The Economic Case for Preventing Mental Ill Health

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Investing in Mental Health for Resilient Societies

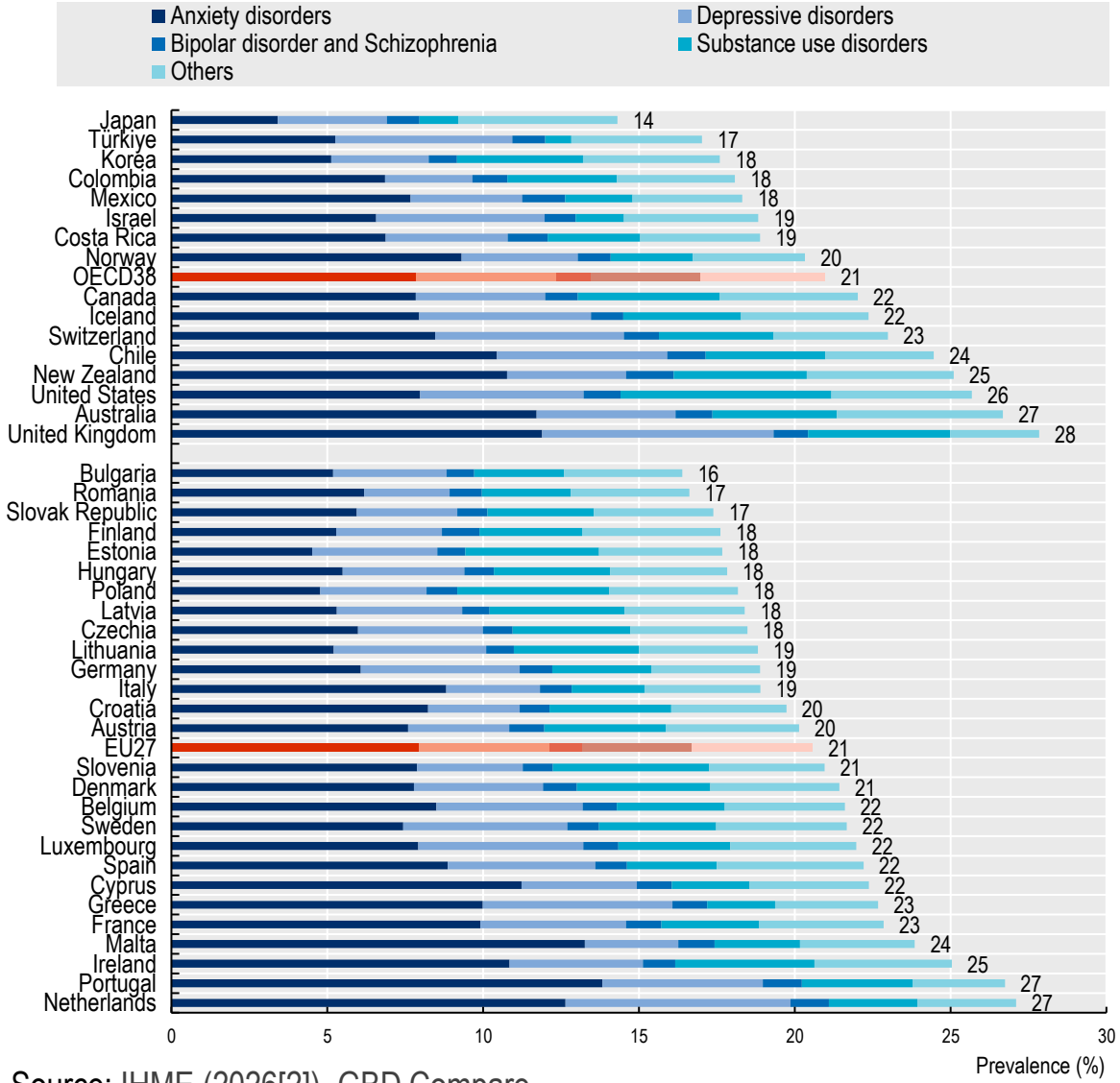
Tallin - 4th November 2026

Co-funded by the European Union

A widespread, hidden and underserved crisis

- **1 in 5 people** across OECD countries experienced a mental disorder in 2022. Depression, Anxiety and Substance Use Disorders (SUDs) account for approximately ¾ of all disorders.
- **But likely more** — many mild-to-moderate cases go undiagnosed due to stigma and system limitations; the true scale is unknown
- **60%** people who need mental healthcare **cannot access it**

