»Help to people, knowledge to experts - MOČ«

Key results and findings of the project and guidelines for the design of measures in the field of public mental health

Foreword

Mental health is one of the most important public health topics. On the other hand, mental disorders are not just a burden for individuals and their families but they represent a loss and burden for economic, social and educational systems. According to some data, 38.2 %, which is 164.8 million of European population (including Iceland, Norway and Switzerland) suffered from mental disorders. The most frequent were anxiety disorders (14 %), insomnia (7 %) and great depression (6.8 %) (Witchen et al., 2011). Due to great prevalence of mental health problems, this field is becoming more and more relevant on European as well as on global level. Effective measures and approaches in the field of mental health are the key for the progress of society and economic growth, for only mentally healthy individuals can develop their capabilities and deal with the stress of everyday lives and, finally, be productive at work and contribute to their community. Good mental health is inevitably connected with social and economic welfare, while ill mental health is connected with various indirect and direct economic expenses (less productivity, disability, presenteeism, absenteeism). Prince et al. (2007) assess that mental or neuropsychiatric diseases are contributing to the burden of a diseases in highest percent, which is evident from DALY – Disability Adjusted Life Years. DALY describes the inability, which is a consequence of the impact of a certain diseases to everyday functioning of an ill person. Because of the great importance of mental health for the individual and the society, there are many strategical documents, which regulate measures in the field of mental health. The most recent such document is Mental Health Action Plan 2013–2020).

In Slovenia, there are great differences in the accessibility of services in the field of mental health (Bajt et al., 2008) as well as great socioeconomic and demographic differences within individual geographical areas (Šprah et al., 2011). According to socioeconomic factors, there are different risks for the development of mental health problems in different regions (Šprah et al., 2011). Besides transitional mental distresses, which are burdening adult population in Slovenia there are two public health problems that are especially striking – depression and suicidality (Roškar et al., 2015).

The topics of mental health were the focus of researches and co-workers in MOČ project – Help to people, knowledge to experts, with main goal of improving services in the field of mental health in Slovenia.

In this publication, entitled *Key results and findings of the MOČ project,* the authors presented the main findings of the before mentioned research work. The result show, which parts of the proposed model were good and should be transferred into practice on national level, and on the other hand, which parts should be improved. Based on the main findings of the project, the publication also presents some measures for the prevention of mental disorders or the promotion of mental health. These measures could have positive impacts on public mental health in Slovenia. The stated measures are such that present short-term solutions, but they can also serve as starting points and directions for the formation of long-term solutions and policies in the field of mental health. Identified key areas in this publication are a useful guide for decision makers on various levels.

The aim of the publication

The aim of this publication is to present the main results of individual MOČ project activities. Based on the results, we wish to present key messages of project activities; some challenges from the field

of mental health in Slovenia; and design guidelines for the implementation of measures in the field of public mental health.

Thus, the publication consists of two parts. *First part* outlines individual work packages and key findings of each work package. *Second part* presents proposals (which are based on results of foreign studies and MOČ project results) of guidelines for measures on different levels and their combined effects what could contribute to maintaining or improving public mental health in Slovenia.

The publication is intended for all who work in the field of mental health and all who are cooperating in designing measures, programmes and policies in the field of mental health.

Abstract of MOČ project key findings

Based on the findings of media analysis (WP2), we conclude that media are interested in reporting about mental health topics. The contributions, which were published on the project topics, were mostly prone to mental health topics. Most articles were published in printed media. However, reporting on these topics is not always optimal – preventive aspect could be stressed more, and in more than half cases, inappropriate visual material was used. Results of the evaluation of media releases show that the proneness to mental health topics was mainly a consequence of proactive cooperation with the media. Thus, in the future, it would make sense to deepen the cooperation between media professionals and professionals from the field of public health in order to reach responsible reporting on mental health topics (various mental disorders, alcohol consumption, etc.).

