Mental Health in Slovenia and Celje Region - Facts and Challenges

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Essential Public Health Functions at our Institute

1. Surveillance of population health, specific problems and needs
2. Networking, co-ordinating of different partners
3. Searching for relevant and possible solutions
4. Developing activities and programs
5. Implementing programs, activities
6. Evaluation of effects
Mental Health

• is an essential part of health
• is not just the absence of mental illness, but it also represents:
  - well-being and personal satisfaction with life
  - feelings of happiness/joy
  - good and real self-esteem
  - good and productive relationships with others
  - social and emotional competences
  - problem solving skills
On average, today we face:

- great offer of material goods
- great offer of different services
- so many choices
- opportunities
- challenges
- access to information
- great development in IT and other technologies

...
Facts - data about mental health (problems)

- % of those, who assess their own health as very good/good, increases (52 % in 2001, 58 % in 2012)
- % of those who experience negative stress every day, increases (26 % in 2001, 32 % in 2012)

Data source: Representative researches in Slovenija (adults, 25 - 65 years old)
• The most common mental illness in adults aged > 20 years, registered in primary health care settings, SLO, CE region

  1. Anxiety
  2. Depression
  3. Reactions on stress

• The most common mental illness as a reason for hospitalisation of adults aged > 20 years, SLO, CE region

  1. Mental and behavioural disturbances due to alcohol
  2. Schizophrenia
  3. Depression
• Suicide - the great public health problem in Slovenia

number of suicides/year in the world
before y. 2000 ~ 1.000.000
2000 - 2010 ~ 800.000

number of suicides/year in Slovenia
before y. 2000 ~ 500 - 700
2000 - 2014 ~ 400 - 500
Facts about the sources of professional help in the field of mental health

- an equal distribution of primary health care settings
  → with very good access to family doctors, **but**: workload of doctors, lack of time for conversation
  → all settings have centres for health promotion where group workshops for persons with depression, anxiety and distress are lead by professionals
- an equal distribution of psychiatric hospitals, **but**: not for children and youth
- good distribution of NGOs which work with people with severe mental disorders

- unequal distribution of psychologists and psychiatrists - lack of easily and quickly accessible psychological/psychotherapeutic assistance and (too) long waiting periods
- private psychological/psychotherapeutic counselling services in increase, **but**: for many people financially unattainable
Facts about the legislation in the field of mental health

• Mental Health Act - confirmed in 2007

• National Program for Mental Health - it was prepared (in 2011) but is still not confirmed!!!

Nevertheless - many good practices (activities, programs, projects) are going on in Slovenia, one of them, practical one, is called:

Strengthening Public Mental Health in Celje Region
Strengthening Public Mental Health in Celje Region - „Tu smo zate“ - practical example
PHASE 1 - Data collecting

A descriptive analysis of suicides and mental disorders in the Celje region, based on the national data base was done in 2000.

PHASE 2 - Networking, co-ordinating of different partners

A meeting for an expert public in the region (2001):
- schools
- primary and secondary health settings
- centres for social work
- non governmental organizations
- local communities
Establishment of an inter-sector interdisciplinary group - the Regional Group for Suicide Prevention (2001)

- Mental disorders and suicide destigmatization
- Education of various target groups
- Decrease of the suicide rate
- Implementation of new preventive programmes
- Co-operation with media
- Research
PHASE 3 - Providing activities

1 BASIC EDUCATION FOR PROFESSIONALS

Topics:
• mental health/disorders nowadays
• recognition of depression, anxiety, suicidal behaviour
• treatment of depression and anxiety
• dealing with a person in mental crisis and with a suicidal person
• stress/distress
• useful personal skills, techniques to deal with stress, depression
• networking to provide an appropriate help in a right time
Target groups already involved in basic education

- General practitioners in all 10 primary health settings (in The Slovene Gotland Study)
- Nurses in all 10 primary health settings
- Nurses in General Hospital Celje
- Complete staff in 10 Centres for the elderly
- School advisers and teachers from different schools
- Complete school staff in some schools
- Social workers from all Social Work Centres
- Expert staff from NGOs
- Policemen from all police stations
- Expert staff and keepers from prisons

Together: more than 100 meetings, 3000 participants
EDUCATION OF GENERAL POPULATION

Seminars and workshops on mental health, depression, anxiety, suicidality, stress/disstress, skills ...

