Public Health Action Framework on Mental Health

MESSAGES

There is no health without mental health! Mental health must be regarded as an indivisible part of public health.

Mental health problems cause a heavy and increasing burden that contributes to high costs to our societies, long-lasting disability, increased mortality and enormous human suffering. Moreover, some mental health problems, such as depression, are becoming increasingly common.

Action for mental health entails action to promote positive mental health as well as action to tackle mental health problems.

Effective evidence-based measures are available to promote mental health as well as to prevent and treat mental health problems.

Each Member State should develop its own mental health strategy as an integral part of a comprehensive public health policy taking into account the social and cultural circumstances. Mental health should be considered in all policies and across all levels and sectors.

Substantial added value is to be gained in the field of promotion of mental health by tightening co-operation between Member States, Applicant Countries as well as with the rest of Europe and within a more global context.

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FOREWORD

Action on mental health in the European context is important because of the vital contribution made by mental health to the well-being of nations, and to their social, human and economic capital. Thanks to recent European developments, including the Amsterdam Treaty, the Council resolution on the promotion of mental health, and the new Public Health Framework, such action is now possible. This report, *Public Health Action Framework on Mental Health* is the response to a request by the European Commission to set out the main elements of the public health action.[1]

The report was prepared as an outcome of the project on *Putting Mental Health on the European Agenda*, which was financially supported by the European Commission from the programme of Community action on health promotion, information, education and training, within the framework for action in the field of public health (1996–2000). The project was co-ordinated by the Finnish Ministry of Social Affairs and Health and the National Research and Development Centre for Welfare and Health (STAKES) 1998–2000. I should like to take this opportunity to sincerely thank all those from all organisations who were involved in the project.

The other principal outcome of the project was the high-level (EU Presidency) European Conference on Promotion of Mental Health and Social Inclusion (held in Tampere, Finland, in October 1999). It was this conference that resulted in the Council resolution on the promotion of mental health (18 November 1999) mentioned above. The agendas of subsequent EU Presidencies (Portugal, France, and Sweden) have also given prominence to mental health. I warmly thank all members of the boards and committees who participated in the planning and implementation of this event and thus contributed to its success.

The project has been steered and supported overall by the European Network on Mental Health Policy (ENMHPO), who also prepared this report. The participation of the network has provided considerable added value at European level and the inestimable work and support of this network is gratefully acknowledged.

The intended audience of the report, as commissioned by the EC, consists of officials of the European Commission and the Council of the European Union, members of the European Parliament, representatives of national governments of the EU Member States and Candidate Countries, and any other interested organisations and individuals.

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[1] A report entitled *Public Health Approach on Mental Health in Europe* includes the present report and a report called *Mental Health Matters: Relevant Background Information*.

EXECUTIVE SUMMARY

INTRODUCTION

This report strongly advocates the need to shift the focus of mental health:

First, as a major contributor to health and well-being, mental health needs to be brought out from professional, organisational and political isolation into the broader sphere of public health.

Second, instead of concentrating on mental health at the level of individuals, we need to strengthen the population-level mental health approach. This is necessary to sharpen our insight into how we should integrate mental health in public health policies, strategies and programmes, and act across policies with an impact on mental health.

Third, we must shift the emphasis of our understanding of mental health, which traditionally has been associated with mental disorders. Instead of looking only at the negative side of mental health, contemporary thinking and actions must draw attention to positive mental health.

WHY SHOULD ACTION BE TAKEN?

Positive mental health is an important resource for individuals, families, communities and nations. It also enhances a person's capacity to contribute meaningfully to social networks, communities and societies. Mental health problems, in contrast, add significantly to general health expenditure and contribute to disability, mortality, loss of economic productivity, poverty and low quality of life. Thus, mental health has a conspicuous societal value in itself, and mental health problems impose a heavy burden not only on the individuals but on society as a whole.