Results of the analysis of educational programme on the topics of mental health and suicidality (WP3) show, that health professionals on primary level, as well as other experts who come in contact with at-risk populations (police officers, employees at social work centres) assessed working procedures with depressed individuals and persons with suicidal leanings as difficult. On the other hand, they described their competences for work in this field as medium. Therefore, they are fond of education on the above-mentioned and other topics from the field of mental health. Especially striking is the need or desire for additional educational programmes, which would capture the topics from the following categories: "neurotic, stress and somatoform disorders", "mood disorders", "schizophrenia, schizotypal and delusional disorders", and "intentional self-harm". Experts (less on primary level) expressed a need and desire for programmes, which would enable them to work on their own mental health strengthening or enable them to work on themselves. This is consistent with the findings of our project, because there was great interest and cooperation in our programme for strengthening own mental health, which was based on mindfulness. In the future it would make sense to repeat such educational programmes every few years, modify them for individual target groups (according to different needs) and especially, besides educational programmes, enable the implementation of programmes for strengthening own mental health.

The services, established in the framework of the work package dealing with counselling services for persons in transitional mental distress (WP4), achieved expected results. As expected, it became obvious that the need for counselling services is great; however, there are some differences in the demand among individual statistical regions. The demand for counselling services was the highest in Osrednjeslovenska, Gorenjska, Savinjska and Goriška region, where the counselling service was newly established. Less interest for the use of counselling services was monitored in Koroška, Pomurska, Spodnjeposavska and Notranjekraška region – in all these regions, counselling services were newly established, while, on the other hand, these are the regions (with the exception of Notranjekraška region) with poorest indicators of mental health and probably with highest presence of stigma.

Additional services (groups for divorced, grieving people and parents) were offered in counselling services, which existed prior to project start, were well received. In the future, it would make sense to support, develop and maintain the existing network of psychological counselling services because of the advantages these services offer to people (easier access, service without referral, without health insurance card, etc.). It would also make sense to clearly determine the networks operational status (target groups, financing, etc.) and especially distribute its individual services in way that would reduce the inequalities in accessibility in accordance with public health doctrine. At the same time, it is needed to research the poorer attendance in at-risk regions and make efforts to reduce the stigma of psychological aid in these regions. Psychological counselling services should get more targeted, strategical and media support in regions with poorer attendance. The counselling service network should be connected with existing mental health programmes in the framework of public health network but, in a way that would maintain its advantages.

Based on the results, which we attained with the evaluation of activities in the field of raising awareness (WP5), we conclude that people are very fond of media activities and public awareness campaigns, which are oriented in metal health topics. Public awareness campaign and its materials (TV video, posters on public surfaces, brochures) were more noticed in north-eastern part of Slovenia, where mental health indicators are poorer. Different elements of the campaign were noticed differently by different target groups (brochures were interesting for women, unemployed and older adults; posters were more interesting for younger population and men; while video was more noticed by men, older adults and unemployed). This proves the fact that in the future mental health topics should be communicated in different ways for different target groups. Evaluation results show that more than half of respondents were already in mental distress; however only one fifth of the sought for help. Those were mainly unemployed and women. In the future, it would make sense to research this gap – it could be caused by stigma, inaccessibility of help, not knowing the sources of help, etc. if the reasons for the gap were known, there would be possibilities to develop measures in the field of public mental health in Slovenia. Lectures, which were carried out for general public as part of public awareness campaign, were widely accepted.

Based on the key results, Table 1 shows the selection of proposed guidelines, which can serve as a basis for the formation of measures on different levels and work with different target groups.

Table 1. Selection of proposed guidelines

Guidelines for working with media (informing and raising awareness on mental health topics)	- Designing recommendations (guidelines) for critical and responsible reporting on the topics of mental health (preventive aspect, de-stigmatization, etc.). - Sensibilisation of media professional for mental health topics and their orientation to following the principles of ethical reporting on mental health topics. - Continued evaluation of the success of using guidelines and analysis of causes for their use/non-use.
Guidelines for the implementation of educational programmes in the field of mental health and suicidality for various profile experts	- Continued implementation of educational programmes in the field of mental health (including suicidal behaviour) for various profile experts who