Together: more than 50 meetings, 2000 participants
3 CO-OPERATION WITH MEDIA

• mental health, mental disorders and suicide are highlighted through several media - radio, TV, newspapers

• avoiding sensational reporting with pictures or messages of suicide methods

• in 2010 Guidelines for Responsible Media Reporting on Suicide in Slovenia were prepared
IMPLEMENTATION OF NEW PREVENTIVE PROGRAMMES

1. SELF-HELP GROUP for people with depression and their relatives (from 2007 at our regional office Celje, every Monday)

- group support to participants
- exchange of experiences
- understanding of depression
- motivation for co-operation in treatment
- strengthening individuals’ own psycho-social skills and competences
HERE FOR YOU counselling service: psychological first aid for those in need (in 2010 at our regional office Celje, 12 hours per week)

For: individuals, couples and families in emotional distress, which is itself no longer controlled and at the same time does not require long-term treatment or therapy
Upgrade of existing counselling services in Celje and Ljubljana with 7 new ones in project MOČ
Number of counsellors in all services: 34

- psychologists;
- clinical psychologists;
- psychiatrist;
- psychotherapists with different psychotherapeutic orientation;

All counsellors participated in special 68-hour theoretical and practical training led by Slovenian Association for Suicide Prevention.

All counsellors under regular project group supervision and individual supervision inside their own psychotherapeutic schools.
The basic concept of work in counselling services

**Psychological counselling** - using a variety of techniques and psychotherapeutic principles designed to:

- psychological unburdening
- the reduction of tension, anxiety and hopelessness
- understanding of the client's problems
- learning skills for coping with pressure, stress management, problem solving and establishing good relations with others

The first psychological assistance provides for a **maximum of 4 to 6 one-hour meetings**, it is **free of charge** (during the course of the project), **referral is not needed**, clients just call and get the date.
• Who are our clients (%) 

number (feb.2015 - march 2016): **1548**
female: **74 %**
male: **26 %**
average age: **40**
• Former search for help (%)

- priest: 0.22%
- other: 5.60%
- literature: 2.01%
- more professionals: 6.54%
- center for social work: 2.80%
- psychoterapist: 7.76%
- psychologist: 6.90%
- psychiatrist: 17.82%
- family doctor: 8.62%
- none: 41.67%
- Clients' main problems (%)
3 THIS IS ME - mental health prevention program for youth (developed in 2001 by our regional office Celje)

- School prevention program „10 steps for real and good self-image“
- Web counselling service
Ten steps - 10 workshops for a better self-image for adolescents at school

1: „I respect and accept myself“
2: „I set goals for myself and work on attaining them”
3: „I cooperate with others and accept them; I have friends”
4: „I do not run away from problems”
5: „I am learning how to deal with stress”
6: „I think positive”
7: „I accept responsibility for my behaviour”
8: „I know I am a special and unique individual”
9: „I stand my ground“
10: „I recognise, accept and express my emotions”
www.tosemjaz.net web counselling service
Results
Up to now more than:
• 37,500 questions answered
• 100,000 unique users registered per year

Counselling team
65 experts (professional profile):
• 40 % psychologists
• 24 % medical doctors
• 36 % other experts

Experts work for free!
<table>
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<tr>
<th>Year</th>
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<td>2014</td>
<td>388</td>
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</tbody>
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**Suicide rate (number/100,000) in Slovenia by gender**

- **Moški** (males): 28.15, 25.64, 25.19, 13.92, 11.97, 10.98, 26.5, 11.2, 21.5, 9.7, 20.05, 8.18, 21.94, 20.3, 9.41, 7.73, 8.37, 6.05
- **Ženske** (females): 25.19, 25.64, 28.15, 13.92, 11.97, 10.98, 26.5, 11.2, 21.5, 9.7, 20.05, 8.18, 21.94, 20.3, 9.41, 7.73, 8.37, 6.05

*Suicide rate data reflects the number of suicides per 100,000 population.*
Conclusion

• We assess the demonstrated work in the field of mental health in the region and Slovenia as successful. However, not as final.

• In the light of demographic movements and migrations, inequalities among the population, the incline of chronic non-communicable diseases, increased mental disorders ... the concern for mental health needs to be strengthened.

• The concern for mental health is not (just) medical question and topic, it is responsibility of all society.

• It needs to follow the harmonized intersectoral/interdisciplinary plan on national, regional and local level with clearly defined priorities, competences and responsibilities.
I wish you all the best!

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