There is mounting evidence of the availability of effective measures to promote mental health and to prevent mental ill-health, and yet, an efficient collaborative structure between the various organisations and networks currently active in the field is still lacking. It is, however, becoming increasingly obvious that transnational collaboration can help achieve mutual benefits between participants.

FRAMEWORK FOR ACTION

It is proposed that the main strategies of action on mental health should cover issues such as the development of general policies favourable for people's mental health, mental health impact assessment in societal planning and decision-making, promotion of mental health in all relevant settings, reduction of the risk factors of mental health problems, reduction of the stigma of mental ill-health, and protection

of the human rights and dignity of all citizens. In addition to these, the required actions include the delivery of appropriate services for early detection, care, treatment and rehabilitation, and for the prevention of mortality. These actions can be targeted at all levels - individuals, groups, communities and societies.

ELEMENTS OF ACTION

With regard to mental health, each Member State should draw up a strategic mental health policy that is well integrated with its overall health policies at national, regional and local levels. While each Member State has its own special needs, problems, resource constraints and challenges, all share some common areas that need to be addressed by national policy if effective use is to be made of the resources available to improve mental health.

Areas relevant to public health actions in mental health are:

- mental health in public policies (e.g. employment, education, housing, environment, equality);
- service components in health and social services (primary care, specialist services, social services, co-operation between services);
- supportive infrastructures (mental health monitoring, research and development, human resources, NGOs, service users and carers); and
- steering mechanisms (legislation, financing, exchange of information and dissemination of good practices).

CONCLUSION

Mental health is an indivisible part of public health. It is therefore of the utmost importance that mental health and its promotion should be integrated closely with all public health strategies. The value of mental health needs to be recognised throughout the European Union, and across all levels and all sectors of society. Only in this way can we ensure that we live in a caring world that understands the promotion of mental health as an explicit and implicit assumption of public and private life, and that is able to give people suffering from mental health problems the help and treatment they require to enable them to live a life of dignity in accordance with their basic human rights.

1. INTRODUCTION

Action on mental health within the European context is desirable because of the contribution of mental health to nations and their social, human and economic capital. Such action is now possible because of recent European developments, including the Amsterdam Treaty, the Council resolution on the promotion of mental health, and the new public health framework. Therefore the EC commissioned the report to set out the main elements of public health action.

There are three lines of development which will be emphasized throughout the report and their application in the European community setting will be discussed. The first and most important is bringing mental health from professional, organizational and even political isolation into the broader sphere of public health as mental health is a major contributor to health and well being. Consequently, as a second principle, a shift of emphasis is required. Instead of focusing mainly on the individual's mental health only, the population mental health approach needs to be strengthened. This is necessary to improve the understanding of how to integrate mental health in public health policies, strategies and programmes, and how to act across policies which base on impact on mental health. The third and maybe the most innovative emphasis is on how mental health is understood. Traditionally mental health is associated with mental disorders. It is suggested that instead of only looking at negative mental health, positive mental health would be included especially in the monitoring of mental health.

This report aims to set out the main elements of public health action on mental health in Europe, including establishment of practical activities to protect, promote and improve the mental health of European citizens. The report does not only relate to the requirement set out by the article 152 of the Amsterdam Treaty to achieve a high level of protection of health in all community policies, but it also relates to the role of the European Union as an increasingly important actor in relation to other countries especially those in the accession process.

The report will also discuss the relevant aspects of other public policies which have either direct or indirect influence on mental health, and which should be considered by the EU and the individual Member States. The main focus of the report is on health promotion and it does not include certain issues relevant to mental health (e.g. alcohol and drug abuse) which are dealt with in other programmes of Community action.

2. CONCEPTS OF MENTAL HEALTH

The term mental health is used in this report as a broad inclusive concept to denote both positive mental health and mental health problems[2].

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[2] Other terms, such as *mental ill-health* and *mental disturbances* refer to essentially the same as *mental health problems* and often the terms can be used interchangeably.

