



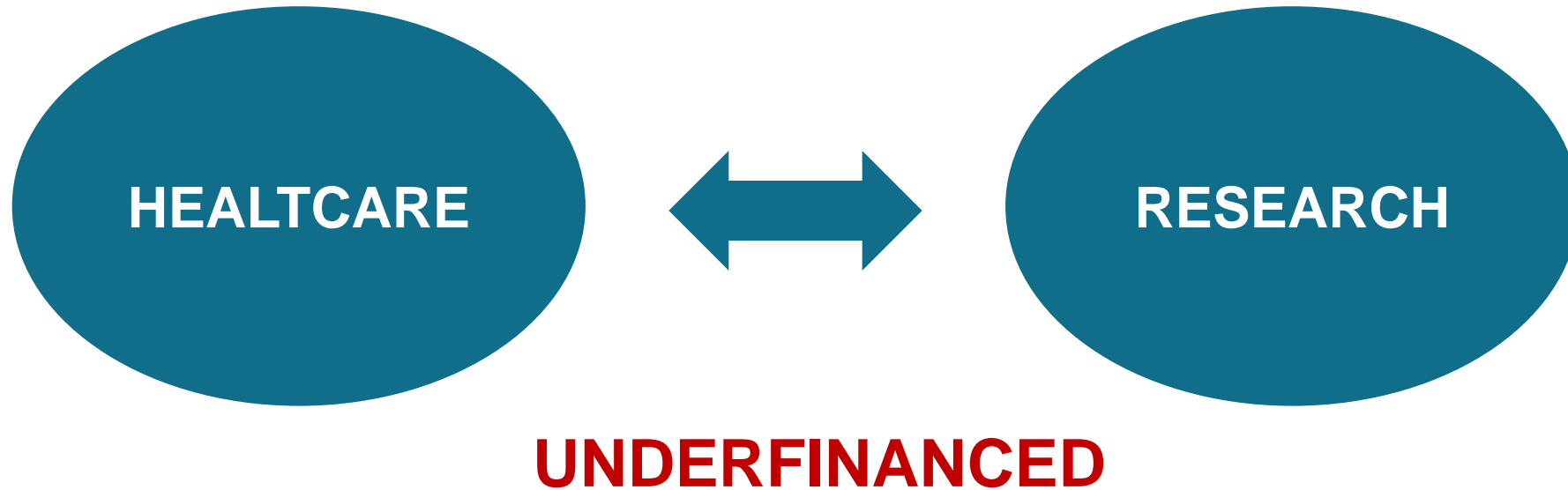
# Research in Mental Health: Bridging the Knowledge Gap

Prof. Inez Myin-Germeys  
Center for Contextual Psychiatry

Superior Health Council – 22-03-2023

# Setting the stage

Mental Health problems are prevalent -> 1 in 4 adults



# Setting the stage

A DIGITAL RESEARCH REPORT

NOVEMBER 2020

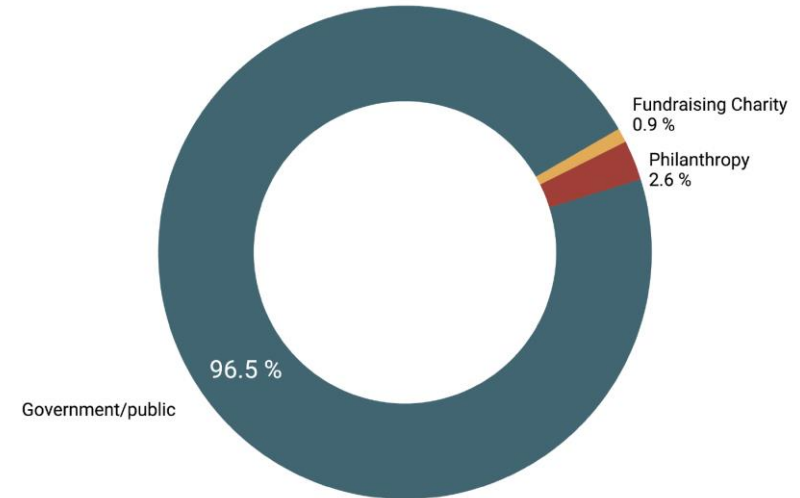
## THE INEQUITIES OF MENTAL HEALTH RESEARCH FUNDING

Eva Woelbert, Rory White,  
Kierstin Lundell-Smith,  
Jonathan Grant  
and Danielle Kemmer

