems can develop as a result of reproductive health concerns or complications. Mental health is closely connected to physical health and pathologies related to pregnancy are equally influential on a woman's mental state, but social factors also have a great impact.<sup>4</sup>

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<sup>3</sup> Kuehner C. Why is depression more common among women than among men? *Lancet Psychiatry*. 2017 Feb;4(2):146-158. doi: 10.1016/S2215-0366(16)30263-2. Epub 2016 Nov 15. PMID: 27856392

<sup>4</sup>WHO (2009), Mental health aspects of women's reproductive health : a global review of the literature, WHO publications, Geneva, Switzerland, [http://apps.who.int/iris/bitstream/handle/10665/43846/9789241563567\\_eng.pdf;jsessionid=8CFE7153130C72802728BF4528EBB418?sequence=1](http://apps.who.int/iris/bitstream/handle/10665/43846/9789241563567_eng.pdf;jsessionid=8CFE7153130C72802728BF4528EBB418?sequence=1)

Furthermore, stereotypes, as well as unrealistic and toxic beauty standards, fostered through channels such as social media, audiovisual media, advertising, dress codes and others, represent high risk factors for young women's and girls' mental health. In general, a holistic approach that makes daily life increasingly fair and equal for societies has to be taken into consideration towards better mental health.

Although, the COVID-19 pandemic exacerbated the issue on mental disorders, the issue of mental health and access to mental health care has been a concern for longer. For decades, the prevalence of mental health conditions has been broadly unchanged. Too often, individuals suffering from serious mental illnesses – those in greatest need of care – have been isolated.

Some groups are especially exposed. For women and LGBTIQ +, the pressure of socioeconomic disadvantage and income inequality increases the incidence and risk of mental health disorders. This also applies to other groups such as people with disabilities, elderly, and children and youth as well as refugees and migrants, groups associated with lack of social integration and unemployment, who suffer an increased risk of psychosocial issues. In addition, mental health is also affected by discrimination, harassment, and violent misbehaviours. Although all segments of the population can be affected, the vulnerable groups mentioned above may face additional precarious situations and hence face an increased risk of poor mental health.

Furthermore, under the current Ukraine crisis, millions of refugees and internally displaced people are facing extensive trauma and are in need of mental health care. Apart from the direct aid already provided by the EU, the issue of mental health and well-being needs also to be urgently addressed.

### **Social and economic costs**

With one out of six people suffering from a mental health disorder, the economic costs are considerable and were estimated in the Health at a Glance Europe 2018 report to be more than 4% of GDP in the EU<sup>5</sup>. Furthermore, according to the Lancet Commission Report, by 2030, mental disorders will have cost the global economy \$16 trillion between 2010 and 2030<sup>6</sup>. Although the treatments, such as visits to the hospital and medication, are some of the main economic concerns when addressing mental health disorders, the societal costs go far beyond them<sup>7</sup>. From the estimated cost of more than 4% of the GDP spent on mental disorders across the EU, 1.6% (€240 billion) are targeted towards the indirect costs for the labour market such as absenteeism and presenteeism (working without being productive). This is especially relevant for depression, a complex mood disorder, which has substantial societal burdens and represents one of the costliest health issues in the labour force<sup>8</sup>. Research shows that over half of all working days lost

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5 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](https://doi.org/10.1787/health_glance_eur-2018-en).

<sup>6</sup>V. Patel *et al.*, The Lancet Commission on global mental health and sustainable development. *Lancet*. 2018 Oct 27;392(10157):1553-1598. doi: 10.1016/S0140-6736(18)31612-X. Epub 2018 Oct 9. Erratum in: *Lancet*. 2018 Oct 27;392(10157):1518. PMID: 30314863.

<sup>7</sup>Trautmann S, Rehm J, Wittchen HU. The economic costs of mental disorders: Do our societies react appropriately to the burden of mental disorders? *EMBO Rep*. 2016 Sep;17(9):1245-9. doi: 10.15252/embr.201642951. Epub 2016 Aug 4. PMID: 27491723; PMCID: PMC5007565

<sup>8</sup>R. C. Kessler, K. R Merikangas, & P. S.Wang. The prevalence and correlates of workplace depression in the national comorbidity survey replication. *Journal of occupational and environmental medicine*, 50(4), 381–390, 2008.

in the EU are caused by work-related stress<sup>9</sup>. Chronic stress itself is a substantial factor causing and aggravating mental health disorders.