Positive mental health includes
- a positive sense of well-being
- individual resources including self-esteem, optimism, and sense of mastery and coherence
- the ability to initiate, develop and sustain mutually satisfying personal relationships
- the ability to cope with adversities (resilience).

These will enhance the person's capacity to contribute to family and other social networks, local community and society.

Mental health problems include
- psychological distress usually connected with various life situations, events and problems;
- common mental disorders (e.g. depression, anxiety disorders);
- severe mental disorders with disturbances in perception, beliefs, and thought processes (psychoses);
- substance abuse disorders (excess consumption and dependency on alcohol, drugs, tobacco);
- abnormal personality traits which are handicapping to the individual and/or to others; and
- progressive organic diseases of the brain (dementia).

Mental disorders are defined in the classifications of diseases by the existence of clusters of symptoms. The criteria for disorders are met when the clusters of symptoms are relatively severe, long-lasting, and accompanied by reduction of functional capacity or disability.

3. RATIONALE FOR ACTION

Urgent action within the European context is needed, because
1. Positive mental health contributes to the social, human, and economic capital of the societies
2. The burden of mental health problems is extensive
3. There are effective interventions available to enhance positive mental health and alleviate mental health problems
4. Transnational collaboration in the field holds great potential for providing Community added value.

3.1. Mental health has a remarkable societal value
- Good mental health is an important resource for individuals, families, communities, and nations;

- Mental health - as an indivisible part of public health - contributes to the functions of society and has an effect on overall productivity;
- Mental health is essential for the well-being and functioning of individuals;
- Mental health concerns everyone as it is generated in our everyday lives in homes, schools, streets, workplaces and in leisure activities;
- Mental and physical health are strongly inter-linked.

3.2. Mental health problems constitute a heavy burden

- Mental health problems are common in Europe and everywhere in the world. They add significantly to the general health expenditure and contribute to disability, mortality, loss of economic productivity, poverty and low quality of life. One sixth of the European citizens are estimated to suffer from a mental disorder at any given point of time.
- Eight of the ten leading causes of the global burden of disease are related to mental health. Depression alone accounts for 5% of the total years of life lived with a disability in Europe.
- The number of suicides is roughly similar in magnitude to deaths from road traffic accidents. Suicide is the leading cause of death in young men.
- People with mental health problems have an increased morbidity and mortality from physical illness, particularly infectious diseases, respiratory disease, cardiovascular disease and trauma.
- Mental health problems of parents have a significant effect on the emotional and intellectual development of the next generation.

3.3. Effective measures are available

There is increasing evidence of the efficacy and cost-effectiveness of interventions for mental health promotion, prevention, treatment, rehabilitation and prevention of premature mortality. However, wider implementation of these measures requires
- a comprehensive overview of available evidence-based interventions
- a more efficient collaborative structure between the many organisations and international networks currently active in the field
- a well-functioning dissemination system.

3.4. The benefits of transnational collaboration can be accomplished

- by taking into account mental health aspects in public health and other Community policies;
- by using all available means to facilitate co-operation between Member States in order to use the limited resources more effectively;
- by establishing an information system consisting of development of indicators, monitoring, and a feedback system, that provides Member States with comprehensive and comparable data on mental health;

- by disseminating good practices while respecting local conditions, cultural norms and differences; and
- by stimulating co-operation with countries in the accession process.

It is a basic community responsibility to foster mental health to the same extent as physical health, based on the claim that "*there is no health without mental health.*" This was emphasized in the Council resolution of 18 November of 1999 on the promotion of mental health.[3]

4. MAIN STRATEGIES

The main strategies of action on mental health should cover the following issues:

- development of general policies which are favourable for people's mental health;
- systematic mental health impact assessment as part of general health impact assessment in societal planning and decision-making;
- promotion of mental health in all relevant settings;
- reduction of the risk factors of mental disorders;
- improvement of the health and social functioning of people with mental disorders;
- delivery of appropriate services for early detection, care, treatment and rehabilitation;
- reduction of the premature mortality of people with mental disorders;
- reduction of stigma; and
- protection of the human rights and dignity of all citizens, and especially people with mental health problems.

