

## THE COST OF MATERNAL MENTAL ILLNESS

Common mental disorders such as depression and anxiety are among the most frequent health problems seen in general health-care settings. They are a leading cause of disability and financial insecurity in developing countries. High rates of gender-based violence, and the burdens associated with gender inequality mean that women are particularly vulnerable to mental illness. Current studies show that up to 50% of women living in adversity are experiencing depression during pregnancy.

### Depression → Poverty

Mental health problems have **serious economic and social costs**. These include direct costs related to the provision of health care. Indirect costs include reduced productivity at home and work, loss of income or employment, and social exclusion due to stigma. Therefore, those who live with mental illness are at increased risk of sliding into, or remaining in poverty. Depressed pregnant women are more likely to experience income and food insecurity. The significance is enormous: there are more female-headed households in South Africa than male-headed households and nearly half of all female-headed households already live below the poverty line; experiencing mental illness increases the vulnerability of those who are already the most vulnerable.



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### Poverty → Depression

People living in poverty are at increased risk of developing mental disorders through the stress of living in poverty, increased obstetric risks, lack of social support, increased exposure to violence and worse physical health. Community studies indicate that poor women, especially those with young children, are more likely to experience psychological problems compared with other women. Social and environmental adversity is strongly associated with maternal depression and impaired child development.

### Depression + Poverty → Child outcomes

The relationship between poverty and mental ill-health has been described as a 'vicious cycle'. This cycle has negative outcomes for mothers, their children, and society. The poor mental health of mothers can affect child health and child development: cognitive, behavioural and physical. Even moderate depression has been associated with developmental delays in children. In turn, if a mother is poor, either permanently or intermittently, her child has an increased likelihood of long-

term, negative health impacts, for obvious reasons such as a lack of medical care and poor nutrition.

## Mental illness → Cost

A South African study showed that lost earnings among adults with severe mental illness during the previous 12 months amounted to R28.8 billion. This represented 2.2% of GDP in 2002, and far outweighs the direct spending on mental health care for adults - approximately R472 million. The indirect cost of mental illness outweighs direct treatment cost by two to six times in developed countries and may be even higher in developing countries.

## Mental health interventions for mothers → Preventative, cost – effective and protective

One of the **most important factors mediating the link between poverty and child health is maternal mental health**. Some studies show that the health of the mother, particularly her mental health, plays a key role in reducing the observed effects of poverty - almost completely. Therefore, in settings of poverty and adversity, where women and children face enormous developmental challenges, it



Mental health interventions for mothers are cost-effective solutions for poverty alleviation.

makes sense to also invest in maternal mental health interventions rather than only financially-focused developmental solutions. One of the most striking benefits of improving maternal mental health is a significantly reduced health gap between rich and poor children. Even in resource limited settings, mental health interventions can break the cycle of poverty and mental ill-health. Treating mental illness, particularly among women living in poverty, can increase resilience, agency and productivity, reduce health-care expenditure and facilitate the conditions necessary to rise out of poverty.

The **Perinatal Mental Health Project** advocates for proven, affordable and simple interventions. Our aim is for all women to have universal access to quality maternal mental health care, at the same site where they receive pregnancy care. The success of this approach is that poor women do not need to use additional resources, or deal with issues of stigma, when accessing the care they need. In this way, those who most need health care are able to access it.

Addressing mental illness is integral to achieving development goals and, in short, it costs South Africa more to **not treat** maternal mental illness than to treat it.