Why Ghana needs to invest more in mental health

“Policy makers should ask not whether they can afford to invest in mental health, but can they actually afford not to?” (S. Saxena, former Director of Mental Health Services, WHO)

Ghana has a comprehensive Mental Health Law (2012) that has been praised by the World Health Organization (WHO) as an exemplar to other countries for its focus on integrated, community-based approaches and for framing access to care as a human right. However, while the legal and policy frameworks exist to improve mental health services, implementation remains a challenge. **The majority of people with mental health conditions in Ghana – between 85 and 98% of people in need – either cannot, or do not, access the treatment they require.**

Ghana spends just 1.4% of total government health expenditure on mental health,¹ and so the burden of mental ill health continues to grow, with serious consequences for the country’s economic and social development, as well as the health and wellbeing of its people. Funds are urgently needed to implement mental health legislation, and scale up implementation of Ghana’s mental health policies and strategies, as well as to enable the Mental Health Authority to fulfill its mandate to provide culturally appropriate, humane and integrated mental health care throughout the country.

Investing more in mental health will have a transformative effect for Ghana, boosting economic growth and improving the health and wellbeing of its citizens.

Investing in mental health:

- Improves population health and reduces the burden on the health system
- Strengthens poverty reduction efforts
- Supports Ghana’s economic growth

Investing in mental health will support Ghana’s economic growth

The cost of mental illness is extremely high. Recent estimates put the **global costs of depression and anxiety alone at 1.15 trillion US dollars every year in lost productivity.** In Ghana, it is estimated that nearly 7% of GDP is lost due to psychological distress, compared with 4% of GDP lost to malaria. There is clear evidence that the benefits of investing in mental health far outweigh the costs. These benefits mostly come from gains in productivity when people with mental health conditions can play an active role in their communities and in the workforce.
A comparison of the costs and benefits of treating mental health conditions in Ghana was conducted for the first time by Nonvignon, Amissah & Agyemang in 2020, commissioned by the Ghana Priorities Project which was a collaboration between the National Development Planning Commission and the Copenhagen Consensus Centre. The authors estimated that, for every GHS 1 invested in screening for, and treating depression, anxiety and schizophrenia, a significant return on investment would be gained,† as shown in the diagram.

These findings reflect similar conclusions drawn by Chisholm and colleagues in 2016† from a ground-breaking, multi-country study on the costs and benefits of providing more, better quality, mental health services.

**External financial assistance is declining**

Donor funding for health is predicted to decline sharply in Ghana, linked to the country’s transition to lower middle-income country (LMIC) status in 2011, and the 2019 Ghana Beyond Aid Charter. This is part of a wider pattern of reductions in aid flows, which are under additional pressure due to the global economic downturn and COVID-19 pandemic. **Domestic funding for health and mental health is urgently needed to compensate for this reduction.**

**Investing in mental health strengthens poverty reduction efforts**

Poor mental health is strongly linked to chronic and inter-generational poverty in a vicious cycle effect. Globally, evidence shows up to twice the levels of depression and anxiety among low-income groups than among those who are better off.†

In Ghana, it is estimated that household costs associated with poor mental health account for as much as a third of total monthly earnings.† These costs include the direct costs of accessing treatment, like medicines, fees for health services and transport, as well as indirect costs from the loss of earnings.

Ghana’s recent economic growth has been accompanied by rising inequality, and poverty levels everywhere are expected to increase due to the COVID-19 pandemic. **Investing in mental health will support the government’s poverty reduction efforts, enabling individuals to participate more effectively in society and the economy, enabling stronger economic growth.**

**The cyclical relationship between poor mental health & poverty**
Investing in mental health improves population health and reduces the burden on the health system

Across the world, mental health conditions account for a growing proportion of the overall burden of disease. Depression in particular, has been slowly climbing the list of health problems that cause the most disability for several decades, and is a major challenge for Ghana. The COVID-19 pandemic is contributing to rising levels of depression, anxiety, harmful alcohol and drug use, self-harm and suicidal behaviours.

Disability-adjusted life years from mental health and substance use disorders, 1990 to 2017

Improved mental health can lead to reduced tobacco, alcohol and substance abuse, reduced vulnerability to infectious diseases such as HIV and Tuberculosis (TB), and reduced obesity and chronic health conditions. It is thought that around half of people with TB have depression, making them ten times more likely to stop treatment, contributing to increased drug resistance and leaving them at higher risk of dying. Importantly, better mental health also enhances overall wellbeing and improves social connections. In Ghana, as in other countries, mental illness is associated with high levels of repeat health service utilisation and associated costs as a result of chronic mental health conditions. High returns on investing in mental health also come from lower overall health care costs, and reduced pressure on the health system.

Investing in mental health supports Ghana’s efforts to achieve UHC

The 2030 Agenda for Sustainable Development provides an effective framework for the achievement of disability-inclusive development. Mental health is explicitly included in SDG 3 on the promotion of health and well-being for all, and it is widely acknowledged that good mental health is critical for achieving Universal Health Coverage (UHC). There is also growing evidence that neglecting mental health will make the achievement of many other SDGs far more difficult, especially poverty reduction, inclusive education, gender equality, sustainable economic growth, inequality, and promotion of peaceful and inclusive societies.
Limited financial risk protection for people with mental health conditions poses a significant barrier to the achievement of (UHC). Although Ghana is committed to free access to mental health services and medications, many of the common psychotropic medicines are not available.

Findings from the pioneering EMERALD project (Emerging Mental Health Systems in LMIC) show that national health insurance schemes could provide an important means to increase both service coverage and financial protection.¹

### A call to action for Government of Ghana to invest in a minimum package of mental health care services

A growing body of evidence demonstrates that a **minimum package of mental healthcare services would cost between 3 and 4 US dollars per person per annum.** This is the target investment level in Ghana’s 12-year Mental Health Policy, equivalent to GHS 540 to GHS 720 million. This is less than 1% of estimated total government spending for 2020.

#### How should we invest these funds?

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<tr>
<th><strong>DEMAND</strong></th>
<th><strong>SUPPLY</strong></th>
<th><strong>GOVERNANCE &amp; ACCOUNTABILITY</strong></th>
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<tbody>
<tr>
<td>Address the mental health impact of COVID-19</td>
<td>Speed up integration</td>
<td>Establish Mental Health Review Tribunal</td>
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<td>Screening and prevention of mental health conditions for children and adults</td>
<td>Train healthcare workers in mental health</td>
<td>Establish Regional Visiting Committees</td>
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<td>Increase financial protection, skills and occupational training for people with mental health conditions</td>
<td>Develop community-based support systems, rehabilitation services, and half-way homes</td>
<td>Strengthen Regional Mental Health Sub-Committees</td>
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<tr>
<td>Public education on mental health, reducing stigma and discrimination</td>
<td>Strengthen infrastructure</td>
<td>Incorporate mental health into National Health Insurance Scheme</td>
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¹For further information, including all references, please contact us:
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![World Health Organization](image1)
![Tropical Health](image2)
![Sightsavers](image3)
![Options](image4)
![Ministry of Health](image5)
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