Furthermore, adults with mental health related issues such as depression are less productive at work and more likely to be unemployed<sup>10</sup>. Moreover, psychosocial risks can arise from poor work design, organisation and management, as well as poor social context of work, and can result in negative psychological, physical and social outcomes such as stress, anxiety, burnout and depression. In this regard, there is a need for stable, secure jobs as precarious working conditions have significant effects on mental health. Depression belongs to the second largest group of self-reported work-related health problems and can significantly increase the risk of triggering or exacerbating physical health. According to Eurofound and EU-OSHA, 25% of workers in Europe experience excessive work-related stress, 51% of workers say stress is common in their workplace and nearly 80% of managers are concerned about work-related stress, which shows that psychosocial risks are of concern to a majority of companies.

### **Mental health, education, and learning**

To ensure healthy development in children and young people, the importance of good mental health should already start at the grass roots – in early childcare, child protection and education. This is essential as mental health issues can be extensive and can impact academic and vocational performance, which additionally could interfere with social relationships and physical health, similarly to adults at any age. If not tackled in early years of growth, children who suffer from socio-economic inequalities, maltreatment and in turn mental challenges or issues have an increased risk of developing other health related issues in adulthood such as chronic, non-communicable diseases, like cardiovascular diseases and cancer<sup>11</sup>. Moreover, there is an increased risk to be involved in the criminal justice system in their lifetime. Thus, it is important to start learning and practicing good mental health from the start. Improved health literacy is important towards improved mental health.

However, children and young people do not spend their whole time in classrooms. It is important that any EU Mental Health Strategy targeting children and young people involves their parents and families, youth organisations and youth work, cultural institutions, and sports clubs. This multi-faceted approach would not only be more effective, but it would also be more inclusive and reach out to those more vulnerable or marginalised groups of young people who are not in education or in employment structures. Home-schooling is particularly challenging for young people from socially disadvantaged backgrounds and marginalised groups, and in some cases home-schooling is not possible at all due to a lack of digital infrastructure or cramped living conditions. At the same time it is important to note that in-situ education provides an opportunity to discover issues regarding mental health affecting children and the possibility for teachers and

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<sup>9</sup> European Trade Union Confederation (2020), EU law to tackle stress epidemic urgent after lockdown. <https://www.etuc.org/en/pressrelease/eu-law-tackle-stress-epidemic-urgent-after-lockdown>

<sup>10</sup> The Health Foundation (2021), H. Wilson, D. Finch, Unemployment and mental health. <https://www.health.org.uk/publications/long-reads/unemployment-and-mental-health>

<sup>11</sup> G.M Massetti, C.C Thomas, J. King, K. Ragan, & N Buchanan Lunsford. Mental Health Problems and Cancer Risk Factors Among Young Adults. American Journal of preventive medicine, 2017, 53(3S1), S30–S39

educators to follow up on these issues which can be difficult in a home schooling or distance learning context where children risk being isolated.

Nevertheless, special attention should be paid to the digital transition of education, including its possible health effects. The general trend towards online education and home-schooling reinforced by the impact of COVID-19 also has a significant impact on children. Online education should never replace in-situ education since in-situ education conducted by a teacher and accompanied by other students is essential for the development of valuable social skills and good mental health in children and adolescents. Special attention should also be given to young people and children from disadvantaged groups that may not even have the option of distance learning due to lack of digital infrastructure or living conditions in general.

In addition, the performing and visual arts, literature and culture in general are essential to reinforce identity, not only at the individual level but also at a social one. Without culture there is no identity and without identity there is no mental wellbeing. In 2019, for the first time, the WHO called on governments and authorities to implement policies that improve collaboration between the health and artistic sectors.<sup>12</sup>

### **Impact of the COVID-19 pandemic on mental health**

The COVID-19 pandemic has put an emphasis on the importance of mental health. With constant changes in measures and social isolation due to notably teleworking or home-schooling requirements as well as the closure of cultural venues, extracurricular activities, and sports facilities for a prolonged period of time, anxiety and depression have become growing concerns.

