‘A sustainable approach to depression: moving from words to actions’

5 December 2018, European Parliament, Brussels
**Event Report**

**Nessa Childers MEP** opened the meeting, reminding participants of the aims of the Interest Group, i.e. to advocate the development of sound EU policies which contribute to prevention of mental health problems and ensure good services, care and empowerment for those affected by mental health problems.

After welcoming today's topic – depression - she informed the audience that this will be her last term as a member of the European Parliament. Looking ahead, she stated that the next Parliament will be unpredictable and possibly, quite turbulent, with the arrival of more Eurosceptic MEPs.

She underlined her commitment to the work of the Interest Group over the last two Parliamentary terms and expressed her hope for this important Group to continue as more needs to be done to combat the stigma attached to mental ill health and ensure equitable access to quality services for those affected.

**Tomas Zdechovsky MEP** also welcomed participants, and thanked Nessa Childers for her tremendous support as an Interest Group co-chair over the last ten years. As a relative newcomer to the Group, he has seen its important work and he expressed his commitment to staying involved.

Tomas Zdechovsky MEP also underlined the aim of today's meeting, i.e.

- Present the key findings of a report entitled ‘A sustainable approach to depression: moving from words to actions’;
- Showcase examples of successful projects addressing depression;
- Exchange views on how depression can be prioritised on the EU and national policy agendas;
- Forge links between relevant stakeholders and explore ideas for future cooperation.

He also specifically named the many MEPs supporting today's event, i.e. Marian Harkin, Julie Ward, Katerina Koncna, Sirpa Pietikainen, Heinz Becker, Karin Kadenbach, Jean Lambert, Lambert van Nistelrooij, Cristian Busoi, Marek Plura and Jose Ignacio Faria. All have sent positive and supportive statements (see report appendix). He announced that Helga Stevens MEP would also join the meeting.
Tomas Zdechovsky MEP then gave the floor to Julian Beezhold (European Psychiatric Association) who provided the background to the report ‘A sustainable approach to depression: moving from words to actions’, stating that over 35 million people are estimated to be living with depression in Europe. The costs for depression are 30% higher than those of many other health conditions. In many cases, understanding of, and empathy for, depression is lacking. Policies addressing depression do exist but their implementation is variable and resources are scarce. Gaps in diagnosis and care are prevalent – only 25% receive appropriate and timely care.

Clearly, these gaps need to be addressed by means of a comprehensive, holistic and sustainable policy response. This should focus on the full spectrum of depression, i.e. prevention, early diagnosis, better management and relapse prevention and suicidality prevention.

This is why the nine organisations co-organising today’s meeting joined forces to support the development of sustainable depression policy and practice. The resulting report aims to identify the key factors for such a policy/practice framework by focusing on the lessons learnt from real-life implementation. It was prepared on the basis of a literature review and an analysis of 19 depression and suicidality projects, with 17 in-depth interviews. It looks at the different aspects of depression, ages, countries and cultures, with the analysis focusing on lessons related to sustainability and success factors. He announced that 5 of these projects would be presented next, to provide a flavour of the content of the report.

Tomas Zdechovsky MEP then introduced Hilkka Kärkkäinen (GAMIAN-Europe) to present the first good practice example, i.e. the Finnish Professionally-guided peer support groups. The objective of this project is to utilise the shared experience and compassion of peers to prevent mental health disorders and suicide in people who have lost a loved one suddenly. Group meetings are held for people who have lost someone suddenly to accident, disease or suicide, and those who have lost a sibling or family member. The coordinators are trained professionals who guide the discussion between participants.

Users gave it a high rating of 4/5 which remains the same when the participants are asked to rate the course three months later. The project is sustainable, has opportunity for growth and is continually evaluated and discussed in professional working groups every six months. Most importantly, participants are empowered to change their life situation for the better.