Prevalence of mental disorders in EU and OECD countries

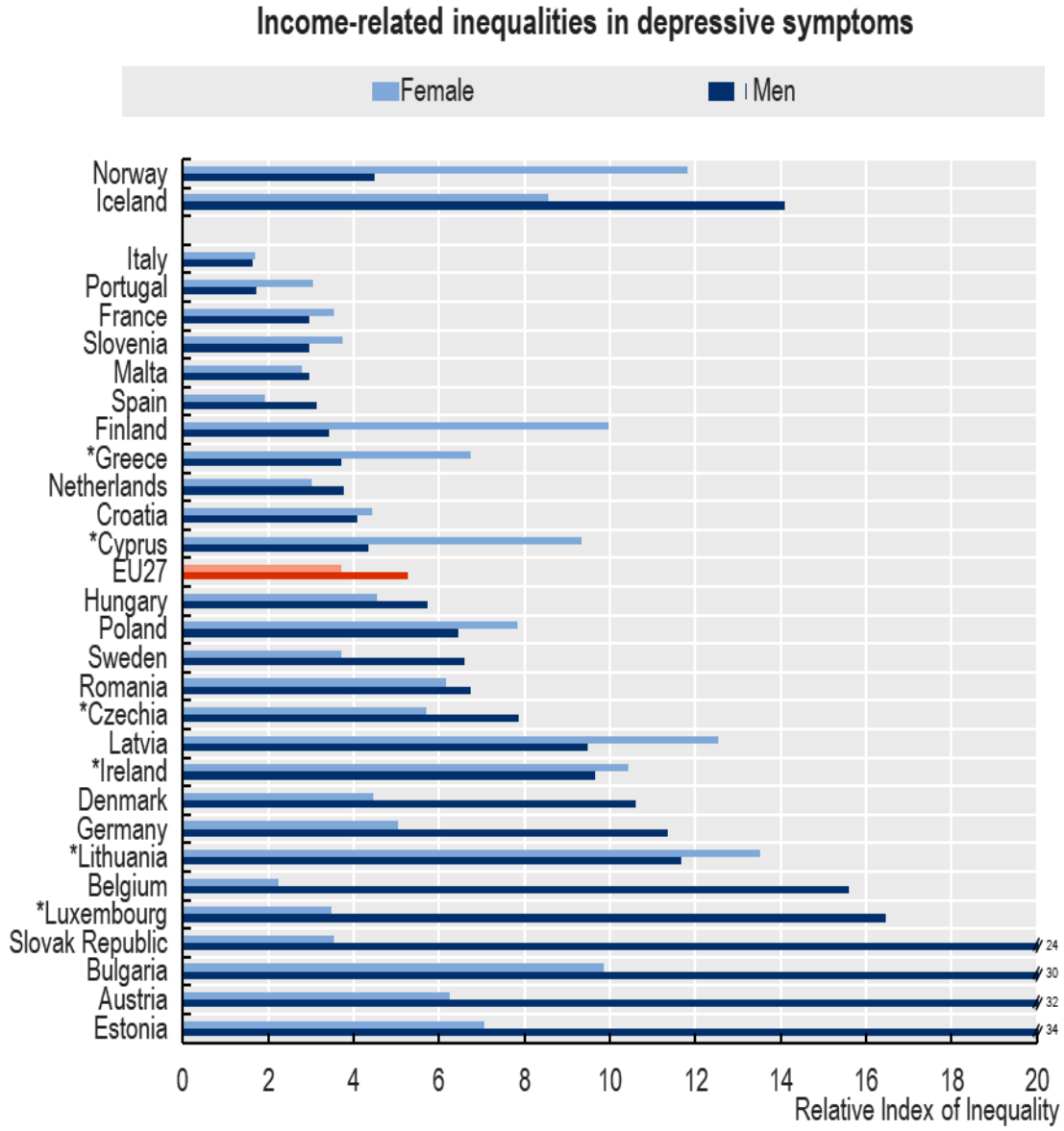


Source: IHME (2026[2]), GBD Compare

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Mental disorders disproportionately affect certain population groups

