



# Mental Health in Latin America and the Caribbean:

## The Silent **Pandemic**

A PALIG White Paper

Pan-American Life Insurance Group (PALIG) recently released a white paper on Mental Health in Latin America and the Caribbean. This is an Executive Summary of the key findings from this report. The full white paper is available [here](#).

### What is “Mental Health”?

According to the WHO, Mental Health is a “state of well-being which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make contribution to his or her community”.



“

There is no  
**health**  
without  
**mental**  
health ”

### How is Mental Health Studied and Reported?

For medical reporting purposes, mental health disorders are classified along with neurological and substance-use disorders. As a group, these are referred to as **MNS** (**M**ental, **N**eurological and **S**ubstance-use) disorders.

# Types of Mental

## Health and other MNS Disorders

There are many different types of mental health and other MNS disorders. The most common are depression, anxiety disorders, and pain disorders. While less common, conditions such as schizophrenia, bipolar disorder and autism weight heavily on individuals and their families.

### Stigma and Mental Health Disorders

In many cultures, there is a stigma associated with mental health and other MNS disorders. In Latin America, traditional cultural values such as machismo, marianismo, and familismo, reduce peoples' willingness to share what they are feeling or seek help. Stigma often also causes families of the mentally ill to conceal the illness and treatments, which can result in inaccurate diagnoses, poor treatment and worse outcomes.

#### **Stigma**

*"a mark of disgrace or shame that sets a person apart from others"*

### Mental Health Disorders are common throughout the region.

MNS disorders are widespread throughout Latin America and the Caribbean and are associated with a great deal of disability, often for the life of the sufferer. Mental Health and other MNS disorders are second only to non-communicable chronic diseases (e.g. diabetes) in terms of the burden of disease (DALYs ) throughout the region.



**1 in 4**

people in the Americas experiences mental illness and/or substance use disorder in their lifetime PAHO, 2018.

## Suicide

DALY = Disability-adjusted Life Year is a metric used by international health organizations to measure and compare the impact of diseases and medical conditions. The most extreme, and catastrophic, end point of a mental health condition is suicide. Rates of suicide vary widely among countries in the Western Hemisphere, with the highest rates in the U.S. and Canada and lowest rates among non-Latin American Caribbean countries.

## The Cost of Mental Health Disorders

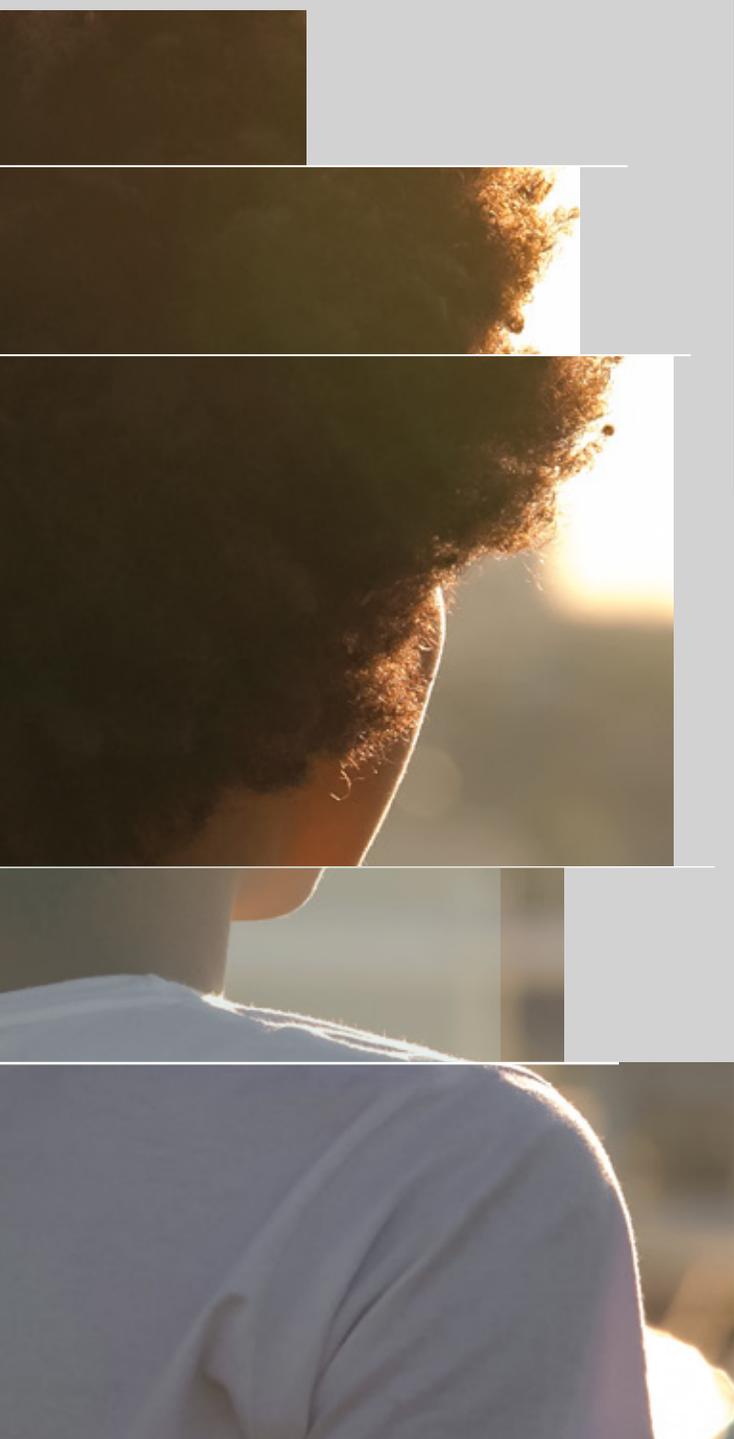
Mental health and other MNS disorders are costly to individuals, communities and societies. People with MNS disorders incur significantly higher healthcare costs and miss more days of work than those without MNS. Workers with treatment-resistant depression, for example, miss three-times the number of days of work and cost nearly three-times as much in healthcare costs, as those without depression.

