CZECH REPUBLIC

Situation on Mental Health

**Suicide:** The Mortality rate from suicide is 16.9 per 100,000 inhabitants (27 EU average: 11.3 per 100,000), with men 3.9 times more frequently than women. However the suicide rate dropped by 10% in 2006 as compared to 2005.

**Depression/anxiety:** According to the Eurobarometer, 8% of the population report to have or have ever had chronic anxiety or depression, and 6% say that are undergoing medical treatment for this reason. The highest ratio of prevalence of psychiatric diagnoses was in the group of neurotic disorders (182.8 examinations per 10,000 population), affective disorders (91.2 examinations) and organic mental disorders (49.1 examinations). Women suffer more often from affective, neurotic, and organic mental disorders and schizophrenia and men have been treated more often for the consumption of alcohol and other psycho-active substances, as well as due to development disorders during childhood and adolescence. Among people aged 65 and over, depression rates are 12-15%, and dementia rates over 10-15%.

**Children's Mental Health:** Czech Republic is one of the EU countries with lowest bullying reported (13 year olds): 14% girls- 22% boys bullied others and 14% girls- 20% boys were bullied at least once in the previous couple of months (HBSC statistics). However the Survey of the Ministry of Education reported that 41% of school children 6-14 years old experienced bullying. Children aged 0–14 years were most often diagnosed with development disorders at childhood and adolescence, and neurotic disorders, which accounted for more than 88% of all examinations in that age category.

Policy context

Prevention of disorders and health promotion are included in "Longtime programme of health improvement of Czech population –Health for all in 21st century". The National Public Health Promotion Programme is a funding program that works since 1999, with some projects aimed at mental health promotion. The Czech Association for Mental Health supports community oriented approaches towards people with mental illness and assistance in creating policies and attitudes protecting mental health.

The National Psychiatric Programme (NPP) 2007 issued by Psychiatrická společnost ČLS JEP² derives from a detailed knowledge of the conditions and requirements of patients suffering from mental disorders in the Czech Republic; at the same time is based on the following important documents issued by the World Health Organisation and the European Union: Appeal from the WHO European Ministerial Conference on Mental Health (Helsinki 2005), Mental Health Action Plan for Europe, the European Commission’s Green Paper, Resolutions of the European Parliament promoting mental health of the population (2006).
The goals of the National Psychiatric Programme (NPP) 2007, include:
- Improved care and quality of life for patients suffering from psychic disorders – achieving standards of care equal to other medicinal branches. Stress on humane conditions of treatment and its de-stigmatisation;
- Ensured availability of psychiatric care – with a focus on ensuring its low threshold and a reduction of hidden sickness rate;
- Reduced risks resulting from psychic disorders - suicide, serious psychic and corporal harm, social isolation, disability rate.

Main tasks of the National Psychiatric Programme (NPP) 2007 include:
- Support extended to primary psychiatric care;
- Expansion of community care;
- Modernisation of hospital wards.

The specific tasks of the National Psychiatric Programme (NPP) 2007 include:
- Better care for certain risk groups of people suffering from psychic disorders: schizophrenia, affective disorders, addiction, dementia, alimentary disorders, serious personality disorders, post-traumatic disorders;
- Completion and improvement of the network of outpatient psychiatric consultancies serving treatment of addictions;
- Expansion of community care both in respect of the content of the treatment proper and its institutionalised backing;
- Differentiation of urgent and follow-up hospital treatment with an impact on quality and restructuring of the wards and development of community residential care;
- Reduction of hidden psychiatric diseases in cooperation with general practitioners;
- Fight against stigmatisation and isolation of people with mental disorders, particularly by way of propagation of truthful information about psychic disorders as well as about the state of psychiatric treatment in the Czech Republic;
- Achievement of just funding extended to psychiatric care in keeping with the European standards and reflecting its medical, social as well as economic importance;
- Expansion of crisis psychiatric services;
- Amendments to the legislation relating to care for people suffering from mental disorders, with stress laid on their rights and respect for recommendations of the authorities of the European Union;
- Support to psychiatric research and education in psychiatry.

Examples of activities on priority areas:

**Prevention of suicide and depression**
The Czech Psychiatric Society prepared and declared the “National Psychiatric Program 2007” to improve the health care in the field of mental health. This includes also improvements in the care and prevention of suicide and depression. The program haven't been accepted and implemented by the authorities yet.

**Mental Health in youth and education**
The National Reference Centre of Programmes for Health Promotion and Disease Prevention supported programmes focused on stress coping, such as problems in
single parent families, support of children in crisis, protection of children against violence.

**Mental health at the workplace**
Workplace health promotion is implemented according to the manual Quality Criteria of the European Network of Workplace Health Promotion*.

**Mental Health in older people**
As a part of the research project training of cognitive function in the elderly population is being implemented (2006-2010)*.

Improvement of mental health care of older people is included in the "National Psychiatric Program 2007" of the Czech Psychiatric Society.

**Combating stigma and social exclusion**
The Centre for Mental Health Care Development deals with the de-stigmatization of mental illness and protection of human rights. The "Chance" project focuses on achieving positive changes in the perception of mental illness and psychiatry by the public and public administration. Some other examples include: "Don’t Remain Alone with it" a self-help group for persons with eating disorders, which helps them to start a therapy, or "Vida Centre", which are information-counselling centres giving information and advice in the area of mental health and mental disorders. The “National Psychiatric Program 2007” of the Czech Psychiatric Society deals also with combating stigma and social exclusion.

Further points related to mental health, active intellectual life of senior citizens, as well as mobbing, protection of socially expelled people, mentally ill people and the handicapped, have not been solely the responsibility of the Ministry of Health because also other departments share in programmes and projects relating to those areas – such as the Ministry of Labour and Social Affairs, the Ministry of Education, Youth, and Sports, and various other organisations.

1 Sources of information for the production of this briefing sheet:

1

Version revised and updated by Member State
Mental Health in Older People. Consensus paper prepared by Jané-Llopis & Gabilondo (2008)

* If marked * EXAMPLE provided by WHO Baseline Study©
2 Psychiatrická společnost ČLS JEP – Society of Psychiatrics, Czech Medical Society, Purkyně University (Transl. Note)