- Young people are hardest hit — 1 in 4 individuals aged 15–24 currently experience a mental disorder, **the highest of any age group**
- **Gender shapes the type of disorder** — women report higher rates of anxiety and depression; men are more likely to experience alcohol and substance use disorders
- **Socio-economic status is a strong predictor** — lower income and education levels are consistently associated with higher rates of depression and anxiety



Source: OECD analyses using the SPHeP-NCD model

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Several recent events and factors have adversely affected mental health

Covid 19

Lockdowns, border closures, business and work closures, work-from-home mandates, and a broad range of other measures had significant impacts on social lives, economic and housing stability, significantly affecting quality of life and mental health

War and Conflicts

Exposure to these events has a scarring effect, negatively affecting individuals' mental health over the life course

Climate

84% of young people are either moderately or extremely worried about climate change, and more than 45% stated that climate change negatively affected their daily lives and functioning

Social media

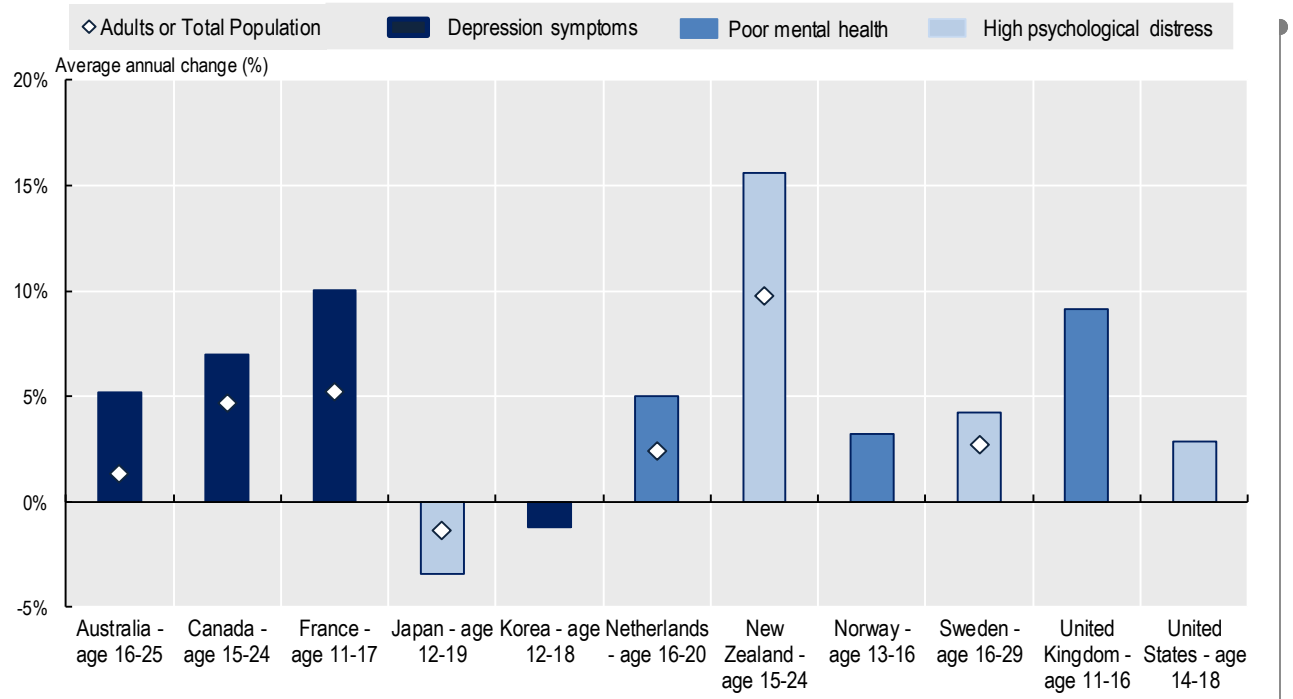
Evidence suggests that problematic use of social media is associated with increased rates of anxiety, depression and other mental disorders, with increasing evidence that girls and young women are more vulnerable to these effects.

