

Implementing Mental Health Promotion

Invited Comment

WHO Collaborating Centre for Mental Health Promotion, Prevention and Policy

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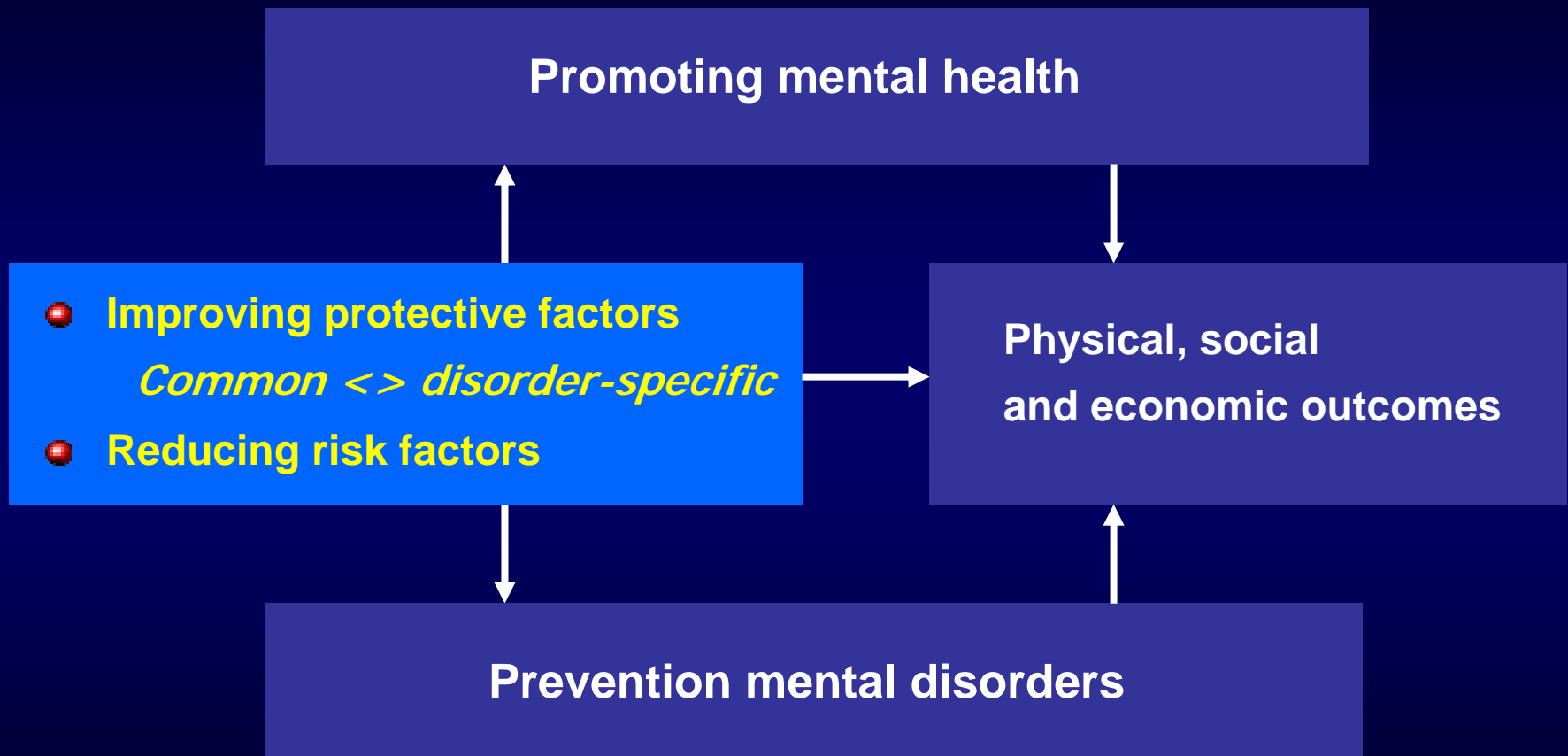
Comments

- Relatedness of Promotion and Prevention
- More attention to how MH develops (from pregnancy on)
- Smart clusters of related problems & determinants
- Facilitating MHP implementation in Europe
- Priorities in getting MHP implemented in Europe