International Alliance of  
Mental Health Research Funders



Figure 2: Global investments in mental health research by source of funding



## Europe



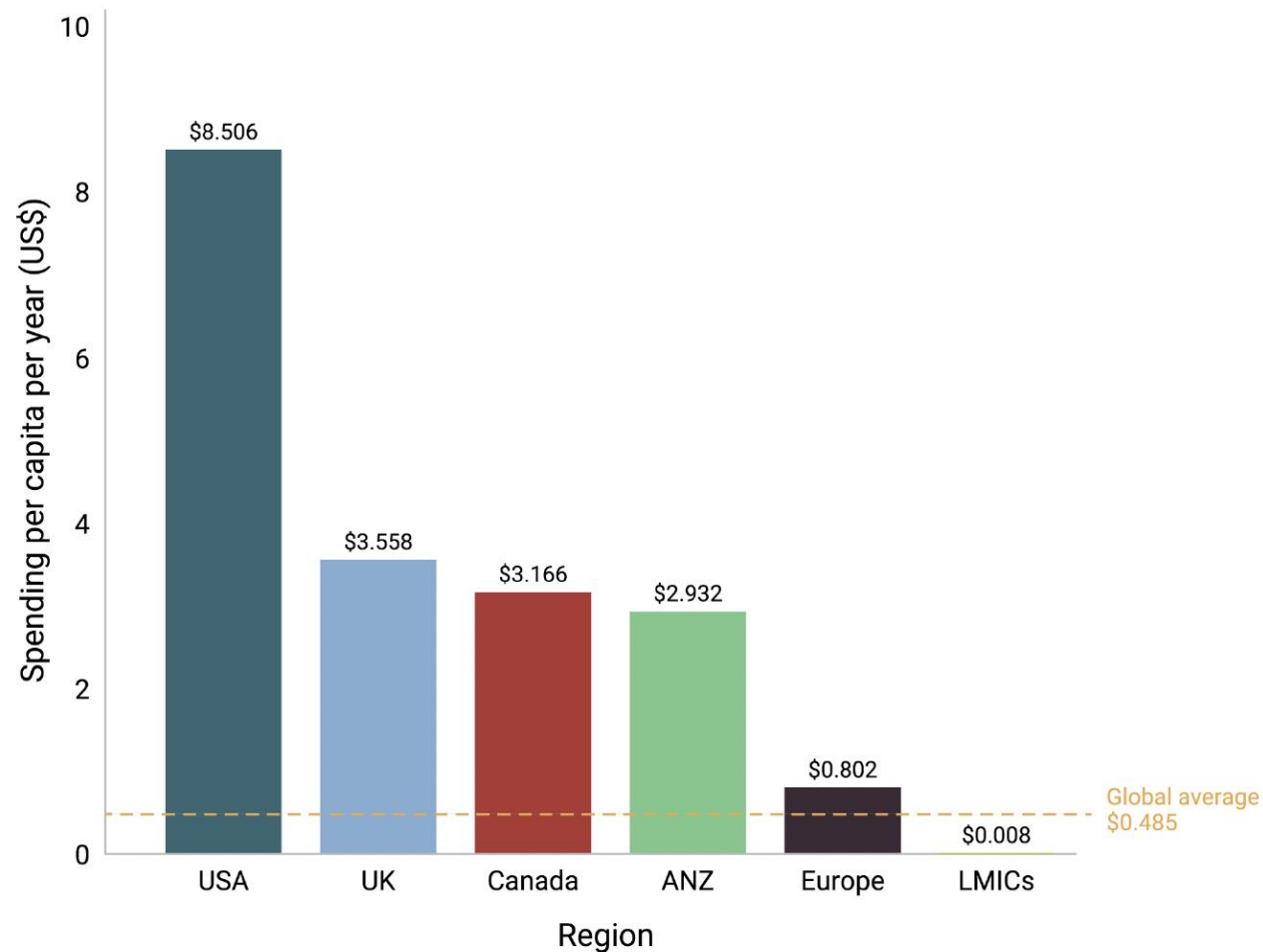
*European funding was relatively evenly spread across the top five mental health conditions*

Research spending per year :	\$368.9 million
Median grant size:	\$290,000
% awarded by government:	98
% awarded to basic research:	62
Top 2 MH conditions:	1. Depression (7.8%) 2. Autism spect. (6.8%)
Burden of mental health:	164,510,897 YLDs 50,362,464 YLLS