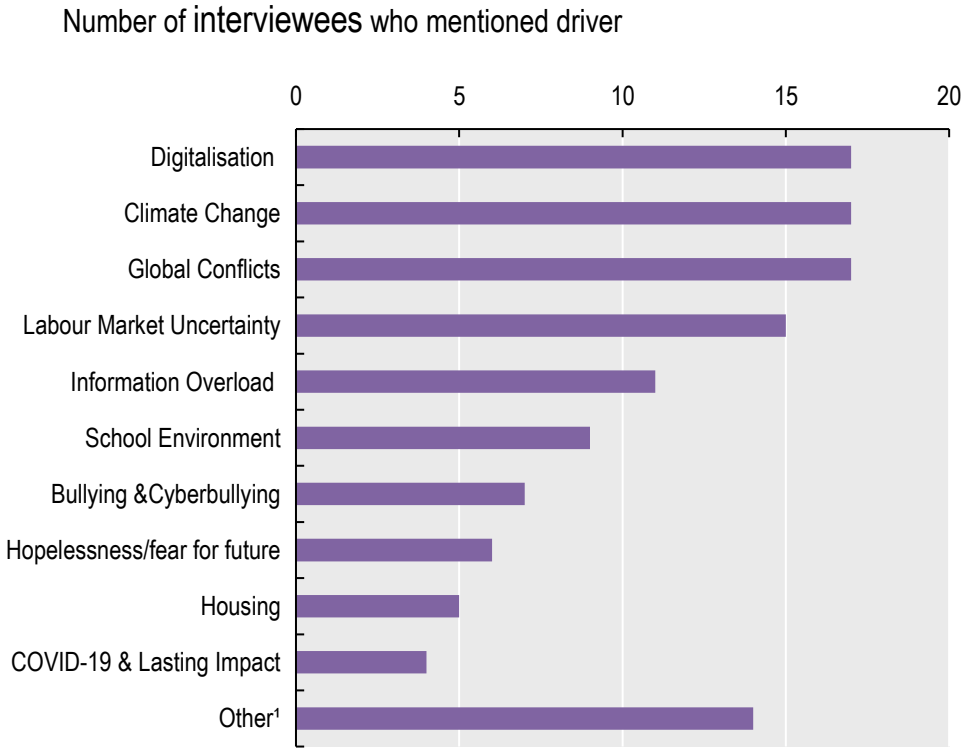
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Youth mental health is declining, influenced by mutiple, intersecting drivers

- **Mental health is declining in most countries**

'New and old' drivers affect youth mental health





Notes: Data in left-hand chart are not directly comparable across countries. The category "other" in the right-hand chart includes housing insecurity; lasting impacts of the pandemic; political trends; peer relations; reduced physical activity; online misinformation; weakened family structures; child maltreatment.
Source: OECD (2026). *Child, Adolescent and Youth Mental Health in the 21st Century*

There is no one, clear picture on the mental health impacts of "digitalisation"

Literature shows strong evidence

- **Cyberbullying** and **harmful content**
- **Poor sleep** - indirectly affecting mood, anxiety, substance use disorders