Factors generally associated with poor mental health like financial insecurity, unemployment, fear, isolation, and low accessibility to health services have risen drastically. This has led to a significant and unpredicted increase of mental health related issues<sup>13</sup>. In a briefing carried out by the European Parliamentary Research Service (EPRS), eight out of ten respondents in Italy indicated a need for psychological support and anxiety. Moreover, depression symptoms doubled in Belgium according to the same publication<sup>14</sup>. Many sources have named the skyrocketing battle with mental health as the “the silent pandemic”. In addition, children and young people from socially disadvantaged backgrounds and marginalised groups are disproportionately affected by the closure of public recreational facilities in the cultural and sports sector.

Mental health of young people has worsened significantly during the pandemic, with problems related to mental health doubling in several Member States compared to the pre-crisis level. According to the International Labour Organization (ILO), 64 % of young people in the age group 18–34 years were at risk of depression in the spring of 2021, partly as a consequence of their lack

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<sup>12</sup> Fancourt, Daisy and Finn, Saoirse (2019), What Is the Evidence on the Role of the Arts in Improving Health and Well-Being? A Scoping Review, Health Evidence Network synthesis report 67, Copenhagen: World Health Organisation, <https://www.euro.who.int/en/publications/abstracts/what-is-the-evidence-on-the-role-of-the-arts-in-improving-health-and-well-being-a-scoping-review-2019>

<sup>13</sup> OECD (2021), *Health at a Glance 2021: OECD Indicators*, OECD Publishing, Paris, <https://doi.org/10.1787/ae3016b9-en>. pp. 98-99

<sup>14</sup> European Parliamentary Research Service (EPRS), (2021), Mental health and the pandemic, [https://www.europarl.europa.eu/RegData/etudes/BRIE/2021/696164/EPRS\\_BRI\(2021\)696164\\_EN.pdf](https://www.europarl.europa.eu/RegData/etudes/BRIE/2021/696164/EPRS_BRI(2021)696164_EN.pdf)

of employment, financial and educational prospects in the longer run, as well as due to loneliness and social isolation. Approximately 9 million adolescents in Europe (aged 10 to 19) are living with mental health disorders, with anxiety and depression accounting for more than half of cases. The worsening of mental health status can also be attributed to disruptions of access to mental health services and increased number of tasks at work and the labour market crisis that disproportionately affected young people. Suicide is the second leading cause of death in Europe among young people according to UNICEF.

The pandemic has changed work arrangements for millions of employees across Europe and they are facing new levels of difficulties. Mainly, teleworking has resulted in blurring the traditional boundaries between work and private life. Nearly one half of all employees in Europe work at least part of their working time from home and it is expected that the uptake of remote working and teleworking will remain higher than before the COVID-19 crisis or that it will increase even further. Although the WHO recently pointed out the potential benefits of teleworking, that it may facilitate a balance between work and personal life with potential positive impacts on the environment such as reduced air pollution, there are potential serious negative mental health impacts if not organised correctly<sup>15</sup>. People who regularly work from home are more than twice as likely to work in excess of the requisite maximum 48 hours per week and are at risk of resting for less than the requisite 11 hours between working days. Teleworkers are more likely to work irregular hours and almost 30% of them report working in their free time every day or several times a week compared to below 5% of 'office'-based workers. The stress to have constant connectivity and increased care in domestic life can expose employees to several mental health related issues and cause burnout more frequently than for non-teleworkers. In this regard, it is important to consider the gender dimension; where women often take a greater responsibility at home and with teleworking and constant connectivity it might often prove unsustainable. Eurofound research indicated that people-centred companies have been better prepared for the COVID-19 crisis than less people centred employers.