OVEN

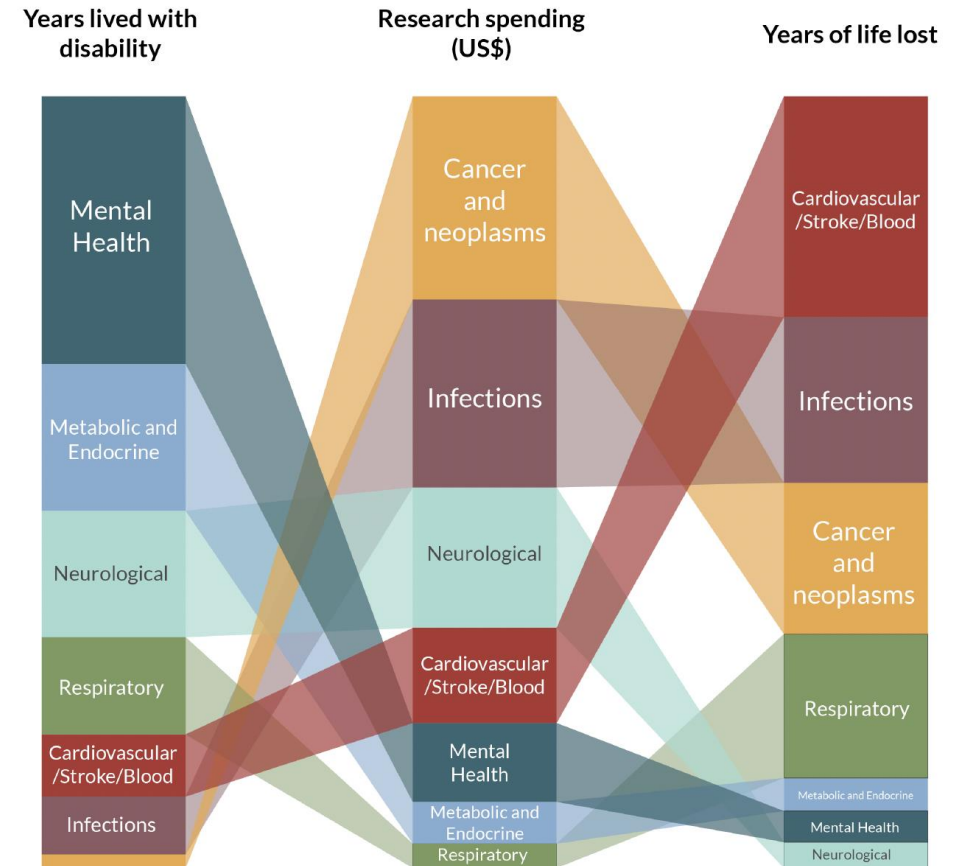
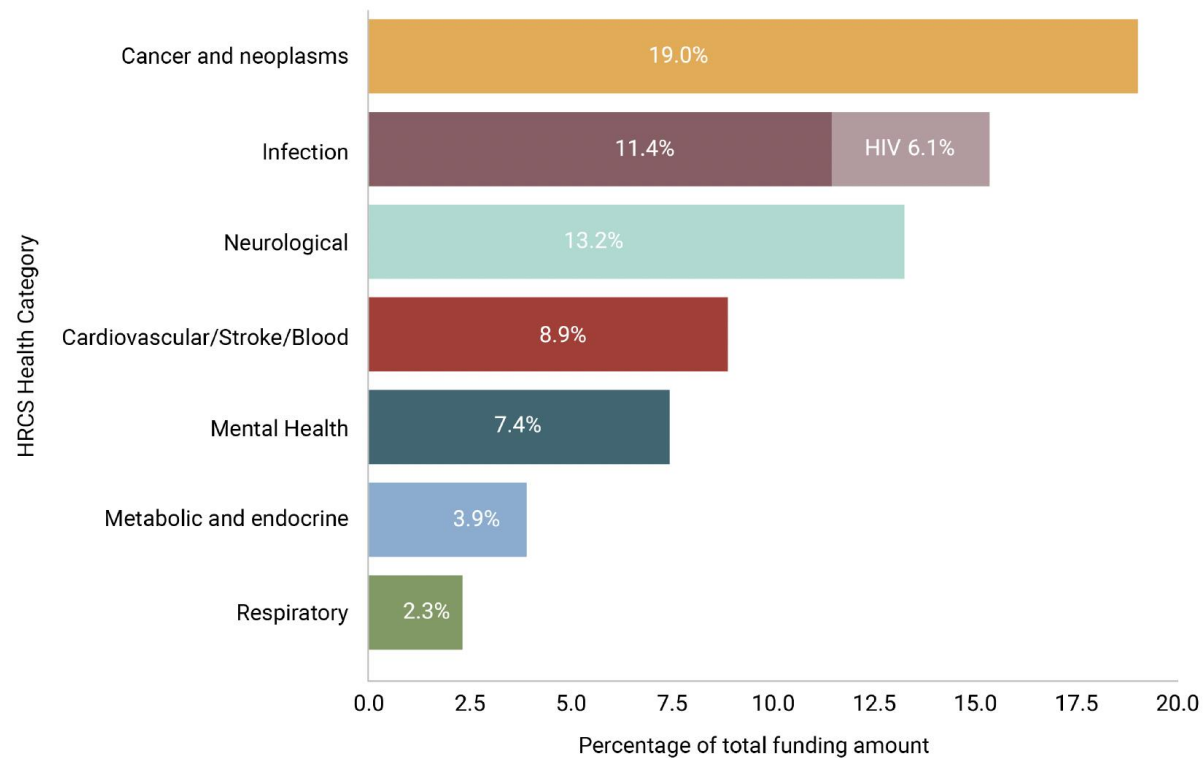
# Inequities – global distribution

