

Firstly, I would like to take this opportunity to congratulate you on your recent success in the Northern Ireland Assembly elections.

On 7th October 2021, I wrote to all the Northern Ireland political party leaders, to ask them to support the full funding for three essential mental health strategies and frameworks in Northern Ireland.

- [Department of Health's 10-year Mental Health Strategy](#);
- [Department of Education's Emotional Health and Wellbeing Framework](#); and
- [Protect Life 2 Suicide Prevention Strategy](#)

Today I write to all MLAs in our newly elected Assembly to renew this call. I have previously spoken about the high rates of mental ill health in Northern Ireland and how it is related to the social and economic inequalities that exist here, the trauma of the Troubles, and the legacy of childhood adversities.

In Northern Ireland prior to the pandemic one in eight children had an emotional or mental health problem, this was far higher than neighbouring regions¹. There is worrying evidence that our mental health has deteriorated as a result of the pandemic^{2,3,4}, leading to unprecedented demand for mental health services and huge pressure on staff. There is evidence of an increase in the proportions of people reporting suicidal thoughts⁴. Mental illness is a preventable and treatable cause of death and suffering; and it is unacceptable that so many people in Northern Ireland are unable to access treatments and services.

Currently, mental health problems cost the Northern Ireland economy £3.4 billion each year⁵. For too long we've been firefighting by supporting people in crisis, helping people only when their mental health has deteriorated to the point where they are seriously ill, and pouring resources into clinical services which are unable to meet demand. People in distress should get quick access to the right support and treatment, but we also need to be doing more to prevent mental health problems from arising and intervening early to support families and improve outcomes.

The Department of Health has developed, in conjunction with people with lived experience, carers, campaigners and health care providers, a new 10- year Mental Health Strategy⁶ together with a full funding plan⁷. The Strategy is a strong plan which

incorporates many of the prevention and early intervention activities needed to address mental health issues in Northern Ireland.

In order to implement all the actions in full the Strategy requires £1.2 billion across ten years. This represents a 34% increase in funding to this part of the Health budget. The funding uplift would bring us into line with the mental health spending per capita in England, which is currently 31% higher than Northern Ireland.

The importance of early intervention and prevention cannot be overstated and a report by the Mental Health Foundation⁵ affirms the importance of the work undertaken in this area by investing early we will be able to reduce to cost of mental health services. A piecemeal approach to mental health is not acceptable. This Strategy must be implemented in full.

Recent research has revealed worryingly high rates of mental illness in our young people. Research conducted in Northern Ireland through the Young/Kids Life and Times Survey in 2020 reported that 41% of Primary 7 respondents and 52% of 16-year-olds felt their mental and emotional health had worsened during the pandemic⁸. This was before the pandemic and we know that the isolation from friends has also taken a heavy toll on our children's mental health. Whilst the reality is that many children are resilient despite the adversities that they have endured, others have suffered layers of trauma and disadvantage, their wellbeing has not demonstrated the same post-pandemic recovery, and it is those young people that we must now help. In addition to the Mental Health Strategy, the Department of Education's Emotional Health and Wellbeing in Education Framework is a strong plan to improve resilience and identify and intervene to support children who are demonstrating signs of poor mental health. This Framework also needs to be adequately funded.

Finally, our Protect Life 2 Suicide Prevention Strategy⁹ (which currently receives funding of £10 million per year) requires an increase of between 10% and 26% over the next three years in order to continue to help prevent avoidable deaths in Northern Ireland.

There are compelling arguments to support investment in mental health and suicide prevention; including the protection of human rights, improved physical health,

mortality and educational outcomes, a reduction in crime, and enhanced economic productivity and efficiency^{10,11}. There are also numerous evidence-based treatment and management strategies that not only reduce human suffering, but also reduce costs and increase productivity¹². Fully funding these strategies should be viewed as investments that will pay dividends for current and future generations; and allow our population to thrive. Mental ill health is the largest cause of disability in the UK, contributing up to 22.8% of the total burden (compared to 15.9% for cancer and 16.2% for cardiovascular disease)¹². Inaction and underinvestment will only serve to increase the economic burden of mental health here, amplify existing inequalities and prevent our society from flourishing.

I am therefore calling on each of you as political representatives for your constituents to make a commitment to plug the gap in funding for mental health, and to deliver full funding to implement the Mental Health and Suicide Prevention Strategies in full. The implementation of these Strategies will help secure a happier and healthier Northern Ireland, not only for those who suffer right now, but for future generations.

Yours sincerely



Siobhan O'Neill
Mental Health Champion for Northern Ireland

References

1. Bunting et al. (2020). The mental health of children and parents in Northern Ireland. <http://www.hscboard.hscni.net/our-work/social-care-and-children/youth-wellbeing-prevalencesurvey-2020/>
2. Visner et al. (2021). Impacts of school closures on physical and mental health of children and young people: a systematic review. <https://doi.org/10.1101/2021.02.10.21251526>
3. McPherson et al. (2021). Longitudinal analysis of the UK COVID-19 Psychological Wellbeing Study: Trajectories of anxiety, depression and COVID-19-related stress symptomology. <https://doi.org/10.1016/j.psychres.2021.114138>
4. O'Connor et al., (2021). Mental health and well-being during the COVID-19 pandemic: longitudinal analyses of adults in the UK COVID-19 Mental Health & Wellbeing study. <https://doi:10.1192/bjp.2020.212>
5. McDaid et al. (2022). The economic case for investing in the prevention of mental health conditions in the UK [MHF Investing In Prevention FULLReport FINAL.pdf \(mentalhealth.org.uk\)](https://www.mentalhealth.org.uk/sites/default/files/2022-03/MHF%20Investing%20In%20Prevention%20FULL%20Report%20FINAL.pdf)
[MHF Investing In Prevention FULLReport FINAL.pdf \(mentalhealth.org.uk\)](https://www.mentalhealth.org.uk/sites/default/files/2022-03/MHF%20Investing%20In%20Prevention%20FULL%20Report%20FINAL.pdf)

6. Department of Health (2022). Mental Health Strategy 2021-2031
[doh-mhs-strategy-2021-2031.pdf \(health-ni.gov.uk\)](#)
7. Department of Health (2021). Funding Plan
[doh-mhs-funding-plan.pdf \(health-ni.gov.uk\)](#)
8. NICCY (2021). A New Better Normal Children and Young People's Experiences of the Covid-19 Pandemic.
[niccy-covid-report-summary-report-final-aug-21.pdf](#)
9. Department of Health (2019). Protect Life 2 - Suicide Prevention Strategy
<https://www.health-ni.gov.uk/sites/default/files/publications/health/pl-strategy.PDF>
10. UK Department of Health (2011). No health without mental health: A cross-Government mental health outcomes strategy for people of all ages. Supporting Document - The economic case for improving efficiency and quality in mental health.
<https://www.gov.uk/government/publications/theeconomic-case-for-improving-efficiency-and-quality-in-mental-health>
11. World Health Organisation (2013). Mental Health: Evidence for Action.
<https://apps.who.int/iris/handle/10665/8723>
12. World Health Organisation (2008). Global burden of disease report.
<https://www.who.int/data/gho/data/themes/mortality-and-global-health-estimates>