“Over 35 million people are estimated to be living with depression in Europe. The costs for depression are 30% higher than those of many other health conditions”
The second project, ‘iFeel’, was presented by Prof Joseph Zohar (Expert Platform on Mental health – Focus on Depression – EPD). The iFeel app, developed by the EPD in cooperation with other stakeholders, ensures that data related to 11 parameters is logged every 3 hours (e.g. number of calls, call duration, circle of friends…). Any deviation from ‘normal’ patterns can be spotted and this way, potential mood swings can be spotted.

The iFeel app proposes the concept of the Trust Buddy, a family member or a friend, chosen by the patient; The Trust Buddy will receive a signal if a significant change from the normal patterns occurs.

The app guarantees complete anonymity - the only connection with others is via the email of the Trust Buddy. Data gathered relate to quantity rather than quality. It is unique in the sense that there is no language barrier, no cultural barrier (the individual behavioural pattern is the baseline), no issue of compliance; it empowers patients and families, offers the potential of secondary prevention via early detection, has no hidden commercial agenda, will contribute to clinical research. The app also entails a ‘communicative layer’ for carers.

The next project, presented by Marc Hermans (Union Européenne des Médecins Spécialistes - Section of Psychiatry) is entitled ‘This is me’ and it is the first Mental Health Prevention Programme in Slovenia. This aims to improve the mental healthcare provision for adolescents by offering an online counselling platform and prevention workshops in schools.

Adolescent mental health is strengthened by fostering self-esteem, developing coping skills, better social behaviour, a positive classroom atmosphere and other life competencies. The programme entails an e-counselling service where youngsters can post questions or concerns online, with a team of experts responding. Further support is offered through self-image development workshops in schools and school-based prevention workshops, addressing self-awareness, self-management, social awareness, relationship skills and responsible decision-making.

The results have been positive: the e-counselling network is growing and this system is now being replicated in Pristina (Kosovo. Some 6000 school-based prevention workshops have been organised and this way of working is now included in the 2018 – 2028 National Mental Health Programme.

‘Not Myself Today’ was the fourth project, presented by Frédéric Destrébecq (European Brain Council). This project focuses on mental health in the work place. It is indeed demonstrated that depression and poor mental health in general generate important loss in work productivity due to long-term sick leave or early retirement but also ‘presenteeism’. Research has shown that 1 in 10 working people have taken time off work for mental health reasons and that, each year,
350 million working days are lost due to stress and depression. The cost of inaction is staggering, both in personal as well as in economic terms. Workplace mental health should therefore be addressed.

‘Not Myself Today’ is an annual workplace mental health initiative aimed to better understand mental health issues, reduce stigma and create supportive working environments. It aims to create cultures of acceptance and support for mental health and for those who are facing mental health issues. The project is run by the Canadian Mental Health Association, providing companies and organisations with comprehensive resources and tools to organise events and activities that engage employees. For that purpose, a comprehensive toolkit is on offer, both in physical as well as online versions. Employee engagement activities are an essential part of the programme; moreover, there are toolkit guides for campaign champions and people managers, resource sheets for managers, employees and carers, weekly tips and webinar series as well as awareness-building materials – posters, postcards, tent cards, digital banners, etc.

It is planned to have Not Myself Today implemented in Europe, championed by the European Brain Council. The aim will be to start as a pilot within a limited number of selected companies; progress and success will be closely monitored. The materials will be adapted – e.g. to culture and language - through these pilot runs.

Finally, Miia Männikkö (European Federation of Associations of Families of People with Mental Illness (EUFAMI) presented the French project entitled ‘Compagnie des Aidants’, which aims to provide informal carers with a supportive space to share, communicate and help each other, to improve the conditions of their personal lives.

The project consists of a private social network for carers of people with physical or mental health conditions. It provides practical and economic advice and was created by carers to facilitate the lives of other carers and improve their wellbeing.