Figure 5: Global investments in mental health research by region

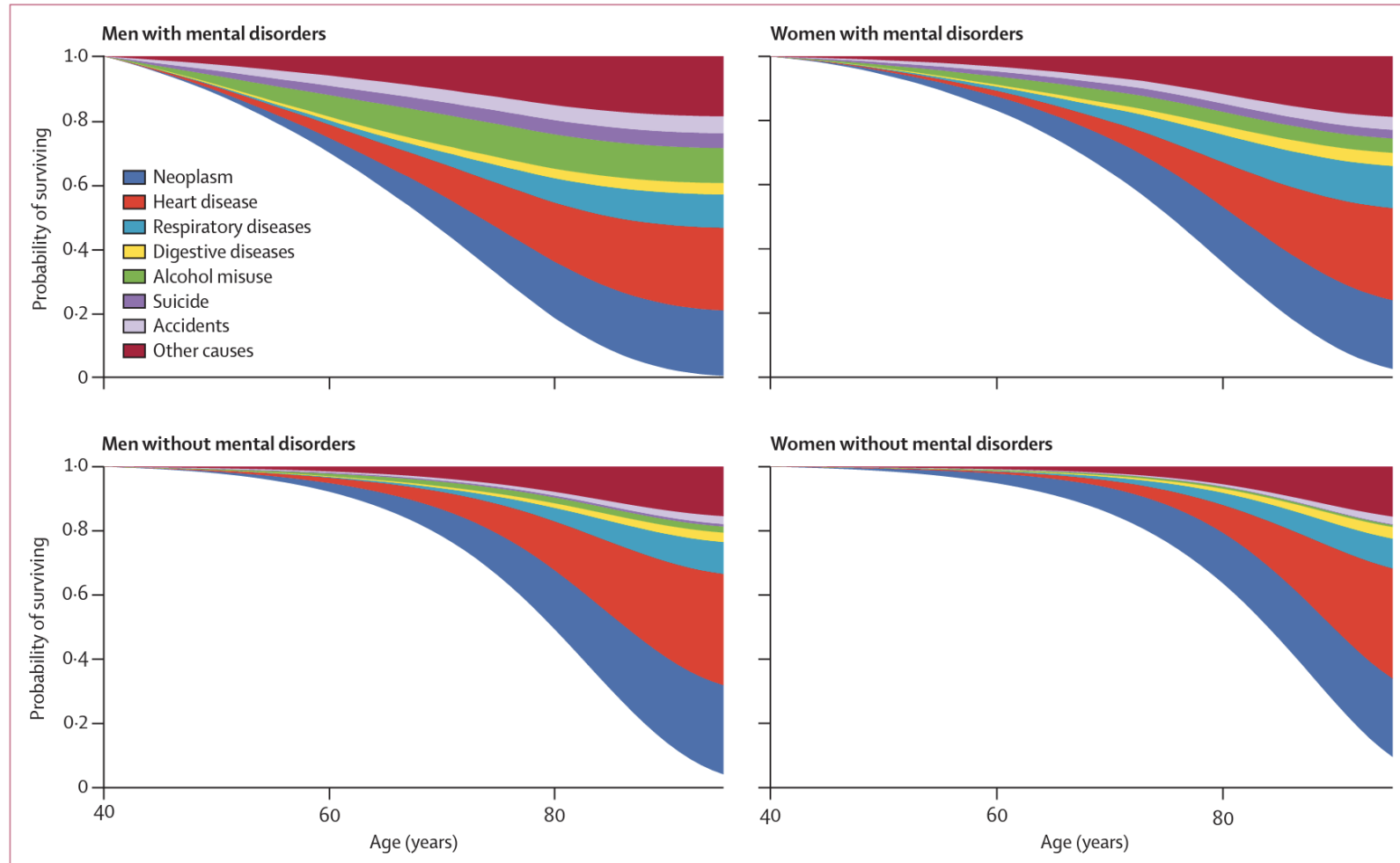


# Inequities – comparison with somatic problems

Figure 6: Global investments in mental health research compared to other diseases



# Inequities – life expectancy



# Inequities – comparison with somatic problems

Table 1: Ratio of annual research investments to *years lived with disability* (YLD) and *years of life lost* (YLL)

HRCS categories	US\$ invested per YLD	US\$ invested per YLL
Cancer and neoplasms	755	26
Neurological	56	108
Infections	161	22
Cardiovascular, blood and stroke	77	8
Mental health	15	49
Metabolic and Endocrine	14	24
Respiratory	13	3

# Inequities – situation in Belgium



## Which diseases contributed most?

**Depression (7.6%)**

Coronary heart disease (6.8%)

Lungcancer (6.6 %)

Lower Back pain (6.2%)

**Alcohol abuse (6.0%)**

## Which diseases contributed most to years of life lost?

Lungcancer (12.2 %)

Coronary heart disease (12.1 %)

Alzheimer (8.0 %)

Cerebrovascular disease (8.0%)