The pandemic has highlighted the risks of a new digital economy, which is transforming the nature and organisation of work, and has dire consequences on the working conditions. The application of AI at work context is increasing control, surveillance and pressure, work-loads and working hours, creating work-complexity, eradicating transparency and social interaction, and deeply affecting the mental health and safety of workers. Furthermore, children have been more exposed to digital technologies than usual, which has further emphasised the potential harmful impact of the use of digital technologies on mental health and well-being related to notably exposure to harmful content and disruption of daily routines. In this regard, the socioeconomic background of children should also be considered which also relate to well-known digital divide.

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<sup>15</sup> WHO and ILO (2022) Healthy and safe telework: Technical brief, Geneva, <https://www.who.int/publications/i/item/9789240040977>

<sup>16</sup> OECD Policy Responses to Coronavirus (COVID-19) Combatting COVID-19's effect on children, <https://www.oecd.org/coronavirus/policy-responses/combating-covid-19-s-effect-on-children-2e1f3b2f/>, Accessed 05 May 2022

It is important to point out the precarious situation of women during the pandemic. According to a recent Eurobarometer, women have been substantially impacted on several dimensions including both at personal and professional level during the pandemic<sup>17</sup>. Women constitute a majority of the workforce such as nurses and care workers who have been at the frontline of the pandemic. The working conditions including the increased risk of exposure to the SARS-CoV-2 virus have put these essential workers in an unsustainable situation. In addition, women constitute a majority of informal carers that have also faced increased challenges. The pandemic has also seen a rise in reports of domestic violence against women where the social isolation further exacerbated these issues.

The COVID-19 pandemic has also emphasised that there is a lack of readily available mental health data in many EU Member States. This points to the need for better EU-wide monitoring of the incidence and prevalence of mental health issues, and of the availability and capacity of mental health services at the national level – all essential to being able to respond to future mental health challenges caused by health emergencies, natural disasters, or other extreme events.<sup>18</sup>

### **Past and future EU action**

The European Union has already put in place various important actions specifically addressing mental health, the various past efforts like the Joint Action on Mental Health and Wellbeing report (2017), the European Framework for Action on Mental Health and Well-Being (2019) and EU Compass for Action on Mental Health and Well-Being (2015-2018) as examples. However, it is crucial to point out that mental health should be further emphasised as a public health priority in the European Union even in a future post-COVID era. The COVID-19 pandemic has made the importance of mental health clear and it is key that we take action both during the pandemic and beyond through multidisciplinary action.

### **Towards an European Mental Health Strategy**

In line with the wellbeing promotion highlighted in the past Finnish Presidency of 2019, good mental health and wellbeing will improve the social and economic growth and sustainability. Thus, it is important to make mental health an integral part of the EU's recovery plan and to turn it into tangible measures. Therefore, it is time to put in place a comprehensive European Mental Health Strategy (The Strategy), which should include at least the following objectives.

#### **EU Mental Health Strategy objectives:**

- ) The promotion and protection of physical and mental health require a multi-sectoral and holistic response, which in turn requires a whole-of-government, multisectorial approach. It

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<sup>17</sup> European Parliament, Flash Eurobarometer 2022 Women in times of Covid-19, <https://www.europarl.europa.eu/news/en/press-room/20220223IPR23904/new-eurobarometer-survey-highlights-severe-impact-of-covid-19-pandemic-on-women>

<sup>18</sup> European Parliamentary Research Service (2022). How are we coping with the pandemic? Mental health and resilience amid the Covid-19 pandemic in the EU. [https://www.europarl.europa.eu/RegData/etudes/STUD/2022/697217/EPRS\\_STU\(2022\)697217\\_EN.pdf](https://www.europarl.europa.eu/RegData/etudes/STUD/2022/697217/EPRS_STU(2022)697217_EN.pdf)

should notably include the policy areas of health, social and child care, elderly care, environment, employment, education, the cultural and creative sector, learning and sport.

- ) Actions and activities should be performed with a focus on vulnerable persons and the mistreatment they may be subjected to especially those persons who form part of vulnerable groups such as ethnic minorities, persons with disabilities, the LGBTIQ+ community and women, and ensure that they are not marginalised or stigmatised.
- ) The European Commission should designate 2023 or 2024 as the European Year for Mental Health to raise awareness of mental health and its importance, provide a platform for stakeholders to exchange and share experience and good practice, promote and facilitate discussion and contribute towards improving mental health across the board. It would also be a good stepping stone for a European Mental Health Strategy.
- ) Each member state should be encouraged to develop a national mental health strategy and allocate adequate financial resources for this.

