

Annex I

Establishing indicators for mental health monitoring in Europe

Member State: _____

Population: _____

Name of the person who filled the questionnaire:

Address: _____

Phone: _____

Fax: _____, e-mail: _____

Date of application: _____

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The project and summary of aims

The project of establishing indicators for mental health monitoring in Europe, set by the European Commission, aims at fulfilling the objectives and principles of the Community action programme on health monitoring in the specific field of mental health monitoring of the population. The aim is to collect information on existing mental health and well-being indicators and information systems, and agree on harmonised definitions for European mental health indicators, which can be integrated to comprehensive health monitoring systems. The indicators will have clear and unambiguous definitions, and furthermore, be maximally feasible and acceptable for the use of different Member States. Indicator is defined as measure on the state and course of mental health; it is a variable that has been proved to be related to health and indicates a priority or a problem. These may be items in health surveys, statistical data gathered etc. and are often repeated measures.

Mental health is seen as an essential component of general health. Mental health is a result of various predisposing factors, precipitating factors, social support and individual resources and experiences. Positive mental health refers to mental health as a capacity to perceive, comprehend and interpret our surroundings, to adapt to them and to change them if necessary, to think and speak, and to communicate with each other. It is determined by four factors: individual factors and experiences, social support and interaction, societal structures and resources, and cultural values. Mental ill-health encompasses a continuum, which extends from the most severe mental disorders to a variety of symptoms of different intensity and duration, resulting in variety of consequences. Much mental ill-health is experienced as part of normal life and is not, usually, presented for care or recorded in epidemiological studies. Such everyday mental problems are correlates of personal distress.

To fulfil our task, we need the help of the National Contact Points of this project. Therefore please, fill in the attached questionnaire carefully.

This questionnaire is outlined to collect data on 1) separate indicators of mental health ill-health and positive mental health, in use by the Member States and 2) the comprehensive mental health monitoring systems.

Information is inquired on a) the definitions of the possible indicators, b) how the data is gathered, c) how it is utilised; for which purposes and how, d) and experiences on the particular monitoring system or indicator in question.

The National Contact Points are, in addition, asked to provide any relevant material, both in English and other languages, concerning the indicators.

Questions concerning data collection, the organisation of data and individual indicators

1. Does your country have an organisation (statistical centre, research unit etc.) which gathers data on health and or health care in general?

1. No
2. Yes

If yes, please, specify:

1.1. Does your country carry out repeated health surveys, employing e.g. questionnaires or other examinations?

1. No
2. Yes

If yes, please specify:

1. 2. Does your country collect the data indicated below, which can be thought of as indicators of health or mental health (see definition above)? Both routine statistical data and data based on health surveys are inquired. Please, include the following information: 1) aims (for what purposes is the data primarily gathered), 2) how the data is gathered (who gathers and by what means; please indicate the method!; how often the data is gathered), 3) and how the individual indicators are defined?

Please fill in this table in any case! Please also note that the list may not be comprehensive, if you have other indicators in use, please specify. Indicate numerator/denominator when appropriate, e.g. per 1000 inhabitants. Multiple choice: yes or no refers to if such data collection is in use in your country. Statistical, health survey and both as multiple choices refer to method of possible data collection. If the space provided is not sufficient please include information on additional sheets of your own.

Definitions:

Statistical refers here to data collected routinely annually, biannually or otherwise on a regular basis by a government or other agency for e.g. administrative purposes. It may also be nationwide or regional. Possible sources of data: registers of the use of psychiatric care, registers containing information from health insurance agencies, mortality statistics
Health survey refers in this connection to population level surveys employing questionnaires or interviews conducted regularly or irregularly: either cross-sectional or longitudinal

1.3. Demographic indicators

Demographic data	Means of gathering data
<p>Age structure: 1. No, 2. Yes;</p> <p>Aims:</p> <p>Definition</p>	<p>1. Statistical routine, 2. Health survey, 3. Both; Please, specify survey methods</p>
<p>Ethnic origin: 1. No, 2. Yes;</p> <p>Aims:</p> <p>Definition</p>	<p>1. Statistical routine, 2. Health survey, 3. Both Please specify survey methods</p>
<p>Change of residence within last year: 1. No, 2. Yes;</p> <p>Aims:</p> <p>Definition:</p>	<p>1. Statistical routine, 2. Health survey, 3. Both Please specify survey methods</p>
<p>Percentage of population in urban areas:</p>	<p>1. Statistical routine, 2. Health survey, 3. Both</p>

<p>1 No, 2. Yes;</p> <p>Aims:</p> <p>Definition:</p>	<p>Please specify survey methods</p>
<p>Annual population growth rate: 1. No, 2. Yes;</p> <p>Aims:</p> <p>Definition:</p>	<p>1. Statistical routine, 2. Health survey, 3. Both Please specify survey methods</p>
<p>Other, please specify:</p> <p>Aims:</p> <p>Definition:</p>	

1.4. Indicators of social stress

Data describing aspects of social stress	Means of gathering data
<p>Unemployment rate: 1. No, 2. Yes;</p> <p>Aims:</p> <p>Definition:</p>	<p>1. Statistical, 2. Health survey, 3. Both Please, specify survey methods</p>
<p>Living standard: 1. No, 2. Yes;</p> <p>Aims:</p> <p>Definition:</p>	<p>1. Statistical routine, 2. Health survey, 3. Both Please, specify survey methods</p>
<p>Adults single, widowed or divorced : 1. No, 2. Yes;</p> <p>Aims:</p>	<p>1. Statistical routine, 2. Health survey, 3. Both; Please, specify survey methods</p>