## Which diseases contributed most to years living with disability?

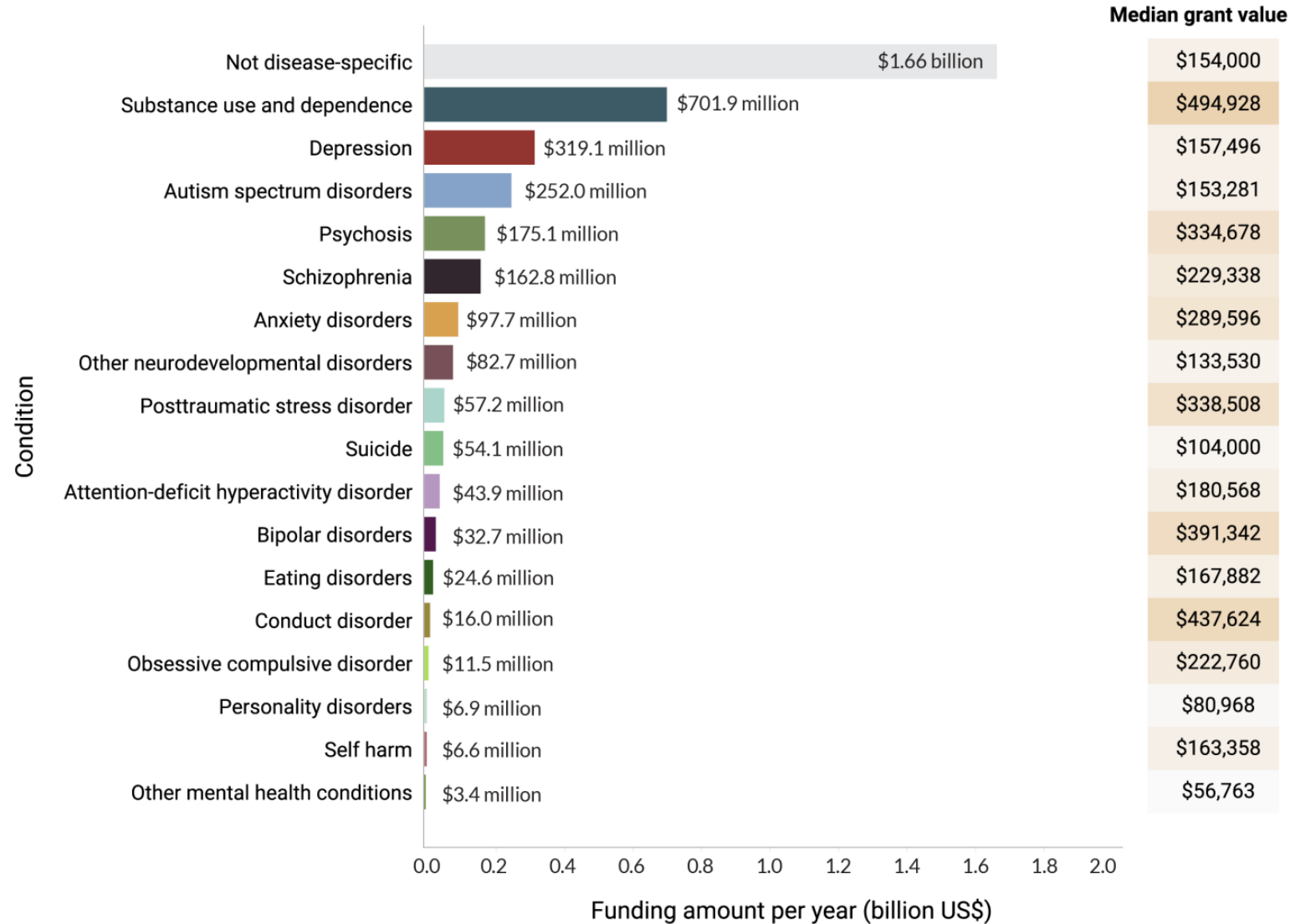
**Depression (16.1 %)**

Lower Back pain (13.2%)