Functionally Related Fields of Public Health



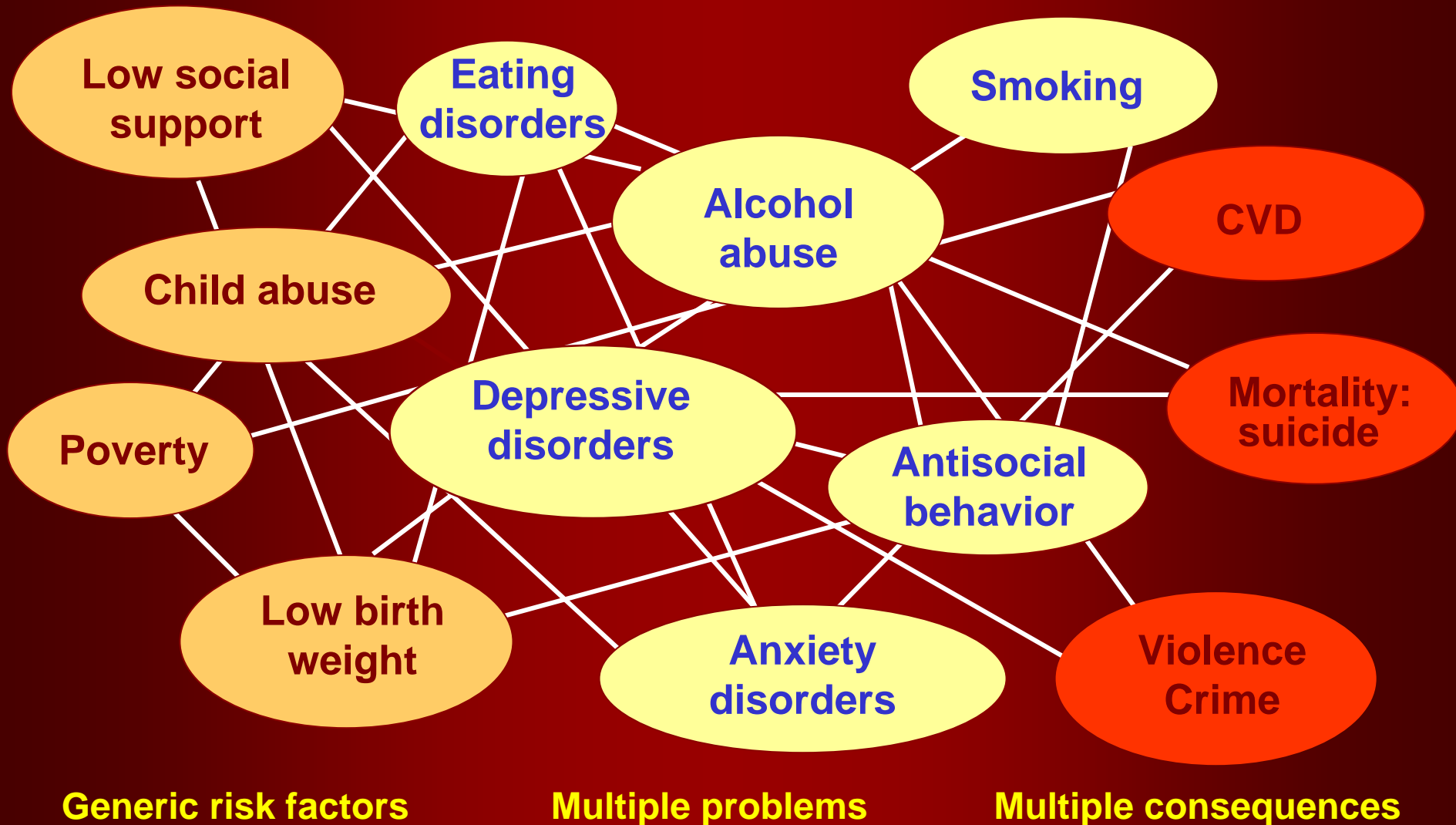
Relatedness of Mental Health Promotion and Mental Disorder Prevention



More attention to theories on development and determinants of mental health and mental disorders