### **The specific objectives can be divided into four pillars:**

#### **1. Access to mental health services and other services to support mental health and well-being**

- ) Universal access to health care – The right for health care is a fundamental right, thus mental health, as a component for personal well-being and social progress, should be treated as such.
- ) Mental health services must be incorporated as a core component of health systems and must be clear in calls for comprehensive primary health care. It needs to be a public health priority in the European Union.
- ) The emphasis of the Strategy should be prevention, not treatment. Awareness of mental resilience must be ensured to destigmatise and remove taboos for those affected by it.
- ) To perform a comprehensive and representative survey of the mental health status of the European population, including maltreatment and its burden on health status of the population, and to ensure that the data are available for research and policy purposes leveraging as appropriate for this purpose relevant EU infrastructures.
- ) To conduct EU-wide monitoring of the availability of mental health services in the EU.
- ) The Strategy should include a focus on patient safety, to avoid adverse outcomes.
- ) Ensure availability of both preventive and interventional psychological services for families who are in need also to secure mental health and well-being of children.
- ) Improve meaningful family inclusion in the design, implementation and evaluation of mental health services both for children and adults.
- ) Improve early detection of mental health problems, in particular those related to alcohol and drug abuse and domestic violence.
- ) To facilitate cooperation between stakeholders' groups on mental health related issues.
- ) The reduction of wasteful spending to make health systems more effective and resilient (hospital admissions can be avoided with better management of mental health in the community)
- ) Premature mortality should be prevented when it comes to mental health issues.
- ) To move away from institutionalised care and ensure access to home care, thus mental health must become an important element of the future European Care Strategy.



- ) To ensure adequate EU funding in the field of mental health to contribute to the accessibility of EU citizens to affordable mental health care of good quality and sustainability of Member State health systems.
- ) Assess the impact of measures taken to contain the COVID-19 pandemic, such as the closure of kindergartens, schools, cultural and creative venues, and sports facilities; the increase of virtual, hybrid and blended learning; the switch to new working and learning modes and conditions such as teleworking and home-schooling; the limitation of social gathering and human contact, on society as a whole but also in particular on women, children, young people and vulnerable persons.
- ) Propose actions towards gender mainstreaming strategies and tools in healthcare including mental health services.
- ) Improving mental health literacy through education systems, public health campaigns and primary care providers.

## **2. Education, art and culture**

- ) To develop a European Plan for the protection of mental health in education systems.
- ) To develop leisure and sports infrastructure in schools and to train qualified sports teachers across the EU to provide the best possible learning conditions for young people and in that contribute to both physical and mental health, which are interlinked.
- ) To ensure that teachers and childcare professionals (including those who work in alternative care) receive appropriate and up-to-date knowledge in the topic of mental health which requires modernisation of childcare professionals' trainings.
- ) To provide free and regular psychological support for teachers and childcare professionals.
- ) Cultural and sports activities should be integrated in projects aiming at supporting persons suffering from mental health issues or are potentially at risk of mental health issues.
- ) Keeping facilities open that serve social exchange, be it cultural and creative, sportive or youth clubs, is as important in pandemic times as keeping schools open; after more than two years of experience with a pandemic, universal standards for keeping them open must be established.
- ) To ensure good development of valuable social skills and mental health through in-situ education conducted by a teacher and accompanied by other students considering online education as complementary.
- ) Foster the design and provision of targeted, intergenerational services that combine the experience of older people with the courage of younger people in win-win situations for each other.

## **3. Environmental, social and lifestyle factors**

- ) To promote making our cities and schools more environmentally sustainable to the benefit of both physical and mental health.