**Alcohol abuse (11.1 %)**

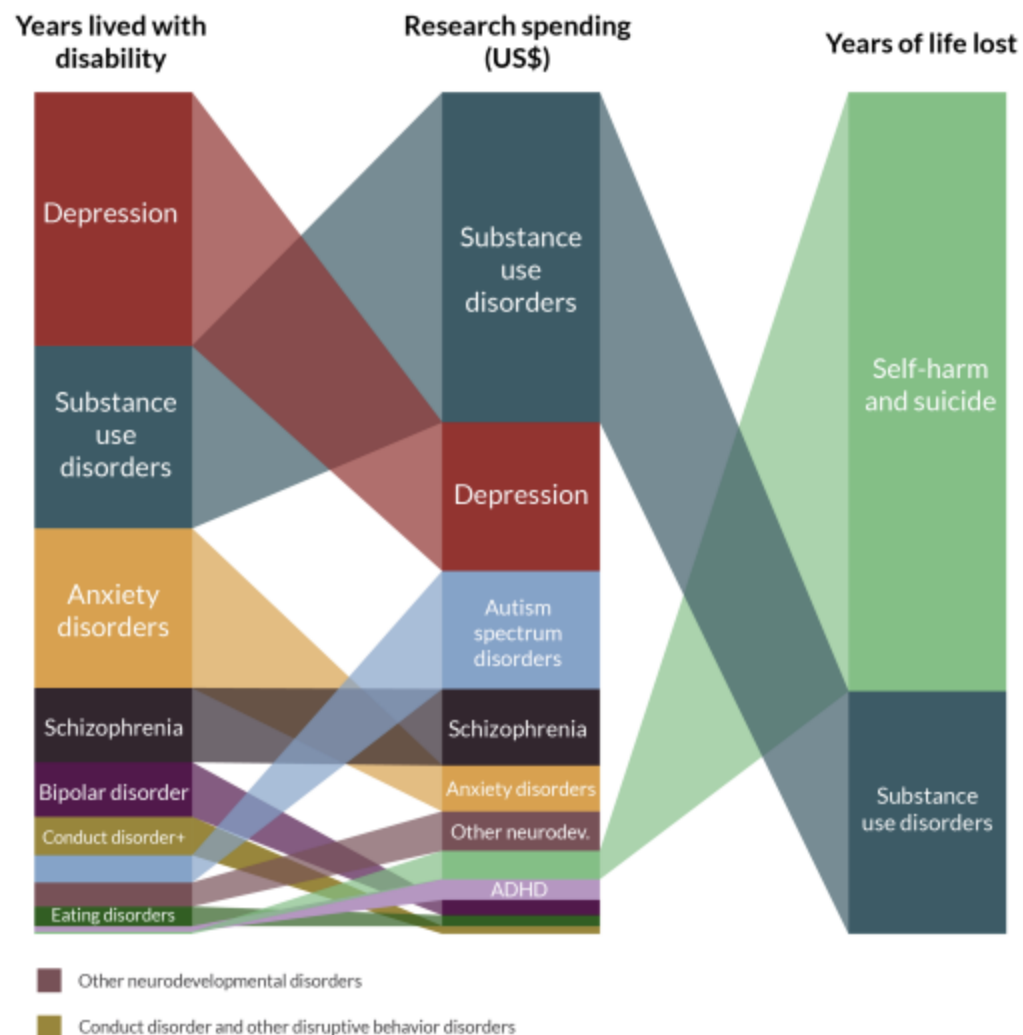


# Inequities – different mental health problems



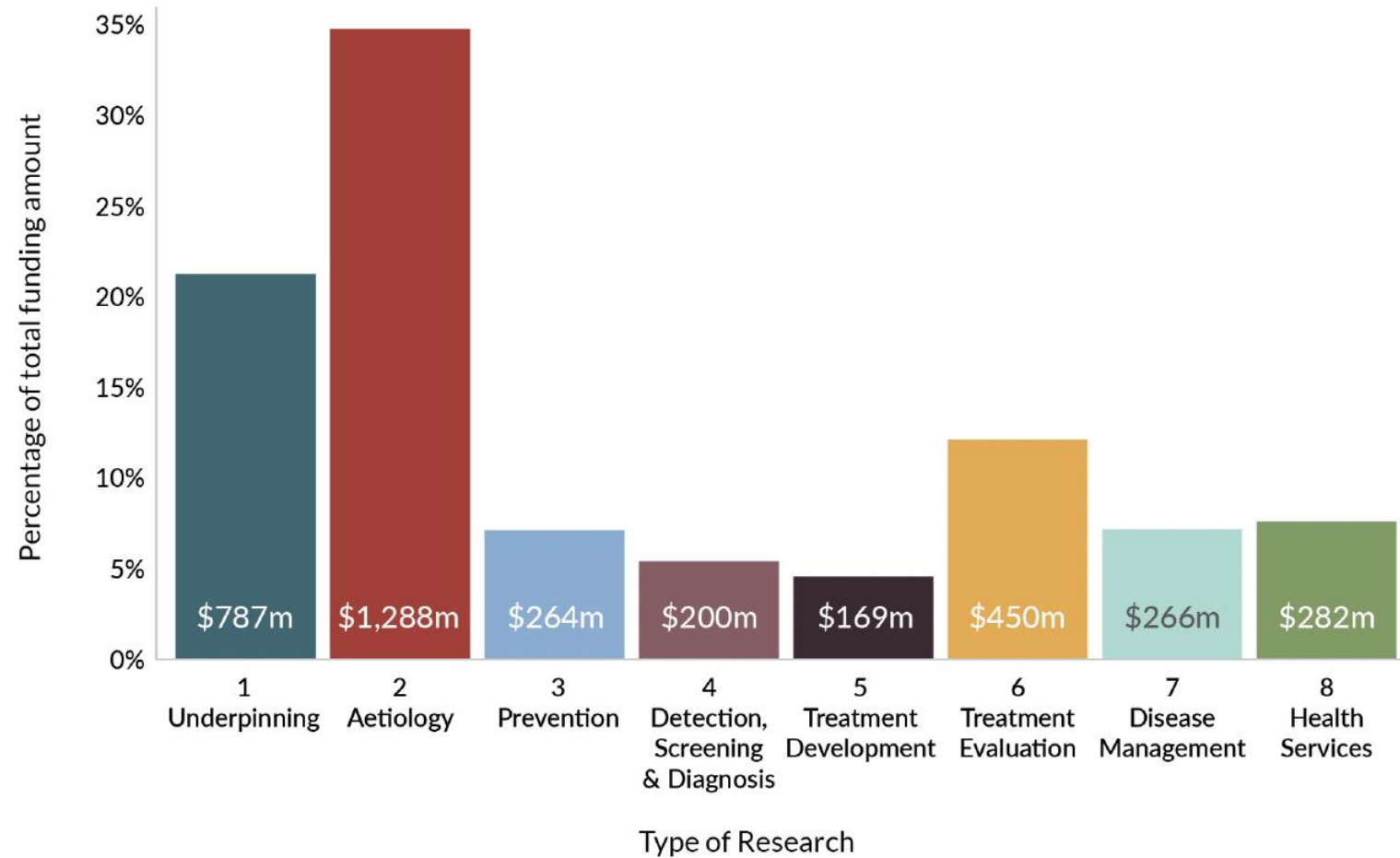
# Inequities – different mental health problems

