### Chapter 96

# Depression Rate, GDP Growth Rate, Health Expenditure, and Voice and Accountability: Are There Co-Movements?

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#### **ABSTRACT**

Existing studies on mental disorder reveal that, besides biological factors, major socioeconomic factors are responsible behind the ever-increasing prevalence of the part of population suffering from mental depression. The present study investigates whether depression rate has long run co-movements with growth of per capita GDP, health expenditure, and voice and accountability of the citizens for individuals as well as panels of four countries, USA, China, India, and Bangladesh, for the period 1995 to 2016. Using cointegration, error correction, and causality testing, the study observes that individual countries do not produce acceptable and robust results, but the panel data results produce long run relations among the four endogenous variables. The Wald test results show that all the two lagged values of depression rate, growth rate, health expenditure and voice and accountability are causing depression in the current period.

#### INTRODUCTION

Like some critical diseases mental disorder is also putting the world population under pressure as the number of people affected in any sort of mental illness is increasing day by day. Both the male and female sections of the society are almost equally affected by this disease (World Health Organization, 2014). Besides physiological and genetic causes, so many economic, social, political and environmental factors are getting responsible for the prevalence of the disease. From intuitive perspectives it can be said

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that increase in income makes people happy again increase in income may also cause mental disorder as because high income leads to uncontrolled lifestyle. Although a list of studies such as Murali and Oyebode (2004), Saxena et al. (2007), Jenkins et al. (2008), Lund et al. (2010) and Allen et al. (2014) reveals that poor income and unequal income distribution of countries have been one of the causes of mental depression. Globalization has mostly affected income and wellbeing of the people of a country and side by side it allows hazards of the effects of globalization like cybercrimes, internet account hacking, unlimited internet and smart phone uses, etc. Environmental pollution led to several changes in the neurological systems of human body and the ever-increasing magnitudes of pollution has been also one of the causes of mental disorder.

Good mental health is essential to human health and wellbeing. A person's mental health and many common mental disorders are formed by various social, economic, and physical environments operating at different stages of life. The occurrence and social distribution of mental disorders has been well recognized in high-income countries. While there is growing acknowledgment of the problem in low-and middle-income countries, a significant gap still exists in research to measure the problem, and in strategies, policies and programmes to avert mental disorders. There is a considerable need to raise the priority given to the deterrence of mental disorders and to the endorsement of mental health through action on the social determinants of health.

The World Health Organization describes mental health as "a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community". In this, the nonappearance of mental disorder does not necessarily mean the occurrence of good mental health. In another way to say, people living with mental disorder can also achieve good levels of wellbeing within the constraints of aching, worrying, or unbearable symptoms.

#### SURVEY OF LITERATURE

There is scanty literature on the associations between mental illness and socioeconomic factors. The present study has assembled a list of studies in the related research to justify its rationale to undertake.

Murali and Oyebode (2004) examined the direct and indirect effects of relative poverty on the development of emotional, behavioural and psychiatric problems, in the context of the growing inequality between rich and poor. They observed that children in the poorest households are three times more likely to have a mental illness than children in the best-off households. Besides, the study revealed that poverty and social disadvantage were most strongly associated with deficits in children's cognitive skills and educational achievements. The study recommended for reducing inequality both nationally and internationally to reduce the magnitude of mental illness.

Saxena et al. (2007) discussed the general availability of the resources such as mental health services, community resources, human resources, and funding, especially in low-income and middle-income countries upon mental health of people. The study mentioned that government funding is too low and inefficient to support for mental patients. The study thus observed that scarcity of available resources, inequities in their distribution, and inefficiencies in their use caused the three main obstacles to better mental health, especially in low-income and middle-income countries.

Jenkins et al. (2008) test the hypothesis that the association between low income and mental disorder is mediated by debt and its attendant financial hardship in a cross-sectional nationally representative

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