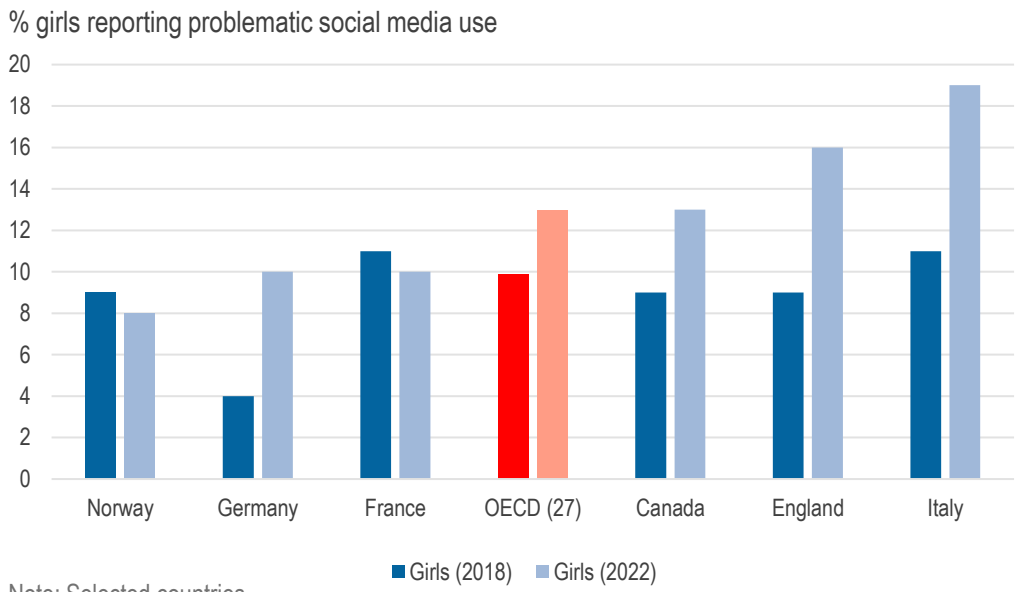
Limited and mixed evidence

- Excessive screen time and passive use of social media

Experts saw mixed impacts:

- Impacts vary between individuals
- Concerns about **(mis)information** on mental health, and "**amplification effect**"

Problematic social media use among girls increased from 10% to 13% between 2018 and 2022



Note: Selected countries.
Source: HBSC 2021/22, *Health Behaviour in School-aged Children study*.

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The real cost of mental ill health on our societies

Not only a Health Issue, But also an Economic One.



2.6 Years

reduction in healthy life expectancy, and 4 months in life-expectancy, equivalent to approximately 29,000 premature deaths annually



+41 %

Needed in health care expenditures to close the treatment gap



6%

of total health budgets, equivalent to additional healthcare costs of around EUR 87 billion per year. At current treatment coverage.



-1.7%

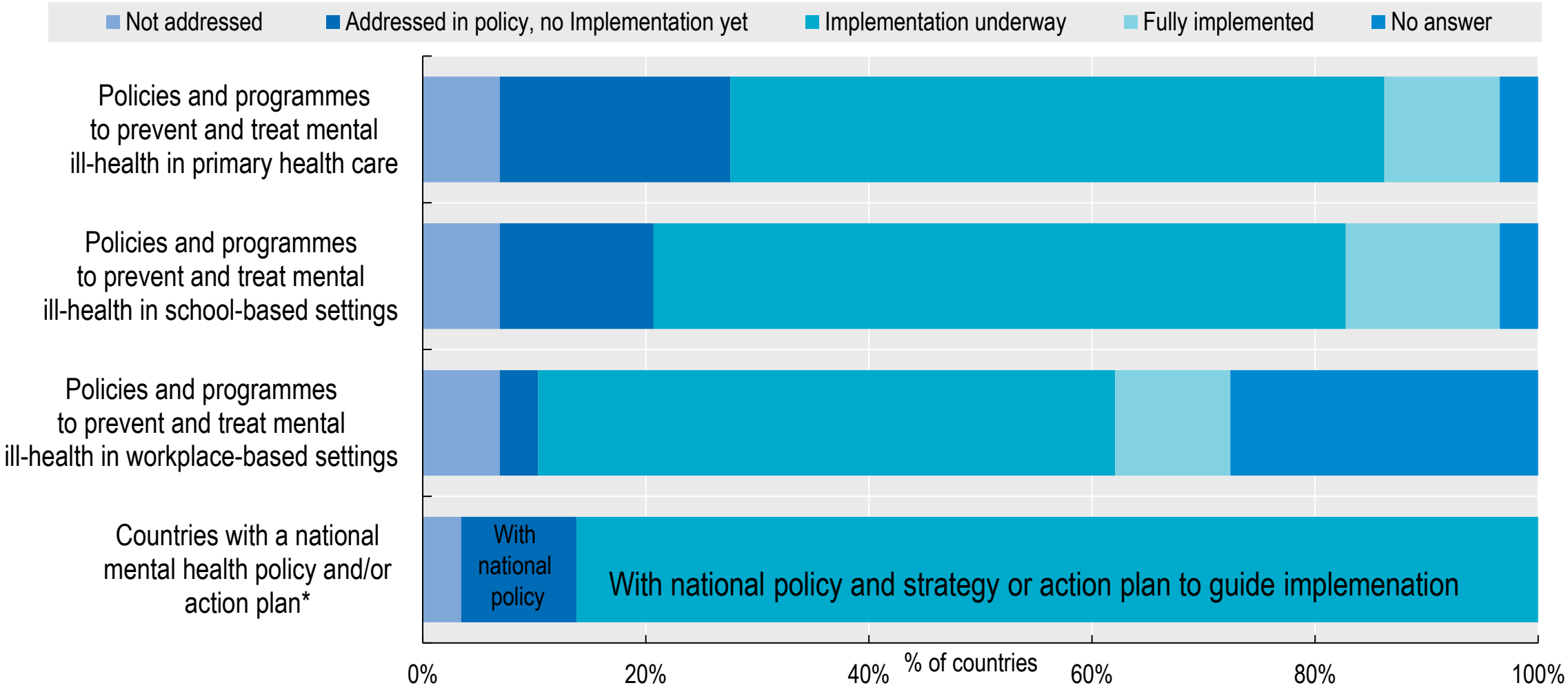
reduction in GDP due to reduction in workforce productivity