5. FRAMEWORK FOR ACTION

The scope of mental health action covers promotive, preventive, and curative approaches as well as prevention of mortality that can be directed at various levels such as individuals, groups, local communities, and the society. The matrix presented in Figure 1 lists the most important actions.

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[3] OJ C 86, 24.3.2000, p. 1.

MENTAL HEALTH ACTION	Societal level	Local communities	Individuals
Promotion	• Enhancement of the value and visibility of mental health • Human rights legislation • Combating stigma	• Proactive community activities • Appreciation of mental health in schools (in overall goals, curriculum and daily life) • Appreciation of mental health in workplaces • Leisure space for children and families • Safe and good quality living environment	• Access to education, training and employment • Participation in leisure activities, relaxation, exercise and hobbies • Increasing understanding of good mental health • Health education and information
Primary Prevention	• Prevention of social exclusion in employment, education and housing policies • Regular mental health impact assessments of all new developments	• Teaching parenting skills • Social support to high risk groups e.g. elderly, single parents	• Proactive and reactive support to people experiencing threatening life events or chronic adversity
Secondary Prevention	• Guidelines and expectations for early detection and treatment	• Access to local services for early detection and treatment	• Early detection and treatment of illness • Relapse prevention
Curative/ Rehabilitative	• Development of integrated health and social services	• Liaison of health services with social services, employment offices, schools, prisons etc. for people with mental health problems	• Psychological, social and medical treatments
Prevention of mortality	• National suicide prevention strategies • National programmes to ensure that people with mental health problems get the physical health promotion/care they need	• Locally tailored implementation of suicide prevention programmes • Access for people with mental health problems to physical health promotion and care	• Access to immediate crisis help • Active follow-up of suicide attempters

Figure 1. A matrix of the framework of action on mental health with illustrative examples.

Mental health promotion is an interdisciplinary and socio-cultural endeavour geared to the achievement of conditions which enhance the well-being of individuals, groups and communities. The process is lifelong from pregnancy through childbirth, infancy, childhood and adolescence to adulthood and old age. It implies the creation of individual, social, societal and environmental conditions which enable optimal psychological and psychophysiological development and reduction in mental health problems.

Primary prevention is directed at reducing the *incidence* (rate of occurrence of new cases) in the community by reducing risk factors and strengthening protective factors, or by improving coping abilities of people who are currently without a mental disorder but are believed to be at risk of developing a particular disorder.

Secondary prevention involves efforts to reduce the *prevalence* of a disorder by reducing its duration. Thus secondary prevention programmes are directed at people who show early signs of disorder, and the goal is to shorten the duration of the disorder by early detection and prompt treatment.

Curative/rehabilitative approach mainly belongs to the national healthcare systems, one important task of which is to establish the primary care and specialized care systems.

6. ELEMENTS OF PUBLIC HEALTH ACTION ON MENTAL HEALTH

The EU has an important obligation to public health.

Article 152 of the Amsterdam treaty obliges the EU to ensure a high level of human health protection in the definition and implementation of all Community policies and activities. Health strategies are set out in order to fulfil the obligations of the European Union in relation to public health according to the Treaty.

The European Council of health ministers passed a resolution (18 November 1999) on the promotion of mental health. This resolution recognizes the importance of mental health and proposes certain measures to be undertaken by the Member States and by the European Commission.

The proposal for a programme of Community action in the field of public health (2001-2006)[4] focuses on three priorities:

1. Improving health information and knowledge
2. Responding rapidly to health threats
3. Addressing health determinants.

With regard to mental health, each Member State should create a strategic mental health policy, well integrated with its overall health policies at national, regional and local levels.

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[4] COM(2000) 285 final of 16.5.2000.

While each Member State has special needs, problems, resource constraints, and challenges, there are nevertheless some consistent areas which national policy needs to address if it is to make most effective use of the available resources to improve mental health.