This is social network is sustainable because it can be adapted according to need and technology developments, and has a stable, diversified funding structure. It has already been extended to several French ‘departements’ and has received support from the European Regional Development Fund (ERDF) to develop practical, educational videos that teach carers basic caring tasks which can be used towards a diploma in caregiving.

Tomas Zdechovsky MEP then gave the floor to Prof Joseph Zohar (Expert Platform on Mental health – Focus on Depression) to provide the report’s key recommendations. He reminded the audience of the aims of the report, i.e. to identify key factors for a sustainable and comprehensive policy and practice.
framework by focusing on lessons learnt in implementation and delivery in best-practice examples from across Europe.

So what are these key factors?

- **Incorporate prevention into all services**: prevention and early intervention are essential, particularly among younger people and hard to reach populations. There is a need for greater clarity about the meaning of early intervention, to get more people into appropriate care.

- **Create joint government accountability** for the prevention of suicide: prevention of suicide is a key goal in depression care. As suicide can have multiple causes, a cross-sectoral approach is key.

- **Integrate services** to make it easier for people to seek help: people are generally averse to the term ‘mental illness’, and may not seek care. Better integration of mental health services within other services may help. Using different terms – e.g. ‘well-being’ may also help lessen associated stigma.

- **Embed digital solutions into practice**: digital health tools can help improve treatment choices and stimulate control of care. These tools can meet resistance from some healthcare professionals who may not know how to integrate them into their treatment approach. Better training is needed to facilitate blended care approaches which combine traditional and digital services.

- **Use language that resonates** with people: terms such as ‘recovery’ convey a sense of hope and clarify treatment goals. Professionals should be encouraged to use understandable language, related to the experience of those seeking treatment.

- **Engage people** in their own and others’ recovery: Involving patients and carers in service and policy development will help ensure appropriate services. The strengths and capabilities of those who have overcome mental health challenges can empower others; services should build on those (e.g. peer support).

- **Take a whole-family approach** to care: Treatment of depression should focus on the whole family - not just on the person affected. Services that support carers are particularly important to protect their health and wellbeing.

- **Empower children and young people** to talk about depression: the prevalence of depression is increasing in young people. Young people need support in using their own resources and skills to become more resilient and cope better. Digital tools can break through the isolation for young people and encourage them to seek help.

- **Create a positive work environment** for people with depression: depression is one of the leading causes of low productivity. More workplace education programmes are needed to promote a positive workplace culture.

- **Evaluate practices** to drive meaningful change; there needs to be a greater investment into real-world data relating to the epidemiology of depression and suicidality, service use and impact of programmes in order to develop a better understanding of the treatment gap and implement sustainable change.

- Prof Zohar concluded by underlining that all of us have a responsibility in preventing and treating depression. Wiser investment and sufficient resources are needed and it is hoped that this report will help reduce the burden of depression and suicidality across Europe through promoting effective, nuanced initiatives.
Tomas Zdechovsky MEP then introduced Brenda O’Brien (OSHA-EU) to share some information on the work of her organisation in the area of mental health and depression at work. OSHA-EU as an information agency on occupational safety and health, supporting employers and trade unions to address prevention and a healthier and more productive workplace.

There are many targeted studies available on depression, stress and burn-out in the work; the evidence is there showing that a poor psychosocial work environment impacts on mental health and can lead to depression. Creating a positive work environment is therefore key – for physical as well as for mental health. Whatever the origin of depression, workplaces need to be positive and healthy. Information on how to do this can be found on the OSHA-EU website.

Brenda O’Brien reminded the audience that there is a legal obligation of every employer in Europe to assess the risk of work for their workers – and this includes psychosocial risk. The is stipulated by the EU Framework Directive on health and safety at work has now been transposed into Member States’ legislation; this is a robust piece of legislation that creates a level playing field. The Framework Directive should be seen as a useful policy hook to address workplace mental health; the European Pillar of Social Rights can be helpful too as workplace health and safety is one of the fundamental rights.