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The right tools exist — but not at the right scale

Policies are in place — but gaps remain

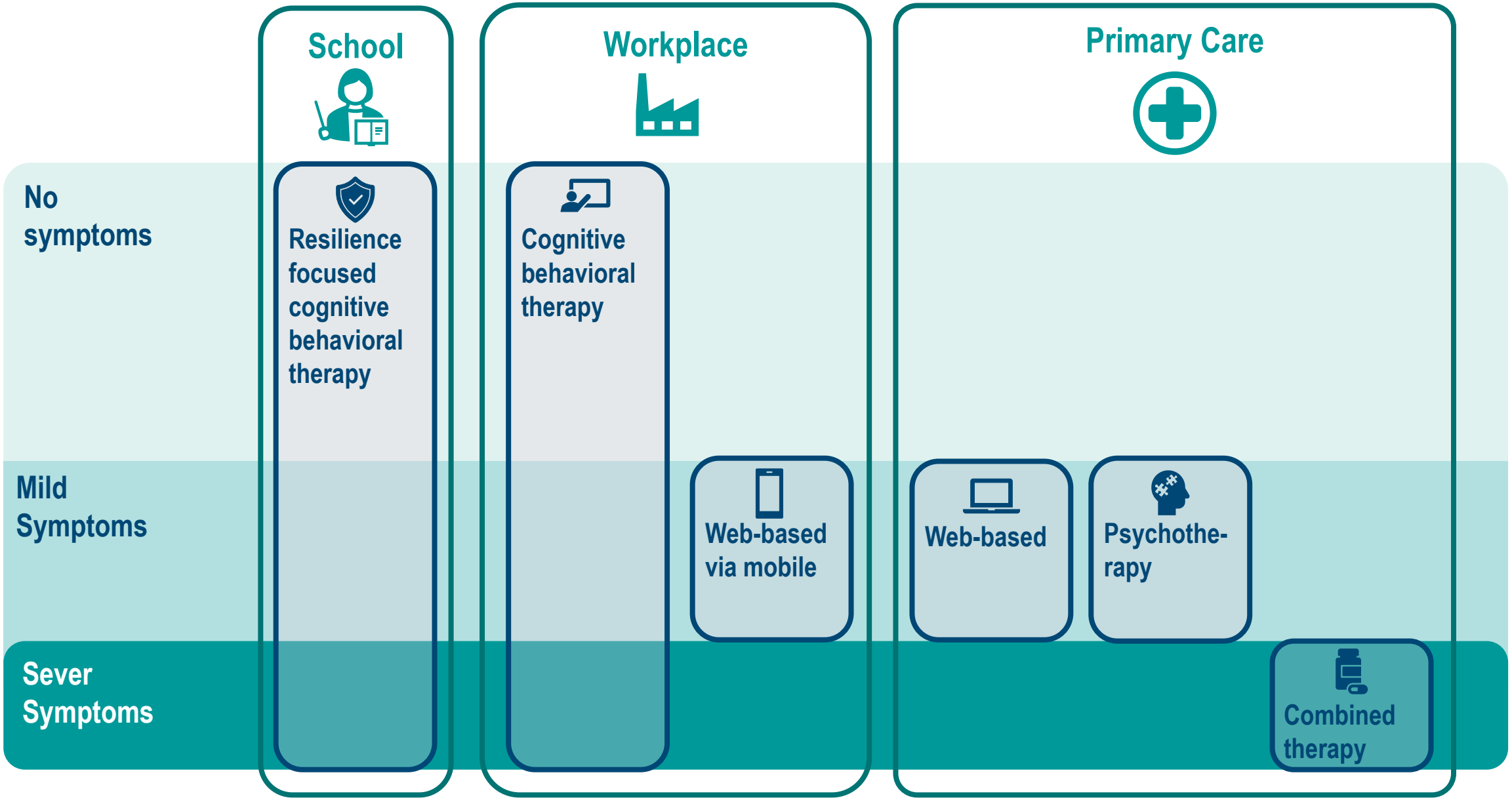
30% of countries have not started yet implementing policy actions in primary care



