This article summarises *The Depression Report: A New Deal for Depression and Anxiety Disorders*, published in June 2006 by CEP’s Mental Health Policy group led by the Centre’s founder director Professor Lord Richard Layard. The report was circulated to all readers of *The Observer* newspaper in September 2006, with the financial support of the Charlie Waller Memorial Trust, set up to commemorate Charlie Waller who took his own life due to depression at the age of 28. The report has also received the support of the Royal College of General Practitioners and leading mental health charities – Mind, Rethink, the Mental Health Foundation and the Sainsbury Centre for Mental Health.

**in brief...**

**Tackling depression and anxiety disorders**

Crippling depression and chronic anxiety are the biggest causes of misery in Britain today. They are the great submerged problem, which shame keeps out of sight. But if you mention them, you soon discover how many families are affected. According to the respected Psychiatric Morbidity Survey, one in six of us would be diagnosed as having depression or chronic anxiety disorder, which means that one family in three is affected.

That is the bad news. The good news is that we now have evidence-based psychological therapies that can lift at least a half of those affected out of their depression or their chronic fear. These new therapies are not endless nor backward-looking treatments. They are short, forward-looking treatments that enable people to challenge their negative thinking and build on the positive side of their personalities and situations. The official guidelines from the National Institute for Clinical Excellence (NICE) say that these treatments should be available to all people with depression or anxiety disorders or schizophrenia, unless the problem is very mild or recent.

But the NICE guidelines cannot be implemented because we do not have enough therapists. In most areas, waiting lists for therapy are over nine months or there is no waiting list at all because there are no therapists. So if you go to the GP, all that can be provided is medication (plus a little counselling at some surgeries). But many people will not take medication, either because they dislike the side effects or because they want to control their own mood.

The result is tragic. Only one in four of those who suffer from depression or chronic anxiety is receiving any kind of treatment. The rest continue to suffer, even though at least half of them could be cured at a cost of no more than £750.

This is a waste of people’s lives. It is also costing a lot of money. For depression and anxiety make it difficult or impossible to work, and drive people onto incapacity benefits. We now have a million people on incapacity benefits because of mental illness – more than the total number of unemployed people receiving unemployment benefits. At one time, unemployment was our biggest social problem, but we have done a lot to reduce it. Mental illness is now the biggest problem, and we know what to do about it. It is time to use that knowledge.

But can we afford the £750 it costs to treat someone? The money that the government spends will pay for itself. For someone on incapacity benefit costs us £750 a month in extra benefits and lost taxes. If the person works just a month more as a result of the treatment, the treatment pays for itself.

So we have a massive problem – the biggest problem that one in three of our families experience. But we also have a solution that can improve the lives of millions of families, and cost the taxpayer nothing. We should implement the NICE guidelines; and most people with mental illness should be offered the choice of psychological therapy.

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