OSHA-EU ran a big campaign on stress in the workplace in 2014-2015. Also, a guide on Stress and Musculoskeletal disorders entitled “Healthy workers, thriving companies – a practical guide to wellbeing.” Will be launched on 13 December. These disorders are the number 1 reason for absenteeism; however, mental health issues, including depression, are the second. OSHA-EU is also planning to conduct a major overview on psychosocial issues which is likely to include aspects on mental health in the workplace; this work will start in 2020.

One issue that merits attention is the problems faced by workers when returning to work after a mental health problem; return to work programmes should specifically cater for these situations.

“A poor psychosocial work environment impacts on mental health and can lead to depression. Creating a positive work environment is therefore key – for physical as well as for mental health.”
Helga Stevens MEP stated that depression is highly prevalent and has a huge impact on those concerned, their loved ones, society and the economy. When governments need to make budget cuts, health is usually the first to feel the impact. Within health, mental health is usually even more targeted. As there is no health without mental health, and as mental and physical health are part of the same coin, it is clear that ways need to be found to improve mental health. The report launched in this meeting aims to do this in the area of depression - it is practical, concrete and based on existing good practice and this will make it easier for policymakers to implement its recommendations.

For Helga Stevens MEP, key recommendations relate to prevention and early intervention, particularly among younger people and hard to reach populations, such as persons with disabilities. As they are often segregated and excluded, it is sometimes complicated for them to benefit from preventive actions and measures to avoid depression.

As stated in the report, people are generally averse to the term 'mental illness', and may not want to seek care. They are afraid of the stigma related to this kind of illness. Therefore, we need to better mainstream mental health services within general health services. We also should propose an alternative terminology such as “well-being”. This will decrease the negative stereotype attached to mental health.
In the audience debate the following issues were raised:

- In many cases, treatment is suited for the short term but not the longer term. However, given the risk of relapse, longer term treatment needs to be more accessible.

- The meeting was informed of a planned event next spring (outside the Parliament) addressing suicide, to raise awareness and spur policymakers into action. More information on this event will follow.

- There is a shift from being ill and suffering to not doing so well – mental health is increasingly related to welfare rather than to health. A comprehensive approach to treatment, taking into account medical as well as social impact, should be developed.

- Hospital stays are being kept a short as possible, mostly for reasons of cost. However, the shorter the hospital stay the more difficult it is for healthcare professionals to have meaningful and effective relationship with a patient as many problems are not detected during these short stays. Patients can actually be worse off as they and the impact of (drug) treatment is not properly monitored.

- It is clear that, in order to effectively address depression and other mental health issues, sufficient resources are needed. As long as those resources are not there or being cut, progress cannot be made.

- The future of western world gives rise to concerns. Progressive automation will replace many jobs. There is a need for meaning in people’s lives; and in the future this meaning may not necessarily be derived from work. Other ways to give meaning to life (and preserve mental well-being) need to be sought. A universal basic income may be a first step so that people may not have to work to feel that they have meaning.
➢ Policymakers are responsible for resource allocation; these are connected to national competence and policies. There is a gap between Member States’ politicians and the EU level, with the member States politicians deciding on health services and budgets. There needs to be a stronger link between the member states and the members of the European Parliament. Subsidiarity is a big barrier to change in relation to healthcare.

➢ It would be important to ensure that mental health becomes an integral part of mainstream healthcare systems.

With the increasing number of older people there is an opportunity to bring back a caring role into society. On the one hand children – with both parents working – need attention and care and older people have the time to provide that. This could contribute to the mental health of children, rather than spending more time in school and education.
Julian Beezhold (EPA) stated that the report is about hope, excellence, and action. Creating hope is fundamental to the recovery of patients. To have hope we need excellence – the excellence provided by examples of good practice from real life that work and that can be adapted to situations as required. And we need action – in order to make a difference, all of us will need to contribute.