	work with at-risk population.
	- Encouraging networking of various profile experts, who have participated in educational programmes with similar contents with the aim of experience exchange.
	- Regular evaluation of programme progress and upgrading of educational programmes.
	- Needs analysis for additional educations (from different field of mental health) among various profile experts.
Guidelines for the implementation of programmes for strengthening own mental health of experts	- Ensuring continued implementation of programmes for strengthening mental health of the experts working with at-risk population.
	- Special concern for mental health of those experts who are at the beginning of the professional path (mentorship, regular or additional supervisions, etc.).
	- Sensibilisation of various profile experts regarding the problem of mental health and suicidality within own professional circles.
	- Striving for the establishment of supervisions/interversions in institutions where such support does not exist yet (or even inter-institutional supervisions – among experts of the same profiles/with similar tasks.
Guidelines regarding counselling services for adults in transitional mental distress	- Reducing inequalities regarding the accessibility of counselling services among individual regions – equal distribution of counselling services.
	- Ensuring equal possibilities for accessing counselling services for all target groups.
	- Promotion of counselling services in all regions, especially in regions with poorer mental health indicators and targeted de-stigmatization of psychological help.
	- Targeted promotion of counselling services among vulnerable and marginalized groups (the poor, less educated, etc.).
	- Ensuring sustainable operation of the network of

	counselling services.
	- Networking and supplementing the network of counselling services and counselling services (offered by nongovernmental sector) with counselling services or mental health programmes in the framework of public health services.
Guidelines for public awareness campaigns on mental health topics	- Planned, targeted and systematic public awareness raising (based on theoretical grounds) on mental health topics – de-stigmatization of mental disorders, prevention in the field of mental disorders and mental health promotion.
	- Public awareness activities should be modified in sense of methods, contents as well as the communication channel, in order to reach different target groups.
	- More stress on public awareness should be in the regions with poorer mental health indicators.
	- Progress from informing/raising awareness *"about"* the mental health topics to *"factors"* that influence the relationship towards mental health and seeking help.
	- Continued evaluation of public awareness campaigns.

Guidelines and recommendation listed in Table 1 should be understood as a whole, because simultaneous implementation of multiple preventive and promotional measures in the field of mental health leads to synergistic effects, which is more likely to lead to expected result (improved mental health of the population, decline of suicidal quotient, reduction of stigma among the population, etc.) than the implementation of individual activities (Mann et al., 2005; van der Feltz et al., 2011; Hegerl et al., 2008)

The contents addressed by the MOČ project and these guidelines are in accordance with the Proposal of the Resolution on the National Mental Health Programme 2004 – 2018 and some international documents from the field of mental health.

In accordance with the **Proposal of the Resolution on the National Mental Health Programme 2004–2018,** we have prepared the contents of the project and the correspondent guidelines by following some basic principles and foundations of the resolution, such as:

- constant education of expert workers (in accordance with guidelines regarding educational programmes for experts),

- updating forms of mental health protection and promotion (in accordance with guidelines regarding public awareness raising),

- decentralizations and accessibility of services working in the field of mental health (in accordance with guidelines regarding counselling services for people in transitional mental distress),

- de-stigmatization and inclusion of persons with mental health problems (in accordance with guidelines regarding public awareness raising),

- mental disorders prevention, suicide prevention and fight against stigma (in accordance with guidelines regarding public awareness raising),

- improvement of accessibility of mental health services and reducing inequalities among regions (in accordance with guidelines regarding counselling services for people in transitional mental distress),

- improving cooperation with nongovernmental organizations (in accordance with guidelines regarding counselling services for people in transitional mental distress),

- alignment of needs and resources, cost-effectiveness and evidence-based measures,

- interdisciplinary and intersectoral cooperation on policy, legislation and service levels.

In accordance with **European Pact for Mental Health and Well-being** from 2008 (and previous documents – Green Paper Improving Mental Health of the Population; Mental Health Declaration and Action Plan for Europe, 2005), we have followed its main guidelines in the contents of the project and the correspondent guidelines:

- suicide and depression prevention in health experts and other key actors within social sector (in accordance with guidelines regarding educational programme for experts);

- mental health in working environment; to introduce mental health and well-being programmes, prevention programmes for stress, violent behaviour, psychoactive substance use prevention, early interventions (partially in accordance with guidelines regarding educational programmes for experts).

Finally, we have prepared the contents of the project and the corresponding guidelines in accordance with main objectives of the **Mental Health Action Plan 2013–2020:**

- ensure and provide proper integrated care in the field of mental health and social services in local communities (partially in accordance with guidelines regarding counselling services for people in transitional mental distress);

- implement strategies for mental health promotion and mental disorders prevention (partially in accordance with guidelines regarding public awareness raising);

- strengthen informational systems in the field of mental health (data collection), research and evidence-based data (partially in accordance with guidelines regarding working with the media; in accordance with guidelines regarding educational programmes for experts);

- propose and strengthen mental health topics in political agenda of all countries.