Source: OECD and EC-OECD-WHO survey on implementation of policies to promote mental wellbeing

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6 modelled interventions across 3 settings

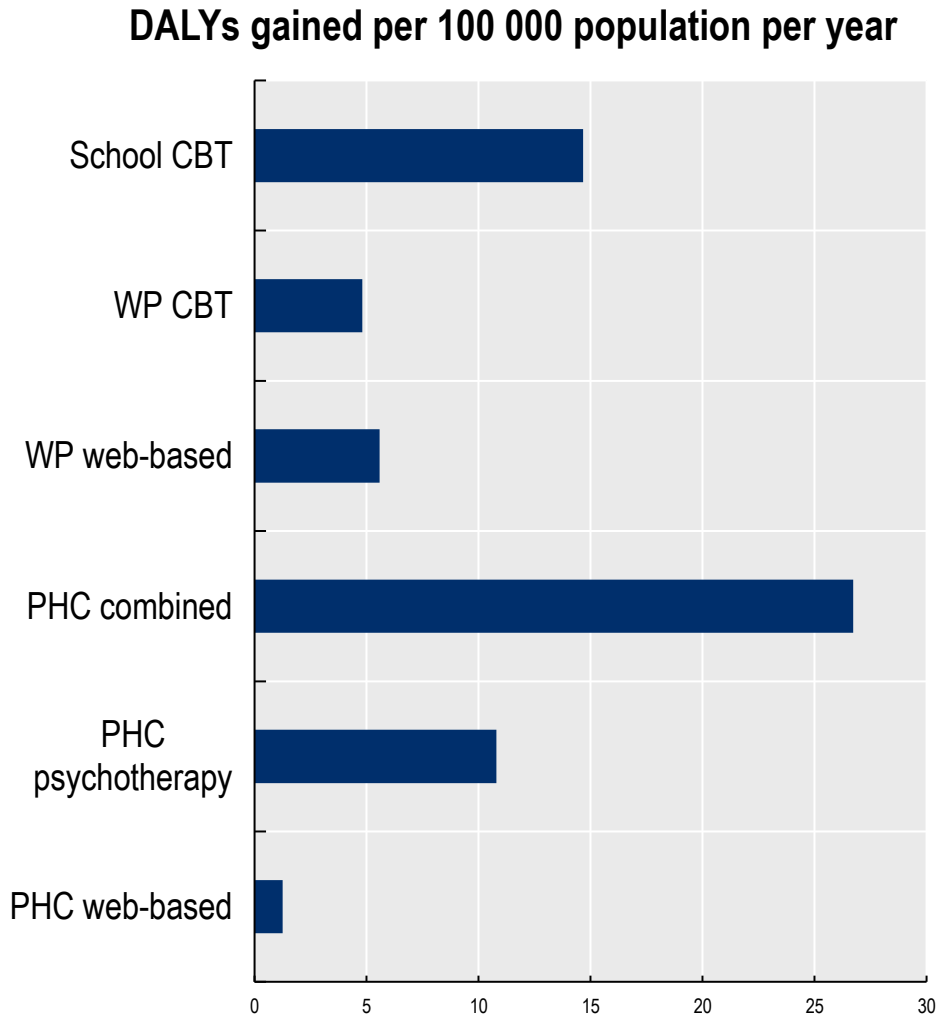


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Investing in promoting mental wellbeing has a positive impact on health and the economy

Policies to improve mental well-being generally offer good value for money

- All the modelled interventions have a **positive impact on quality of life** – measured in (DALYs)
- All interventions, apart from school-based and workplace-based CBT are most likely to be cost-effective or even cost-saving, based on a threshold of EUR 50 000 per DALY gained.
- Implementation of the interventions produces a **positive impact on the economy** and, apart from school-based and workplace-based CBT, yield a benefit-cost ratio greater than 1, meaning that their contribution to GDP surpasses the cost of implementation.



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But to achieve impact at scale, implementing effective interventions is not enough