These areas may be grouped into
- mental health in public policies
- service components in health and social services
- supportive infrastructures
- steering mechanisms.

Public mental health policy needs to be accompanied by a strategic implementation programme with quantifiable process and outcome targets. Moreover, a timetable for action, substantial political will, and support are also needed.

6.1. Mental health in public policies

Mental health in a population depends on much more than the policies on health and social services only. Therefore, all Member States should ensure that all relevant sectors and their agencies are aware of the importance of mental health for the population and that they are aware of the influence that their activities can have on mental health. It is also important to make sure that appropriate co-ordination between relevant sectors takes place.

In the following, the role of employment, education, housing, environment and equality policies in connection to mental health will be briefly described[5].

- **Employment:** Work, unemployment, and specific conditions at work have been shown to have a considerable influence on mental health and on utilisation of mental health services. Rates of illness are higher in the unemployed than in people at work. Workplaces are a key environment for mental health promotion as well as physical health promotion and employers should be encouraged to include mental health in their workplace health policies.

- **Education:** Inadequate education contributes to mental health problems and social exclusion because of the increased subsequent difficulties in finding work, and in participating fully in other social roles. People with poor educational attainment are over-represented in those with mental health problems. Therefore, schools are important settings for mental health promotion and education on mental health should be included as part of the health and social skills elements

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[5] In addition to the sectors described here, it is important to consider mental health issues in *all* sectors of the society, such as trade and industry, culture, home affairs and police, prisons and criminal justice agencies, defence, transport and communications.

of school curricula. Moreover, schools need to be committed to improving and sustaining the mental and physical health of pupils, teachers and other staff alike.

- **Housing:** Poor housing and homelessness have been associated with poor mental health and improvements in these factors have been shown to improve mental health.

- **Environment:** Both our physical and social environment may have a strong impact on mental health. The current challenges are how to ensure physically and mentally good and healthy environments in both urban and rural areas.

- **Equality:** Equality and non-discrimination do have a positive impact on mental health. Already, some initiatives are currently taken at the EU level aiming at prohibiting any discrimination based on sex, race, colour, ethnic or social origin, genetic features, language, religion or belief, political or any other opinion membership of a national minority, property, birth, disability, age or sexual orientation. Experienced discrimination in any of the above-mentioned issues may lead to or contribute to mental health problems and social exclusion.

Adequate co-ordination between relevant sectors is essential in raising awareness of the influence of various activities on mental health. Co-operation between sectors should be strengthened. Mental health impact assessment should be implemented as a standard procedure in decision-making.

6.2. Service components in health and social services

The organisation and delivery of health services and medical care are, in accordance with the principle of subsidiarity, exclusively the responsibility of the Member States. This principle applies to the whole range of health services from primary to specialist care and to the provision of interagency services.

- **Primary care:** No country can afford anything approaching sufficient specialist personnel to see and care for everyone with mental health problems. Most people with such problems will need to be seen and cared for within primary health care. In the development of mental health policy on primary care, it is important to examine the existing primary care system, its staffing, its system of basic and continuing training for each of the professional groups involved, and the existing system of information collection from primary care. Where appropriate, it is essential to strengthen the basic and continuing training of the primary health care staff by increasing their knowledge of mental health promotion and prevention, assessment, diagnosis, management of mental health problems and criteria for referral of people with mental health problems to secondary care.

- **Planning and resourcing specialist services:** All Member States are undergoing a strong deinstitutionalisation process away from the old and distant large asylums. Therefore, attention needs to be paid to providing sufficient, high-quality, local community-based mental health services. From the point of view of good outcomes, people with severe mental health problems should be cared for in as least restrictive an environment as possible, as is compatible with health and safety of the individual and the safety of the public, with due regard to their human rights. The precise service structure and configuration needs to be determined in the context of local needs, culture and resources. It is particularly important to emphasize rehabilitation back into the normal pattern of daily activities. Where patients are cared for in places other than their own homes, it is essential to set a system of quality assurance to ensure that some basic standards are met.

