Mental Health Promotion – Mental Disorder Prevention
European Action Plan

Imhpa Project¹

(Draft Paper in progress)

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Background

Mental and behavioural disorders are found in people of all ages, regions, countries and societies (WHO, 2001), being present at any point in time in 10% of the adult population. More than one in four of us will develop one or more mental or behavioural disorders during our lives. It is estimated that, by the year 2020, mental ill health will account for 15% of the burden of disease worldwide (Murray & Lopez, 1996; WHO, 2002). In the European Union many of the important causes of morbidity range from mild forms of depression through to complex psychiatric disorders (European Commission, 2003). Between 15% and 20% of adults and between 17% and 22% of teenagers under the age of 18 years suffer some form of mental health problem (European Commission, 2003).

In addition to the health burden, the social and economic costs of mental ill health for societies are wide ranging, long lasting and enormous. Besides the health and social service costs, lost employment and reduced productivity, the impact on families and caregivers, levels of crime and public safety, and the negative impact of premature mortality, there are many other immeasurable costs, such as lost opportunity costs to individuals and families that have not been taken into account.

Mental health promotion and mental disorder prevention are effective and can lead to health, social and economic gain (Durlak, 1995; Mrazek et al., 1994; Price et al., 1992; Price et al., 1988; Albee et al., 1997; Hosman, et al., 1999; Hosman et al., in press). Topic-specific literature overviews have confirmed that prevention is effective for mental health problems including child abuse (MacMillan, MacMillan, Offord, & Griffith, 1994a; MacMillan, MacMillan, Offord, & Griffith, 1994b), conduct disorder (Reid, Eddy, Fetrow, & Stoolmiller, 1999), violence and aggression (Yoshikawa, 1994), depression (Muñoz, 1993; Muñoz, Ying, Perez-Stable, & Miranda, 1993; Gillham et al., 2000), substance use (Gilvarry, 2000), and in different settings, including schools (Greenberg et al., 2001). Similarly meta-analyses have been

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undertaken to assess programme efficacy in the fields of harmful drug use for children and adolescents (Tobler, 1992; Tobler, Lessard, Marshall, Ochshorn, & Roona, 1999; Tobler et al., 1997), mental health for children (Durlak et al., 1997; Durlak & Wells, 1998), interventions for infants and children up to 6 years of age (Brown et al., 2000), programmes to prevent child sexual abuse (Davis & Gidycz, 2000) and programmes to prevent depression (Jané-Llopis et al., 2003).

However, in spite of their efficacy, in general, countries and regions do not have prevention and promotion programmes in place. Nor have they developed policy action plans to make the available programmes sustained. It is imperative that if we are to improve peoples' mental health and to prevent the onset of new cases of mental disorders, countries, their governments and the European Commission will have to develop a policy action plan to tackle this growing public health problem.

Goals

To provide an overview of the situation of mental health promotion and mental disorder prevention programmes and structures across European Member States and accession countries, and to provide a European Policy Action Plan on mental health promotion and the prevention of mental disorders.

The Country Profiles

In order to develop a policy action plan there is a need to have an insight on the existing policies, programmes and infrastructures for mental health promotion and mental disorder prevention that are available across the European Member States and the countries in accession.

To these ends, it is proposed to develop a questionnaire to assess the policy, infrastructural, research and health care system resources and interventions that are in place across participating countries in this project. Input from the country profile questionnaires can be depicted in a country profiles report and used to inform the policy action plan.

The Policy Action Plan

It is proposed that the policy action plan has two components: a technical report that covers the situation across the European Member States and countries in accession, providing an overview on the policies and strategies that could be adopted to improve mental health; and a shorter summary version of the Policy Action Plan targeted at policy makers, politicians and European parliamentarians.

It is proposed that the Policy Action Plan is composed of 3 sections with the following table of contents:

TABLE of CONTENTS

1. Summary
2. Introduction

Section I

3. Terms and definitions
4. The burden of mental ill health
5. Effectiveness of prevention and promotion in mental health
6. The existing situation in European Member States and accession countries and at the European level, including summaries of the country profiles

Section II

7. Governmental polices and programmes at the European, country and regional levels that impact on mental health promotion and mental disorder prevention, including fiscal, educational and employment policies
8. Policies and programmes at the community level and in different settings:
   - In the community as a whole
   - Home-based approach
   - School settings
   - Work places
   - During and after retirement
9. Policies and programmes directed at particular risk groups and risk situations throughout the lifespan, commonly delivered though health and social welfare services, including pregnancy and child care, socio-disadvantaged groups and the prevention of a range of emotional and mental health problems seen in primary health care.

Section III

10. Barriers and facilitators for the implementation of the policy action plan
11. An integrative approach to policy action plan
12. The way forward
13. What is needed to make it happen: Conclusions

Tasks for the task force
- Feedback on the country profiles questionnaire
- Feedback on the structure of the policy action plan
- Discussion on the proposed content
- Division of parts/chapters of the Policy Action Plan among partners
- Feedback on a revised version of the Country Profiles Questionnaire
Time line
Ph1: September 2003 – August 2004: Development of the action plan
Ph2: September 2004 – December 2004: Strategies for country implementation
Ph3: January – March 2005: Evaluation and report on future steps

Phase 1: Development of Action Plan

1. First draft of content and structure of Action Plan
   a. Decision on content
   b. Finalisation of background paper to present to task force

2. Meeting with task force
   a. Presentation of goals of task force
   b. Discussion of presented draft of the table of contents
   c. Discussion on the country profiles questionnaires
   d. Final decisions on critical issues
   e. Task division and time line
   f. Adoption and adaptation to different situations across European countries
   g. Dissemination plan

3. Development of the Action Plan
   a. Development of different sections of Imhpa Action Plan
   b. Development of feedback for the second version of Country Profiles
   c. Feedback within task force
   d. E-mail/telephone contact with partners and inclusion of their prepared products

4. Imhpa meeting with consultant group (December 2003)
   a. Exposure of the Action Plan content and Country Profiles second version

5. Revision of the Action Plan based on feedback
   a. Contact with partners
   b. Development or continuation of second draft

6. Imhpa meeting with consultant group (March 2004)
   a. Exposure of the Action Plan and Country Profiles second draft for feedback
   b. Finalisation of Action Plan
   c. Finalisation of Country Profiles
   d. Development of summary policy report

7. Imhpa meeting task force (May 2004)
   a. Discussion of Action Plan, Country Profiles and summary policy report
   b. Presentation of the three products to all Imhpa partners for endorsement (sent in advance)
   c. Agreement on final changes

**Phase 2: Strategies to implement the Action Plan across European Countries**

(Phase to be further developed)

1. Development of the implementation plan
2. Possible country visits
3. Country based implementation meetings

**Phase 3: Evaluation and report**

1. Report on implementation strategy

**Products**

Products related with the action plan task force will include:

1. Report on European Action Plan for the Promotion of Mental Health and the Prevention of Mental Disorders
2. Summarized version of the report targeted to political audiences
3. Country Profiles questionnaire to assess the situation of promotion and prevention across Member States and accession countries
4. Country profiles report
Bibliography