Figure 10: Burden of disease for selected conditions compared to amount spent on research

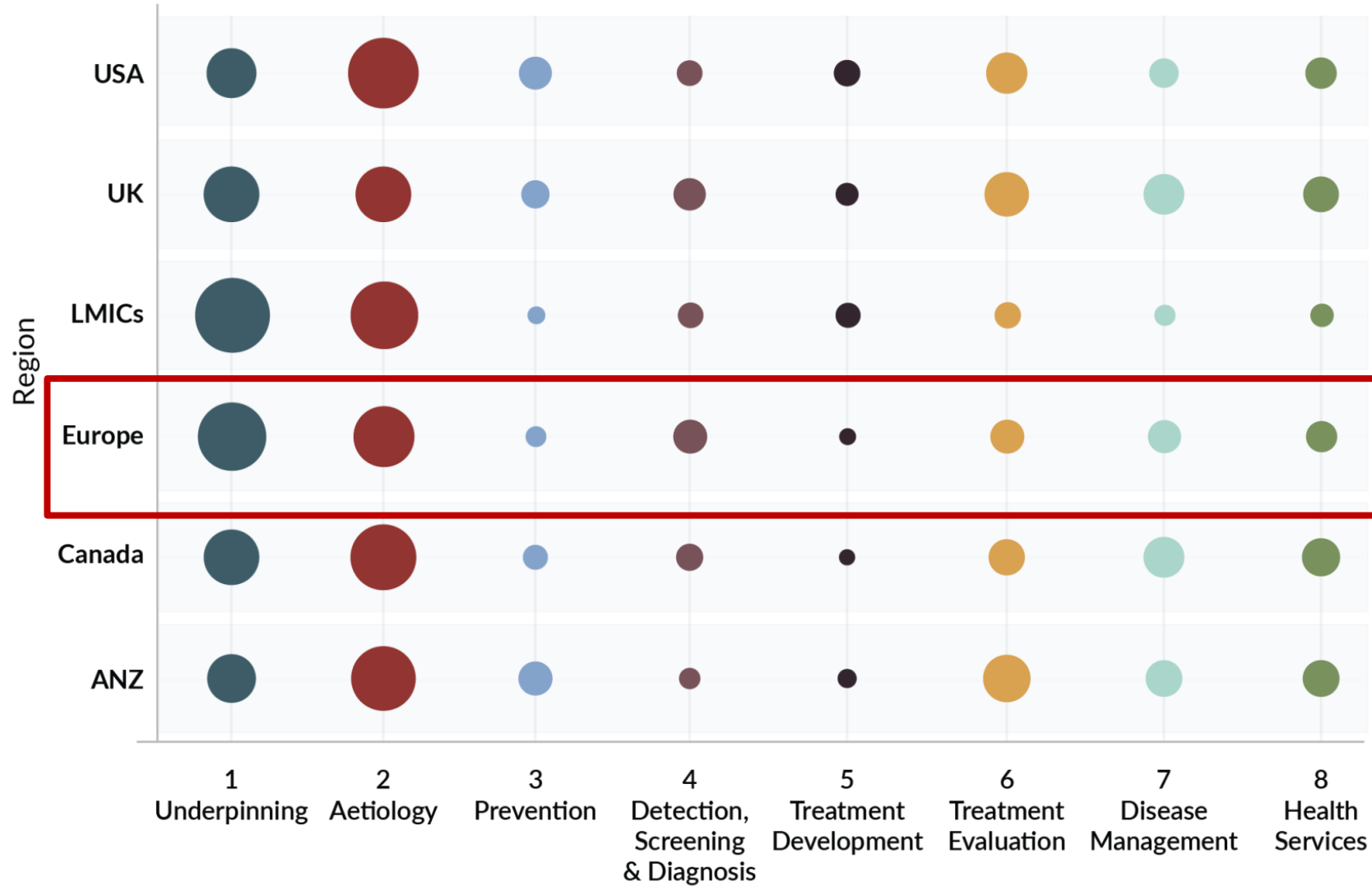


# Inequities – what kind of research?

Figure 11: Annual global investments in mental health research by Research Activity Code (RAC)