- ) To take into account that the deprivation of the right to a safe, clean, healthy and sustainable environment, which the UN has recognised as a universal human right, leads to the deterioration of both physical and mental health.
- ) Raise the awareness of the importance of the social determinants of health and their impact on the mental health.
- ) Urban spaces should be people-centred with an emphasis on green common spaces,
- ) The potential of rural spaces to ensure a good physical and mental well-being should be recognised.
- ) Easy access to green spaces should be promoted and made affordable, and public leisure activities, especially for children, focused on spending time in nature should be adequately developed.
- ) To promote access to physical activities and sports to the benefit of both physical and mental health.
- ) Nourishing food, is important to maintain good mental health, therefore attention should be drawn to citizens' access to affordable healthy food.

#### **4. Professional context**

- ) Promoting mental health in the workplace must become an integral part of the EU occupational health and safety policies, as it has so far been largely abandoned by the Commission including in its recent European Strategic Framework on Occupational Safety and Health 2021-2027 and its Vision Zero Approach.
- ) Protection and promotion of mental health should be an integral part of OSH preparedness plans for future health crises and specific attention should be paid to mental health of health and social care workers and of other essential workers.
- ) The Commission should put forward a directive on psychosocial risks and well-being at work aimed at efficient prevention of psychosocial risks in the workplace of, inter alia, anxiety, depression, burnout, and stress including risks caused by structural problems such as work organisation
- ) The right to disconnect should be a priority in workplaces and blended learning environments. Technology should be an aid to completing work tasks, not a burden to working conditions. The Commission should put forward a Directive on the Right to Disconnect without further delay.
- ) To ensure and facilitate collaboration between trade unions and other social partners on mental health notably through collective agreements and social dialogue.
- ) Commission should equally put forward a legislative framework with a view to establishing minimum requirements for fair teleworking across the Union. Such a framework should clarify working conditions, including the provision, use and liability of equipment, existing and new digital tools, and that it should ensure that such work is carried out on a voluntary basis and that the rights, work-life balance, workload, and performance standards of teleworkers are equivalent to those of other workers.
- ) It is important to ensure proper compensation claim options for workers in cases of mental occupational diseases. The 2003 Recommendation concerning the European Schedule of Occupational Diseases should be revised to include work-related mental-health disorders

such as depression, burnout, anxiety, and stress and transformed into a directive setting out minimum requirements for their recognition and adequate compensation for workers.

- ) The Commission should present a Directive to regulate the use of AI technologies at the workplace, to protect workers from mental health risks derived from discrimination, health and safety concerns of machine decisions, hyper connectivity and macro surveillance.
- ) To ensure that all workers are covered by occupational safety and health legislation including non-standard workers as well as genuine and bogus self-employed.
- ) Commission and the Member States should ensure preventive and protective measures aimed at eradicating violence, discrimination and harassment in the world of work, including third-party violence and harassment (i.e. by customers, clients, visitors or patients).
- ) Strengthen reintegration of the patients in the community and the workplace.

## References

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](https://doi.org/10.1787/health_glance_eur-2018-en) .

OECD (2021), Health at a Glance 2021: OECD Indicators, OECD Publishing, Paris, <https://doi.org/10.1787/ae3016b9-en>.

European Trade Union Confederation (2020), EU law to tackle stress epidemic urgent after lockdown. <https://www.etuc.org/en/pressrelease/eu-law-tackle-stress-epidemic-urgent-after-lockdown>

Kessler C., Merikangas K. R, & Wang P. S. The prevalence and correlates of workplace depression in the national comorbidity survey replication. *Journal of occupational and environmental medicine*, 50(4), 381–390, 2008.

Masseti G.M, Thomas C.C , King J., Ragan K. & Buchanan Lunsford N. Mental Health Problems and Cancer Risk Factors Among Young Adults. *American Journal of preventive medicine*, 2017, 53(3S1), S30–S39

Patel V. *et al.*, The Lancet Commission on global mental health and sustainable development. *Lancet*. 2018 Oct 27;392(10157):1553-1598. doi: 10.1016/S0140-6736(18)31612-X . Epub 2018 Oct 9. Erratum in: *Lancet*. 2018 Oct 27;392(10157):1518. PMID: 30314863.

Trautmann S, Rehm J, Wittchen HU. The economic costs of mental disorders: Do our societies react appropriately to the burden of mental disorders? *EMBO Rep*. 2016 Sep;17(9):1245-9. doi: 10.15252/embr.201642951. Epub 2016 Aug 4. PMID: 27491723; PMCID: PMC5007565.