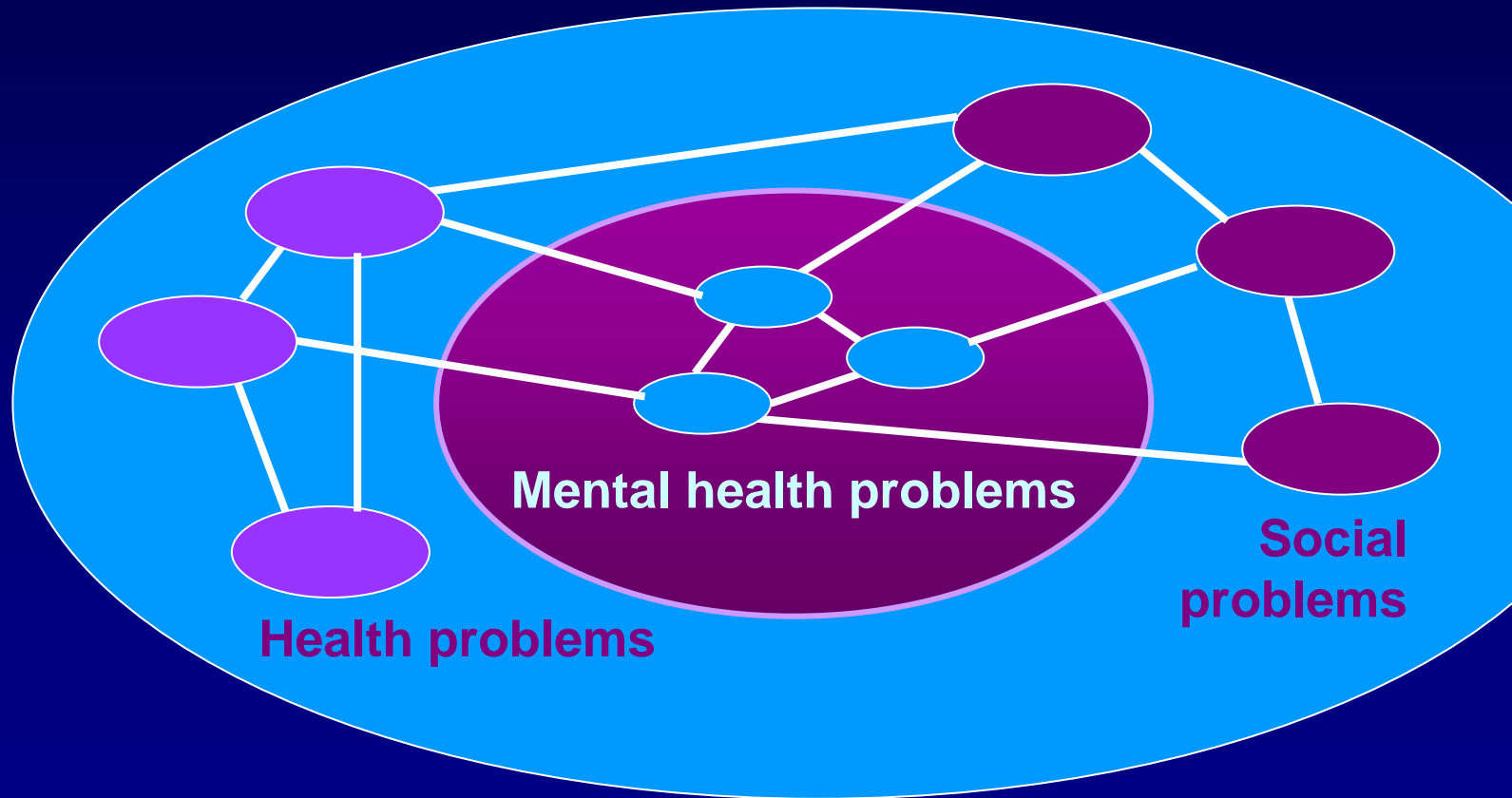
- Developmental mental health and psychopathology: determinants and developmental trajectories
- How and why multiple mental health problems are related (parallel and in sequence)
- How mental, physical & social problems are related (including 'human rights'), as determinant and/or outcome