Frédéric Destrébecq (EBC) emphasised the complementary nature of the examples described in the report. The merits of these interventions can serve as a basic approach to develop new initiatives. Despite the challenges in terms of resources and subsidiarity, the recognition of the importance of better addressing mental health is there and should not be underestimated. And in a context of electoral campaign to come, policy makers need to take it up too.

Prof Joseph Zohar (EPD) thanked all participants, underlining the report has made it clear that action can be taken. Yes, resources are scarce, but some of these proposed interventions are not costly. In many cases, resistance to policy change is a bigger barrier than cost. For instance, digital approaches can save money.
Appendix: supporting statements from MEPs

Marian Harkin MEP
Ladies and Gentlemen, welcome to this meeting of the Interest Group on Mental Health, Well-being and Brain disorders. I am unable to be with you as I had two other meetings arranged for this time.

This meeting is a clear example of how organisations concerned by a single topic can come together and agree on the priorities for action, both in policy as well as in practice. The ten recommendations put forward in the report, have their basis in practice. They are all equally relevant, addressing important elements of the vast range of issues that relate to better management of major depressive disorders and I congratulate the nine organisations on their work.

However, I would like to underline one factor that all recommendations have in common and that is, to be implemented properly there is a need for proper resources. Without specifically allocated and sufficient resources, it will be difficult to effectuate real and meaningful change. So that would be my recommendation: sufficient resources to ensure good policy and practice in the management of depression.

Jean Lambert MEP
As one of the co-chairs I would like to welcome you all to the Interest Group on Mental Health. Today’s meeting is important for a number of reasons: first of all it addresses depression, which is one of the most prevalent and impactful mental health conditions. And second, it focuses on practical recommendations for policymakers and service providers which are based on real-life experience and can help to address the full continuum of depression in a concrete way. A third important reason is the fact that 9 mental health related organisations joined forces to prepare these recommendations and this amplified voice can be helpful to spark the interest of the people addressed by the report.

I wish you a successful meeting and look forward to receiving its news on its outcome.
Cristian Busoi MEP

I welcome the report which will be launched in today’s meeting of the Interest Group on Mental health and I apologise for not being able to join you for this occasion.

While the political interest for mental health is on the rise in some countries, it is fair to say that in general, this is not yet considered a priority area. This is counterproductive as mental health problems are increasingly impacting not only individuals; these conditions have a strong effect on their families, their social life and their work. The economy is also affected. Depression is one of the most prevalent health conditions and is predicted to be even more prevalent in the future.

This is why a report containing practical and tested solutions and recommendation is useful. It fills a gap and may provide food for thought for policymakers and healthcare providers, as well as for employers.

I wish you a good meeting and the widest possible dissemination and uptake possible.

Sirpa Pietikäinen MEP

Depression is one of today’s major health challenges as well as of the future. It is clear that policy and practical solutions will need to be identified to ensure that this condition and its impact are better diagnosed, better managed and better treated. This implies a holistic approach across society, and I therefore warmly welcome the report which is launched today; this addresses the whole spectrum of depression as well as the many areas of life it which its impact is felt. I particularly welcome to focus on employment, as I am convinced that the workplace can be a cause as well as a support for depression. However, the focus on prevention and young people is also highly relevant. I warmly welcome the cooperation between the 9 organisations and hope that they will continue to work together on other mental health conditions as well.

Heinz Becker MEP

I apologise for not being able to join you bin your important meeting today. The 9 mental health related organisations are to be congratulated on their efforts to produce this important report in this house today.

The huge impact of depression on the person affected and their families as well as society as a whole is already being felt and will be even stronger in the future; the concrete actions contained in the report can make a contribution towards addressing this impact.

I particularly like to report’s recommendations related to ‘Incorporating prevention into all services’ and ‘Embedding digital solutions into practice’ and am ready to support implementation of these and the other recommendations.