- **Social services:** The role of social services in dealing with mental health problems is crucial in the community-based service system, for example in the provision of supported housing, transport services and supporting persons. Social problems are often related to mental ill-health. Poverty, drug problems, failures in parenting and violence endanger children's growth and health, including mental health. Adults who are long-term unemployed, homeless, or substance abusers, often have severe and untreated physical and mental health problems. Social workers meet a lot of these marginalised people, who often have also dropped out of the normal health care services.

  The staff in social services should be trained to recognise and help people with mental health problems as a part of their profession. They should also be able to evaluate when specialised help and/or guidance to psychiatric treatment is needed. Supervision, consultation and team-support should be available to the staff to promote proper services, including the mental health aspects.

- **Co-operation and liaison between services:** Adequate and effective collaboration between the health sector and social services should be considered. Furthermore, interagency working with schools, employment services, police, prisons, and collaboration with practitioners of alternative medicine as well as with representatives of religious institutions are examples of liaisons highly relevant to mental health.

6.3. Supportive infrastructures

- **Mental health monitoring:** A mental health monitoring system should be established among Member States. The system needs to be based on commonly shared definitions and collection methods and integrated into the general health monitoring system. The monitoring system should cover psychiatric morbidity, positive mental health, and data from the health systems. Some determinants,

such as social factors should be accessible as well, and plans for regular analyses and dissemination of results should be set up.

- **Research and development:** A mental health policy should establish a sustainable research and development strategy to support the policy development and implementation programme. Programme evaluation, epidemiology and mental health economics are particularly important contributors to policy and planning.

- **Human resources:** Similarly, there is a need for a human resources strategy to carry out the implementation of policy including mental health promotion, primary and secondary prevention, care and prevention of mortality. There needs to be a sustainable plan for the recruitment, basic training production and continuing education of all relevant personnel both in the health sector (including primary and secondary care staff), the social sector and in schools, workplaces and other settings.

- **Involvement of NGOs, service users and carers:** Citizens, people with mental health problems, their families, carers and the community are the customers of the mental health services. Their involvement can greatly improve the planning and delivery of services as they can spot gaps and problems as well as comment on what is working well. National support for the mental health NGOs is a cost-effective way of encouraging progress.

6.4. Steering mechanisms

The steering mechanisms refer to the general guidance methods of the Member State governments. There are some specific areas where national actions are of particular importance and do have a strong impact. These areas are:

- **Legislation:** In each Member State, there exists legislation on issues related to mental health. Issues to be considered with regard to mental health in national legislation are, for example, those of anti-discrimination and disability and welfare benefits. In addition, legal protection of the individual's rights and regulation of the circumstances in which involuntary detention and treatment can take place, needs to be considered. The legal framework for compulsory detention should reflect the various international human rights treaties.

- **Financing:** Considering the weight and breadth of the problems linked to mental health in the society, as well as the current lack of resources everywhere, it is paramount to ensure sufficient financing with regard to both actions on promotion of mental health and mental health services.

- **Dissemination of information and good practices:** Information guidance is one of the steering mechanisms of national governments. A plan for comprehensive dissemination of information and of evidence-based good practices to representatives of all relevant sectors should be included in the public health action framework on mental health.

Moreover, the European Union provides certain complementary measures by which it supports the Member States' actions in improving the health of the population.

7. CONCLUSION

Mental health is an indivisible part of public health. It is therefore of the utmost importance that mental health and its promotion should be integrated closely with all public health strategies. The value of mental health needs to be recognised throughout the European Union, and across all levels and all sectors of society. Only in this way can we ensure that we live in a caring world that understands the promotion of mental health as an explicit and implicit assumption of public and private life, and that is able to give people suffering from mental health problems the help and treatment they require to enable them to live a life of dignity in accordance with their basic human rights.

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