High prevalence of co-morbidity and relations between problems

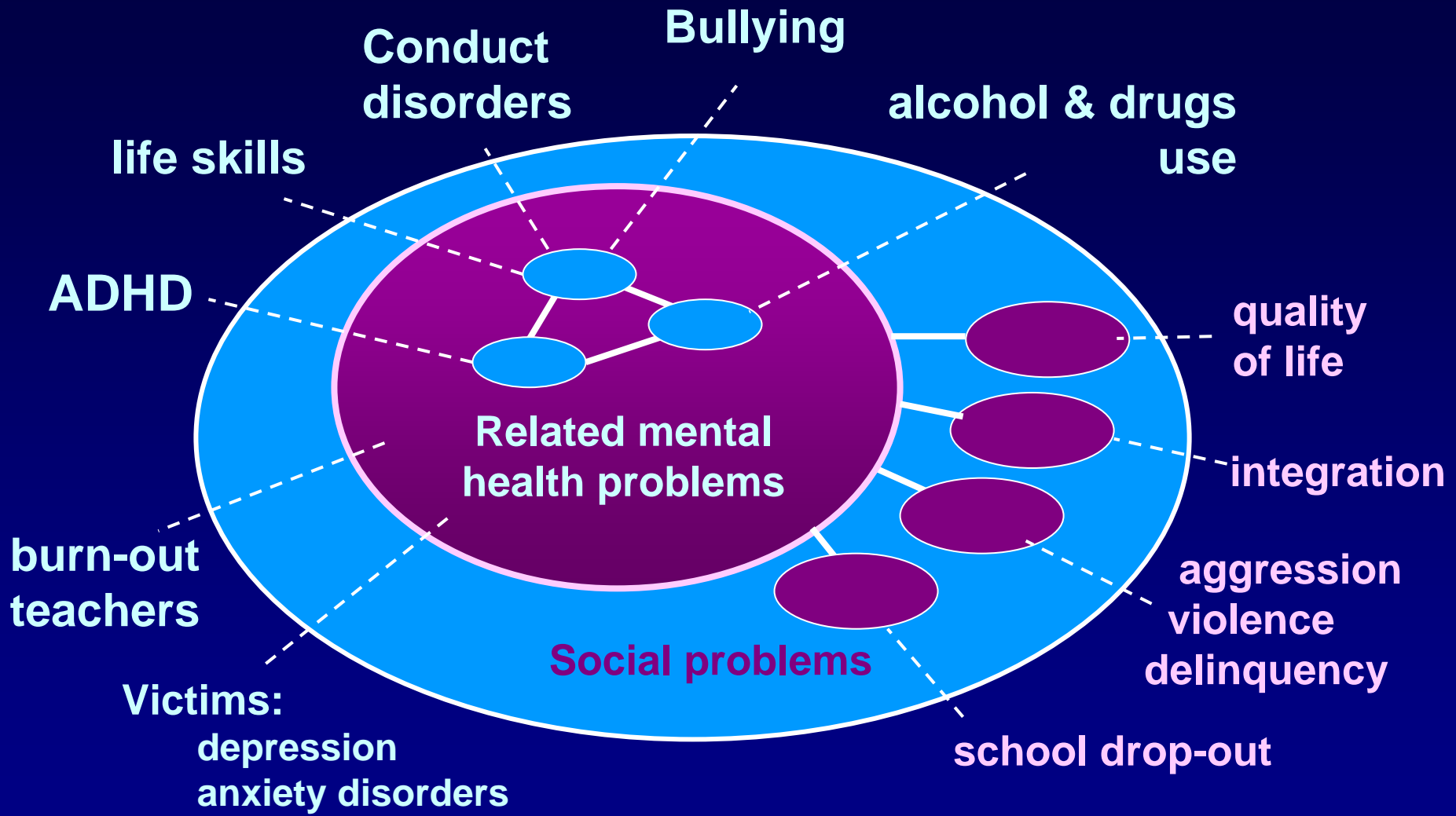


Problems are frequently highly related

**What does this mean for Health promotion,
Prevention and Public health?**



Clusters of Related Mental Health and Social problems



mental health

Healthy start of life cluster

- PREGNANCY: healthy habits, preparation on healthy parenthood; reduce substance use and stress, premature and low weight births
- EARLY YEARS: parent education, enhancing parent-child interaction, parental mental illness and substance use, family stress, one parent families, child abuse and neglect
- SOCIAL CONDITIONS: social networks, poverty, disintegrated neighborhoods, immigrant families