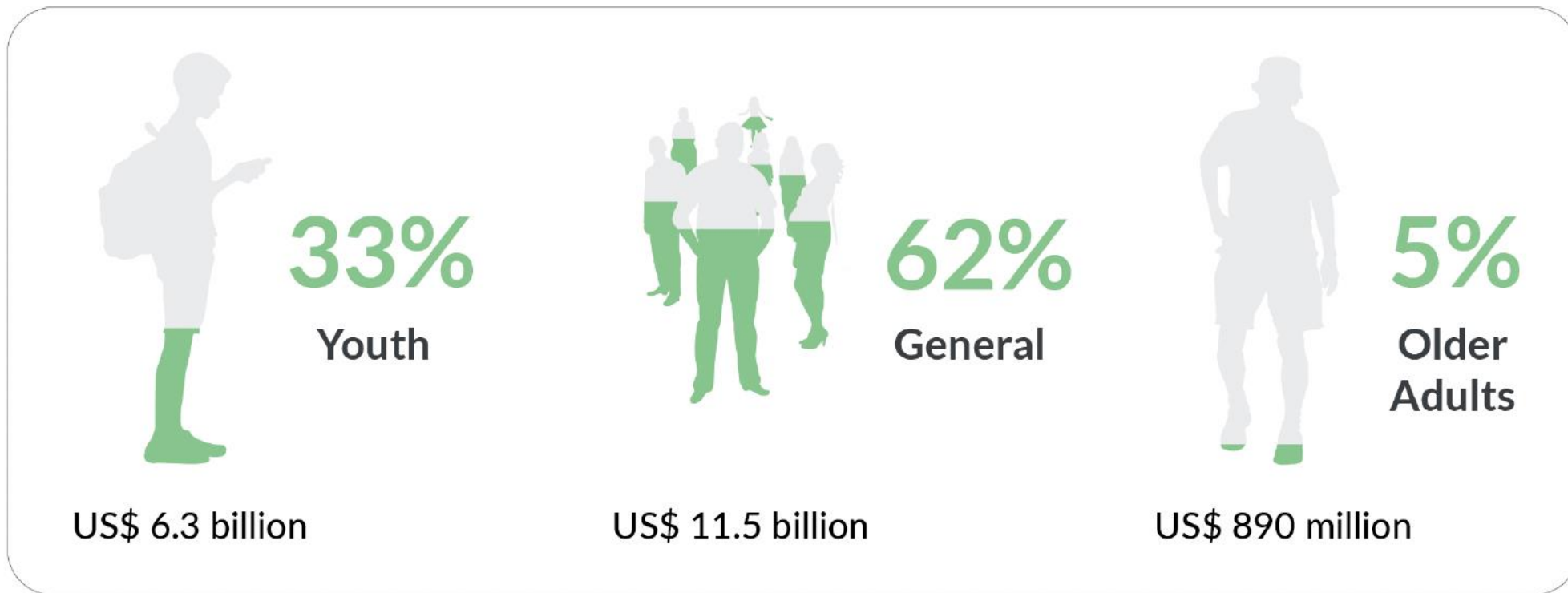
# Inequities – what kind of research?



# Inequities – basic research versus applied research

“Around 75% of all mental disorder cases manifest by the age of 24 years, often within a small frame of time between adolescence and young adulthood.”

Figure 14: Distribution of research funding by age groups



# Situation in Belgium

- Interdisciplinary
- Bottem-up approach – chicken or egg problem
- FNRS – estimated budget for Mental health in 2022 (2.2 M Euro)
- Limited funding for applied research



**How to restore historical disadvantage?**

# Examples from abroad: The Netherlands

## **New Science of Mental Disorders (024.004.016)**

**Main applicant:** Prof. dr. A.T.M. Jansen (Maastricht University)

**Co-applicants:** Prof. Dr. M. Kindt (UvA), Prof. Dr. R.W.H.J. Wiers (UvA), Prof. Dr. B.M. Elzinga (UL), Prof. Dr. A.J. Roefs (UM), Prof. Dr. A. Evers (UL)

Institution acting as official secretary: Maastricht University

**Amount awarded:** 19.3 million euros

Gravitation Programme

The Netherlands

Worldwide, one in four adults and one in ten children suffer from mental illness at any given moment. Mental illnesses cause considerable suffering, and our best treatments only work for about 40% of patients. We think that mental illnesses reflect dynamic and complex networks of interacting symptoms. The proposal is to study the complex dynamics of these networks, the transdiagnostic processes that drive the connectivity between symptoms, and the effect of network-based interventions tailored for the individual patient.



# Examples from abroad: Australia





# Action plan

- 1. Create a platform to enhance accessibility of knowledge and expertise on mental health**
- 2. Improve quality of the data in mental research**
- 3. Develop a research agenda for mental health**

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# The organizing committee



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# Supported by