While the healthcare system plays an important role in addressing mental ill-health, it cannot solve the problem alone. Closing current gaps requires action on three key policy priorities:

Best-Practices

Implementing best practices for improving mental well-being will deliver better results. Efforts to improve access to mental health services must be accompanied by complementary measures to enhance the impact of interventions – particularly by addressing stigma and other barriers to care

More ambitious targets

Ambitious coverage targets require upfront investment: treating everyone in need would demand 41% more spending and a major workforce expansion. The key is to prioritise where unmet needs are greatest.

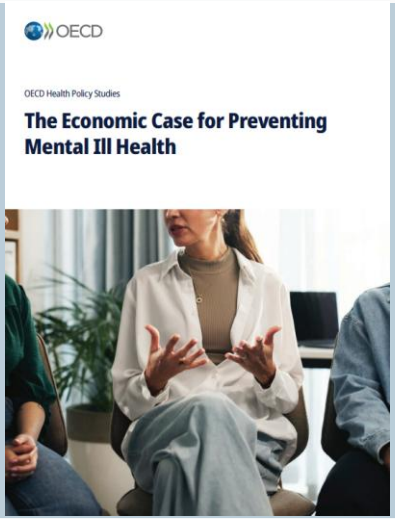
Address the root causes

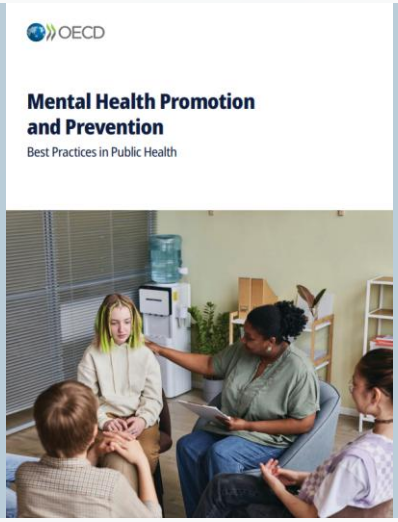
Clinical interventions cannot counteract the social and economic drivers of mental distress on their own. Countries with more generous social protection systems consistently achieve better mental health outcomes. Mental health policy must go hand in hand with labour market, education and social protection.

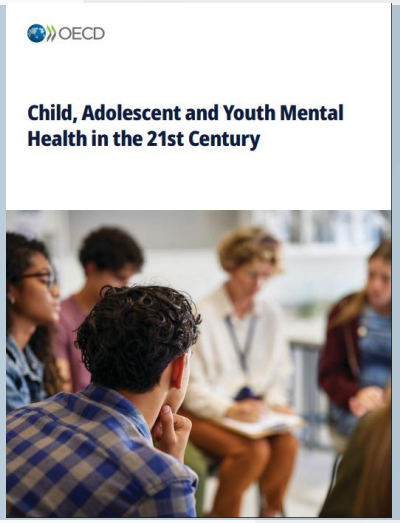
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