

EUCOMS

European Partnership for Delivering Quality Community Mental Health Services

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Save the date for 3rd EUCOMS Network Meeting: 12th September 2017 in Hamburg

All network partners are invited to join the third EUCOMS meeting which will be held in cooperation with the EAOF conference on the 12th of September in Hamburg. In line with the previous two EUCOMS meetings we aim to work on the promotion, monitoring and support of implementation of quality community mental health care (CMHC) in Europe. Participants are invited to:

- Discuss and reach agreement on the final consensus paper outlining the fundamental principles and key elements of community based mental health care
- Share knowledge and experience on current practices and the challenges encountered when implementing CMHC
- Jointly develop a strategy to promote and support the implementation of quality CMHC in Europe
- Jointly develop a strategy to monitor and evaluate the implementation of quality CMHC in Europe
- Discuss and reach agreement on the organisation and the funding of the network

More information about the theme and the exact content of the meeting will be shared with you soon. You can register for the 3rd EUCOMS meeting [here](#).

More information on the EAOF conference on integrated care and assertive outreach in mental disorders and the registration form can be found [here](#).

The 2nd EUCOMS Meeting in Belfast

We look back on a successful event. From the 15-18 January, the Second European Community Mental Health Service providers (EUCOMS) Network meeting took place in the Lombard House in Belfast, hosted by our network partner Inspire Wellbeing. Over forty partners from thirteen countries came together because they want to make a difference with and for people with a mental illness by working together to improve their own service delivery and advocate for strengthening of mental health systems in such a way that funding mechanisms, legislation and policies create an enabling



Figure 1. A selection of organizations signing for membership of the EUCOMS network



Figure 2. Live music in the oldest pub of Belfast

special focus on CMHC in post conflict areas. Finally, the participants were invited to visit different types of mental health services in the district. Besides serious discussions there was also time to get to know each other in the oldest pub of Belfast while enjoying Irish stew, Guinness and traditional Irish music. A highlight of the meeting was a visit from Lord of Mayor of Belfast Alderman Brian Kingston. We are thankful for the great Irish hospitality of [Inspire Wellbeing](#).

We welcome our new member and with their input and determination, we hope to further develop EUCOMS, our European Partnership working towards the Delivery of Quality Community Mental Health Services in Europe and beyond. The meeting report giving an overview of the meeting including pictures, content featured in presentations, discussions, and interactive group sessions can be found [here](#).



Figure 3. Participants of the EUCOMS meeting

Change in secretariat

There has been a few changes in the organisational team of the network. Sharon Zoomer (Trimbos Institute) has joined the secretariat of EUCOMS and José Weststrate (GGZ Nederland) has joined the network as coordinator of the networks activities. You can contact the secretariat of EUCOMS via eucoms2015@gmail.com.

17 European organizations calling for more action on mental health in Europe

The joint statement is signed by 17 European organizations calling for more action on mental health in Europe which formulates proposals on how to ensure the EU addresses mental health in an integrated way. The Joint Statement was originally prepared by Mental Health Europe and EUFAMI and endorsed by 15 other organizations on the European Health Policy Platform.

The Joint Statement calls for more parity of esteem, a life-course approach to mental health, more attention to mental health in the workplace and the improvement of mental health treatment in primary care settings. More information can be found [here](#).

The Mental Health Innovation Network (MHIN) Invites you to Share your Work

The Mental Health Innovation Network (MHIN) is a knowledge exchange platform for global mental health stakeholders, jointly run by the Centre for Global Mental Health and the WHO Department of Mental Health and Substance Abuse. MHIN features a repository of 155+ [Innovation Case Studies](#) (unique or novel mental health care programmes that are cost-effective and have an evaluation component), alongside [Organisation Profiles](#), resources (research publications, toolkits, manuals, etc.), and an active community of 3000+ members who contribute blog posts, webinars/podcasts, and other content. Although MHIN is primarily focused on low- and middle-income countries, all EuCoMS members are encouraged to visit mhinnovation.net, both to take inspiration from the featured innovations (most of which have community-based aspects), and to add your own service programmes as case studies for added visibility and engagement.

- To become a MHIN member, visit <http://www.mhinnovation.net/join-community>
- To submit an organisation profile, visit <http://www.mhinnovation.net/create/organisation>
- To develop an innovation case study, please contact mhin@lshtm.ac.uk



Conferences, Meetings, Seminars and Courses

EPA Psychiatry Congress 2017, 1-4th of April, Florence

The 25th European Congress of Psychiatry (EPA 2017) will facilitate learning, discussion, and exchange among European and international psychiatrists together with leaders of stakeholder organisations in mental health. Guided by the motto “Together for Mental Health,” a special focus of the EPA Congress will be the dialogue between neurosciences and social sciences in the context of a psychiatry congress, overcoming the traditional separation between the domains of biology and human relationships, which has misled for too long our profession and public opinion. More information can be found [here](#).