Katerina Konecna MEP

I warmly support the 9 organisations, cooperating on major depressive disorders and congratulate them on launching this very important report today. As we are all aware, depression has a vast impact: on those affected by the condition but also on their families and loved ones as well as on society and the economy as a whole.
Practical measures need to be put in place to facilitate early diagnosis, appropriate and patient-centred treatment and care and to adapt work and social surroundings, supporting quality of life.

The report is comprehensive and inclusive and grounded in reality; this may well inspire local, regional, national as well as European policymakers and service providers to take action. I will be happy to contribute to this process in my role as MEP.

Julie Ward MEP

I would like to express my support for the work of the 9 mental health related organisations, joining forces on major depressive disorders and launching this very important report in the Interest Group on Mental Health today.

Clearly, given the prevalence and, more importantly, the impact of depression on the person affected and their families as well as society as a whole, concrete action needs to be taken to diagnose, treat and manage the condition as early, efficiently and appropriately as possible.

As a children's rights champion, I was happy to see that the report included a concrete recommendation about the importance of empowering children and young people to talk about depression and to seek help. Mental health issues amongst youth can have a devastating impact and we must take advantage of all the tools we have, in particular digital technologies, to support young people who are struggling.

I would like to congratulate the organisations for producing this report, as it is based on good practice and concrete lessons learnt. I do believe that it will make a real contribution towards policy development and action.

I am ready to support any activity that will bring to life the ten recommendations and assist their implementation.

Karin Kadenbach MEP

I would like to express my support for the important work of the Interest Group on Mental Health, as it is clear that mental health is an area which deserves more policy attention. It is very positive that 9 organisations have decided to address depression as one of the most prevalent conditions, which has a strong impact on the person affected, his or her family as well as society as a whole. The report launched today is concrete in nature and the solutions proposed have been tested in reality, which gives them a chance of being successfully implemented in other settings. I wish you a good meeting and more importantly, a good uptake of the report’s recommendations.

Sean Kelly MEP

As an MEP, issues related to patients have always had my attention, both in the field of physical as in the field of mental health. It is fair to say that the policy attention for mental health is less prominent – and actually diminishing at EU level - and this is why I wholeheartedly support this meeting as well as your initiative in the field of depression. It is time to put mental health issues in the spotlight as they have such a huge bearing on those affected and their families but also on society as a whole. Good practice
and the lessons learnt from good practice can help address better management of depression in concrete ways. I welcome the report launched today as this is exactly what this is trying to do: put forward practical and tested solutions.

**Lambert van Nistelrooij MEP**

Mental health is an issue which concerns us all. Policy attention for this topic is increasing but by no means sufficient yet; probably due to a lack of practical ideas on how to best address these issues.

This is why I appreciate the effort of the 9 co-hosts of today’s meeting to produce a guiding report for policy makers and service providers for a better management of depression.

The new Horizon Europe Programme will also help to start up research and implementation in this field. I wish that the recommendations put forward in the report will become a reality and that they will be actually put to use – as they deserve to be.

**Marek Plura MEP**

I would like to underline my full support for activities aimed at better addressing depression and to ensure a better quality of life of those affected and their families. It is time for policymakers to recognise the impact and burden of depression and are open to concrete and practical solutions and recommendations as put forward by the report. It is positive that the report aims to address the full spectrum and the many elements that play a role in better managing depression in its various manifestations, as it will not be possible to develop one size fits all solutions in this area.

I wish the nine organisations involved with this effort a good meeting and a successful follow-up.

**José Inacio Faria MEP**

MEP Faria would like to thank for the invitation but the weeks have been rather busy and he would not have a chance to attend. We have had access to the report which looks very good. We wish it goes beyond paper and please fill us in on future initiatives that you may consider.
A sustainable approach to depression: moving from words to actions

This report was prepared by the group of experts listed as authors and contributors, with support from The Health Policy Partnership. The authors had full editorial control over its content. The initiation and funding for this report was provided by Janssen. None of the content of the report is specific or biased to any particular treatment or therapy.