

MENTAL HEALTH IN A CHANGING EUROPE: POLICY BRIEF

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Mental Health in Europe

The burden of mental health issues is recognized as a global concern, affecting people of all ages, genders, and socio-economic backgrounds. As Europe has been shaken with numerous crises of significant magnitude, known as polycrisis or permacrisis, the European Union (EU) has prioritised pandemics, climate change, digitalisation, socio-economic inequities, migration, conflict and socio-demographic transitions as the most critical threats to mental health in our times.

Mental health is influenced by socio-economic and environmental factors and by intersectionality (e.g., interrelated social inequities based on gender, age, ethnicity, disability, and sexual orientation). Therefore, mental health services require attention to structural and social determinants of mental health as well as personalized approaches. The focus in mental health policy, practice and research has largely been on providing clinical treatments to people with circumscribed mental health concerns. However, the magnitude of the mental health burden in Europe requires a focus on innovative and accessible approaches to prevent mental health concerns and promote positive aspects of mental health.

ADVANCE's European-level analyses

In this context, the aim of the ADVANCE project is to produce guidance and methodologies for innovative, scalable mental health promotion and prevention initiatives addressing specific population groups. These specific (pre-selected) population groups include: youth affected by climate change in Germany; young people affected by socio-economic adversity in Lithuania; adults working in digitalized small and medium enterprises in the Netherlands; adults with a migrant background in Denmark, Finland, and Italy; and older adults in Switzerland. The ADVANCE project sought to better understand the threats to mental health for these specific groups as a first step. Therefore, we carried out situational analyses in seven countries (see *Annex*).

This policy brief is a product of those analyses, primarily intended to assist policy and decision makers in understanding how the current challenges of a transforming Europe affect the mental health of groups in vulnerable situations. It also offers recommendations on how to address gaps at the policy level while advocating for greater respect of human rights and addressing structural injustices.

Key Findings

- ▶ Current and emerging threats to mental health in Europe affect populations in vulnerable situations differently, depending on how new threats interact with the pre-existing challenges faced by each group.
- ▶ Mental health promotion and prevention interventions can build on existing evidence-based practices. However, for these interventions to be effective, its design and implementation need to take into account the complex, interacting social inequities on the basis of age, gender, social status, socio-cultural identity, sexual orientation, disability, and exposure to human rights violations.
- ▶ To be responsive to needs, interventions need to be closely tailored to populations with respect to socio-cultural context with an understanding of the structural factors that affect the mental health and access to care of people in vulnerable situations. This includes considering the stigma and discrimination that may be associated with mental health.



Policy guidance and priority actions

The following key aspects should be considered by policymakers:

INVEST IN BRIDGING THE CURRENT KNOWLEDGE GAPS

More knowledge is needed on the effects of the recent polycrisis on the mental health of groups in vulnerable situations in Europe. Although there is a significant evidence base for prevention and promotion interventions, more knowledge is required to understand how existing evidence

can be generalized to the new mental health threats Europe is facing. In addition, existing research rarely covers issues critical to the implementation aspects of interventions, such as sustainability, scalability, and optimal reach (i.e., taking interventions from rigorous trials to routine practice settings).

ADOPT A CO-CREATION APPROACH TO BUILDING EFFECTIVE PROMOTION AND PREVENTION MENTAL HEALTH INTERVENTIONS

There is a multiplicity of factors to consider when designing or scaling up mental health interventions. It requires a multi-sectoral approach that engages a diversity of stakeholders in a spirit of co-creation

in every aspect of interventions, from the design of the recruitment strategy to the implementation and evaluation.

FOCUS ON STRUCTURAL PROCESSES AND THE REDUCTION OF SOCIAL AND HEALTH INEQUITIES

Especially for prevention and promotion interventions with populations in vulnerable situations, intervention efforts should be embedded in broader effort to address structural injustices, which have been exacerbated by the polycrisis faced by Europe. Given the numerous structural and social determinants to mental health, **mental health priorities should be integrated into policies across a range of**

sectors and at every level of policymaking. Given the complex interactions between social and individual factors determining mental health, greater efforts are needed to implement programs across sectors (e.g., combining mental health and social integration efforts; integrating mental health promotion into the workplace; connecting social and mental health programs for older adults).

ENSURE THE SUSTAINABILITY OF THE INTERVENTIONS OVER TIME

The lack of sustainability of interventions identified in desk reviews present a serious challenge. One of the key success factors that emerged is building trust with targeted populations, thus requiring long-term approaches. Sustainability

should be embedded from the conception phase of interventions so that it is not impacted by the end of short-term funding cycles. Moreover, more intervention studies should embed sustainability into their research objectives.

ADDRESS STIGMA AND DISCRIMINATION

Due to the notable stigma attached to mental health, persons experiencing mental health problems often do not seek help or experience barriers when seeking help. To address this problem, it is necessary to invest in mental health literacy and address prejudices and discrimination bias at various levels (general population; delivery of social and health services). Actors working

with groups in vulnerable situations should have access to interventions and tools that reduce stigma whereas awareness raising campaigns should target the general population. Promotion and prevention interventions should be proactively designed to avoid use of stigmatizing language and avoid stigma on the basis of (digital) literacy and access.