Target at 'smart' clusters

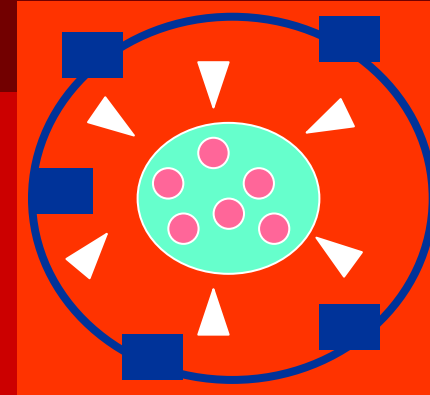
Clusters of multiple related problems
and determinants

+

Clusters of multiple programmes

+

Clusters of multiple, related stakeholders

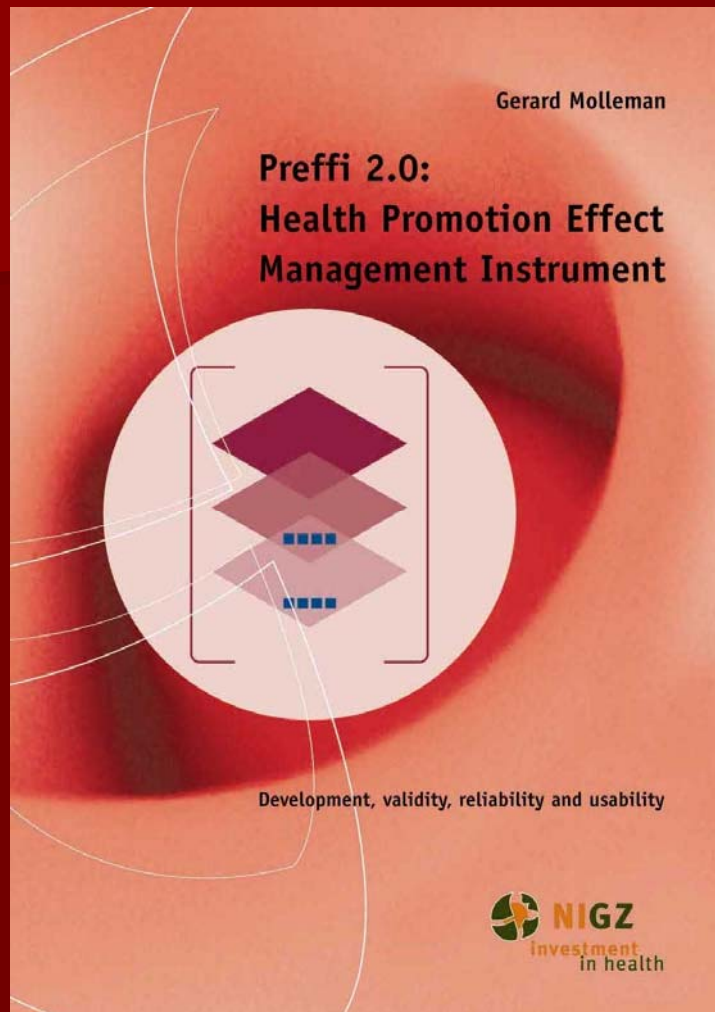


Facilitating the process of MHP implementation across Europe

- **Attune to cultural, historical, structural and economic differences between countries**
- **Identify and involve initiating stakeholders: Who are they? How link to them from CC ? (IMPHA).**
- **Provide information, data, arguments and materials to support advocacy**
- **Supply optional organizational models and policy models for MHP**

Setting Priorities

1. Support countries in building a solid core group and coalition of MHP/Prev advocates and experts
2. Provide or support multiple training modules
3. Expand Effective Programmes database and tools for Effect Management (principles)
4. Identify for 2007-2010 limited number of priority areas: healthy start of life, school, work, elderly; + involve key stakeholder organisations
5. Start a few highly visible multi-country projects (e.g. network of population-focused E-mhp websites)



Preffi 2.0

Prevention Effectmanagement Instrument

Developed by

National Institute for Health Promotion
and Disease Prevention

and

Prevention Research Centre, Radboud
University Nijmegen, The Netherlands

Currently used by over 50% of the Health Promotors in the Netherlands

Training for Capacity Development

Statement on the content of training programmes

Many HP training programmes are handicapped by the assumption that expertise in health promotion planning, health behavior and behavior change is sufficient for designing effective (mental) health promotion programs.

Effective training in MHP and PMD require extensive education in scientific, multidisciplinary knowledge on the development of mental health, mental disorders and related problems, risk and protective factors.

Use of Internet Programmes