European Parliamentary Research Service (2021), Mental health and the pandemic, [https://www.europarl.europa.eu/RegData/etudes/BRIE/2021/696164/EPRS\\_BRI\(2021\)696164\\_EN.pdf](https://www.europarl.europa.eu/RegData/etudes/BRIE/2021/696164/EPRS_BRI(2021)696164_EN.pdf)

WHO and ILO (2022) Healthy and safe telework: Technical brief, Geneva, <https://www.who.int/publications/i/item/9789240040977>

WHO (2009), Mental health aspects of women’s reproductive health : a global review of the literature, WHO publications, Geneva, Switzerland, [http://apps.who.int/iris/bitstream/handle/10665/43846/9789241563567\\_eng.pdf;jsessionid=8CFE7153130C72802728BF4528EBB418?sequence=1](http://apps.who.int/iris/bitstream/handle/10665/43846/9789241563567_eng.pdf;jsessionid=8CFE7153130C72802728BF4528EBB418?sequence=1)

Reisinger Walker E, McGee RE, Druss BG: Mortality in mental disorders and global disease burden implications: a systematic review and meta-analysis. *JAMA Psychiatry*, 2015; 4: 334-341.

European Parliament, Flash Eurobarometer 2022, Women in times of Covid-19, <https://www.europarl.europa.eu/news/en/press-room/20220223IPR23904/new-eurobarometer-survey-highlights-severe-impact-of-covid-19-pandemic-on-women>

Kuehner C. Why is depression more common among women than among men? *Lancet Psychiatry*. 2017 Feb;4(2):146-158. doi: 10.1016/S2215-0366(16)30263-2.

R. C. Kessler, K. R Merikangas, & P. S.Wang. The prevalence and correlates of workplace depression in the national comorbidity survey replication. *Journal of occupational and environmental medicine*, 50(4), 381–390, 2008.

The Health Foundation (2021), H. Wilson, D. Finch, Unemployment and mental health. <https://www.health.org.uk/publications/long-reads/unemployment-and-mental-health>

Fancourt, Daisy and Finn, Saoirse (2019), What Is the Evidence on the Role of the Arts in Improving Health and Well-Being? A Scoping Review, Health Evidence Network synthesis report 67, Copenhagen: World Health Organisation, <https://www.euro.who.int/en/publications/abstracts/what-is-the-evidence-on-the-role-of-the-arts-in-improving-health-and-well-being-a-scoping-review-2019>

OECD (2021), *Health at a Glance 2021: OECD Indicators*, OECD Publishing, Paris, <https://doi.org/10.1787/ae3016b9-en>. pp. 98-99

European Parliamentary Research Service (EPRS),(2021), Mental health and the pandemic, [https://www.europarl.europa.eu/RegData/etudes/BRIE/2021/696164/EPRS\\_BRI\(2021\)696164\\_EN.pdf](https://www.europarl.europa.eu/RegData/etudes/BRIE/2021/696164/EPRS_BRI(2021)696164_EN.pdf)

WHO and ILO (2022) , Healthy and safe telework: Technical brief, Geneva <https://www.who.int/publications/i/item/9789240040977>

OECD Policy Responses to Coronavirus (COVID-19) Combatting COVID-19's effect on children, <https://www.oecd.org/coronavirus/policy-responses/combating-covid-19-s-effect-on-children-2e1f3b2f/>, Accessed 05 May 2022

European Parliament, Flash Eurobarometer 2022 Women in times of Covid-19, <https://www.europarl.europa.eu/news/en/press-room/20220223IPR23904/new-eurobarometer-survey-highlights-severe-impact-of-covid-19-pandemic-on-women>

European Parliamentary Research Service (2022). How are we coping with the pandemic? Mental health and resilience amid the Covid-19 pandemic in the EU, Brussels, [https://www.europarl.europa.eu/RegData/etudes/STUD/2022/697217/EPRS\\_STU\(2022\)697217\\_EN.pdf](https://www.europarl.europa.eu/RegData/etudes/STUD/2022/697217/EPRS_STU(2022)697217_EN.pdf)