Fourth European Congress on Integrated Care and Assertive Outreach, Hamburg, Germany, 13-15 September 2017

Integrated Care and Assertive outreach is done by programs or services to reach persons with severe and enduring mental illness who are sometimes not themselves able to seek support and help. The aim is to support the person in fulfilling their goals, coping with the illness and achieving a meaningful and good life in the community. The person and his network are the key collaborators for the services. The main theme of the Fourth European Congress on Integrated Care and Assertive Outreach is: Learning from each other. More information can be found [here](#).

Refocus on Recovery Conference, Nottingham, 18 – 20th of September 2017

A conference aimed at advancing the field of recovery research and to create an international community of influence. This conference will bring together leading researchers and people who use mental health services, their carers and informal supporters, mental health workers and professionals, and policy-makers and other stake-holders from across mental health services and wider systems. Previous conferences have attracted participants from over 20 countries, and we work hard to ensure the experience of attending is enjoyable. More information can be found [here](#).

ENMESH The Context of Mental Health Care; Conceptualising Measuring and Influencing Context in Mental Health Care: From the Individual to Society, Groningen, Netherlands, 5-7 October 2017

Mental health systems need to meet two related challenges: providing treatment and support which is personalised to the individual, and responding to environmental change. From the individual to the community and society levels, understanding context is pivotal in treating mental health problems and their psychosocial consequences. The conference will be organised around four topics: 1) assessment: understanding the context; 2) Epidemiology: Methodological approaches supporting personalised care; 3) Approaches: Novel approaches using the patient's own context; and 4) Policy: Societal challenges for community mental health. More information can be found [here](#).

XII World Congress of Psychosocial Rehabilitation, Madrid, 5-7th of July 2018

The local Organizing Committee of the WAPR World Congress Madrid-2018 has met for the first time in Madrid. The meeting was attended by main officer of FEARP (the Spanish Federation of Association for Psychosocial Rehabilitation and of AEN-Profesionales de Salud Mental, an outstanding Association in Spain, that will be partner in the Organization. The meeting agreed in the main guidelines: This meeting will explore the state of the art in Psychosocial Rehabilitation and will enhance the professional discussion on the main controversial aspects of Psychosocial Rehabilitation today.

Users and carers will have a very important role in the congress. More information can be found [here](#).

Publications

This section contains publications from the people who presented at the second EUCOMS meeting in Belfast and a selections recent publications related to community mental health care. Please feel free to contact us if you would like to share a publication.

Publications from workshop providers and lecturers in Belfast on trauma

- Dr Kevin Dyer's publications can be found [here](#).
- Prof Siobhan O'Neill's publications can be found [here](#).
- Information on the book of Prof Ivan Urlic titled 'Victimhood, Vengefulness, and the Culture of Forgiveness' can be found [here](#).

Recent publications related to community mental health care

[Galletly C A \(2017\), Premature death in schizophrenia: bridging the gap, The Lancet Psychiatry](#)

Schizophrenia is associated with premature death, but the reporting of standardised mortality ratios and other relative measures rather than life expectancy has made important findings inaccessible to non-experts. In The Lancet Psychiatry, Carsten Hjorthøj and colleagues¹ report years of potential life lost and life expectancy, which are easier to understand than standardised mortality ratios, and make the effects of schizophrenia immediately apparent. In a systematic review and meta-analysis of 11 studies in all inhabited continents except South America, they showed that, on average, people with schizophrenia die 14.5 years (95% CI 11.2–17.8) earlier than the general population.

[Hjorthøj C, Stürup AE, McGrath JJ, Nordentoft M, \(2017\), Years of potential life lost and life expectancy in schizophrenia: a systematic review and meta-analysis, The Lancet Psychiatry](#)

Several studies and meta-analyses have shown that mortality in people with schizophrenia is higher than that in the general population but have used relative measures, such as standardised mortality ratios. We did a systematic review and meta-analysis to estimate years of potential life lost and life expectancy in schizophrenia, which are more direct, absolute measures of increased mortality. The effects of schizophrenia on years potential life lost and life expectancy seem to be substantial and not to have lessened over time. Development and implementation of interventions and initiatives to reduce this mortality gap are urgently needed.

[Shields-Zeeman L, Pathare S, Hipple Walters B, Kapadia-Kundu N, Joag K \(2017\) Promoting wellbeing and improving access to mental health care through community champions in rural India: the Atmiyata intervention approach, International Journal Mental Health Systems, 11:6](#)

This case study describes the content and the process of implementation of ATMIYATA and how community volunteers were trained to become ATMIYATA champions and mitras (FRIENDS).

The ATMIYATA programme trained Atmiyata champions to provide support and basic counselling to community members with common mental health disorders, facilitate access to mental health care and social benefits, improve community awareness of mental health issues, and to promote well-being. Challenges to implementation included logistical challenges (difficult terrain and weather conditions at the implementation site), content-related challenges (securing social welfare benefits for people with CMDs), and partnership challenges (turnover of public health workers involved in referral chain, resistance from public sector mental health specialists). The case study serves as an example for how such a model can be sustained over time at low cost. The next steps of the programme include evaluation of the impact of the ATMIYATA intervention through a pre-post study and adapting the intervention for further scale-up in other settings in India.

Becoming member of the EUCOMS Network

If you have questions, comments or you are interested in joining our network please contact us via eucoms2015@gmail.com.