## The Causes of Mental Health Disorders

Mental illness and substance-use disorders are generally not caused by one thing, but arise from the interplay of genes, environment and a host of other factors. Some of the most common contributing factors to MNS disorders include: one's social environment (e.g. unemployment, overcrowding); stress; biological factors (e.g. chemical imbalances), having few friends or feeling lonely or isolated, and having a serious medical condition, among others.

## Under-diagnosed and undertreated

There is wide gap between how common MNS disorders are in Latin America and Caribbean and the relatively small amount of money that is spent preventing or treating these conditions. For example, while the U.S. and Canada spend approximately 8% of their total government budget on mental health, a number of Central American countries spend less than 0.2% of their healthcare budget on mental health. Private employers and insurance companies therefore play an important role in helping to fill these gaps in awareness of MNS disorders and proper treatment





## COVID-19 and Mental Health

The COVID-19 Pandemic significantly increased the rates of mental health disorders, both among healthcare providers as well as the population as a whole. Rates of mental health disorders in Latin American and Caribbean countries during the COVID-19 pandemic increased between 20%-40% – some of the highest increases in the world!

## Workplace Mental Health Programs

Employers play an important role in attacking this silent epidemic of mental and other MNS disorders. Workplaces can be an ideal site for supportive prevention and care programs related to mental health. The “4 A’s” are a helpful framework for establishing a mental health-friendly workplace.

## The 4 A’s of a Mental Health-Friendly Workplace



# Caring for Your Own Mental Health

Protecting your own mental health is important before you can help others. Some keys to taking care of your own mental health include:



**Taking care of your body** - through sleep, good nutrition and exercise



**Making time to unwind** - doing activities you enjoy



**Letting go** - of things you can't control



**Limiting social media** - especially sad, disturbing news



**Connecting with others** - and sharing your feelings



**Connecting your community** - both in-person and online



**Asking for help** - if you are experiencing depression or other negative feelings, especially suicidal thoughts

## Resources on Mental Health

PALIG's white paper report on Mental Health is available [here](#).

The Pan-American Health Organization (PAHO) also has a great library of resources and videos on mental health found at: <https://www.paho.org/en/topics/mental-health>.

## An Invitation to Work Together

A key to addressing mental health and other MNS disorders in our communities is to openly talk about them. It is up to all of us to break the stigma that has long been associated with mental health.

At PALIG, we invite our partners - providers, employers, brokers and members - to find innovative ways to address this silent pandemic. And we encourage our clients and members to take full advantage of the mental health benefits available through their policies. *Together we can make a difference!*



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# MENTAL HEALTH

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