Definition:	
Proportion of pensionable people living alone: 1. No, 2. Yes; Aims: Definition:	1. Statistical routine, 2. Health survey, 3. Both; Please, specify survey methods
Proportion of households headed by a lone parent: 1. No, 2. Yes; Aims: Definition:	1. Statistical routine, 2. Health survey, 3. Both; Please, specify survey methods
Proportion of dependants with no carer:	1. Statistical routine, 2. Health survey, 3. Both;

<p>1. No, 2. Yes;</p> <p>Aims:</p> <p>Definition:</p>	<p>Please, specify survey methods</p>
<p>Proportion of children taken into custody: 1. No, 2. Yes;</p> <p>Aims:</p> <p>Definition:</p>	<p>1. Statistical routine, 2. Health survey, 3. Both; Please specify survey methods</p>
<p>Proportion of children in foster homes: 1. No, 2. Yes;</p> <p>Aims:</p> <p>Definition:</p>	<p>1. Statistical routine, 2. Health survey, 3. Both; Please, specify survey methods</p>
<p>Alcohol consumption: 1. No, 2. Yes;</p>	<p>1. Statistical routine, 2. Health survey, 3. Both; Please, specify survey methods</p>

<p>Aims:</p> <p>Definition:</p>	
<p>Alcohol and substance abuse indicators: 1. No, 2. Yes;</p> <p>Aims:</p> <p>Definition:</p>	<p>1. Statistical routine, 2. Health survey, 3. Both; Please, specify survey methods</p>
<p>Divorce rate: 1. No, 2. Yes;</p> <p>Aims:</p> <p>Definition:</p>	<p>1. Statistical routine, 2. Health survey, 3. Both; Please, specify survey methods</p>
<p>Indicators of financial difficulties: 1. No, 2. Yes;</p>	<p>1. Statistical routine, 2. Health survey, 3. Both; Please, specify survey methods</p>

<p>Aims:</p> <p>Definition:</p>	
<p>Indicator for poverty: 1. No, 2. Yes;</p> <p>Aims:</p> <p>Definition:</p>	<p>1. Statistical routine, 2. Health survey, 3. Both; Please, specify survey methods</p>
<p>Violent criminality: 1. No, 2. Yes;</p> <p>Aims:</p> <p>Definition:</p>	<p>1. Statistical routine, 2. Health survey, 3. Both; Please, specify survey methods</p>
<p>Criminality among minors: 1. No, 2. Yes;</p>	<p>1. Statistical routine, 2. Health survey, 3. Both; Please, specify survey methods</p>

<p>Aims:</p> <p>Definition:</p>	
<p>Rate of sexual abuse: 1. No, 2. Yes;</p> <p>Aims:</p> <p>Definition:</p>	<p>1. Statistical routine, 2. Health survey, 3. Both; Please, specify survey methods</p>
<p>Other; please specify</p> <p>Aims:</p> <p>Definition:</p>	<p>1. Statistical routine, 2. Health survey, 3. Both; Please, specify survey methods</p>

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1.7. Indicators reflecting the subjective experience of the individual

Data reflecting the subjective experience of the individual:	Means of gathering data
<p>Self-perceived mental health problems: 1. No, 2. Yes</p> <p>Aims</p> <p>Definition</p>	<p>Statistical routine, 2. Health survey, 3. Both; Please, specify survey methods</p>
<p>Self-perceived need for mental health care: 1. No, 2. Yes</p> <p>Aims</p> <p>Definition</p>	<p>Statistical routine, 2. Health survey, 3. Both; Please, specify survey methods</p>
<p>E.g. quality of life studies: 1. No, 2. Yes;</p> <p>Aims:</p> <p>Definition:</p> <p>Other; please specify:</p>	<p>1. Statistical routine, 2. Health survey, 3. Both; Please, specify survey methods</p>

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1.8. Indicators of morbidity and disability

Data describing morbidity and disability	Methods of gathering data
<p>Rate of disability pensions due to the condition of general health: 1. No, 2. Yes;</p> <p>Aims:</p> <p>Definition:</p>	<p>1. Statistical routine, 2. Health survey, 3. Both; Please, specify survey methods</p>
<p>Rate of disability pensions due to mental ill-health: 1. No, 2. Yes;</p>	<p>Statistical routine, 2. Health survey, 3. Both; Please, specify survey methods</p>

<p>Aims:</p> <p>Definition:</p>	
<p>Rate of sickness compensations due to the condition of general health: 1. No, 2. Yes;</p> <p>Aims:</p> <p>Definition:</p>	<p>1. Statistical routine, 2. Health survey, 3. Both; Please, specify survey methods</p>
<p>Rate of sickness compensations due to mental ill-health: 1. No, 2. Yes;</p> <p>Aims:</p>	<p>1. Statistical routine, 2. Health survey, 3. Both; Please, specify survey methods</p>

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1.9. Indicators of mortality

1.9.1. Are the mortality data in your country age specific?

1. No
2. Yes

1.9.2. Are the mortality data in your country cause specific, i.e. includes diagnoses ?

1. No
2. Yes

1.9.3. Is there in your country a system for the follow-up of mental health patients who die of somatic diseases?

1. No
2. Yes

Data describing mortality	Means of gathering data
SMR (Standardised mortality ratio): 1. No, 2. Yes; Aims:	1. Statistical routine, 2. Health survey, 3. Both; Please, specify survey methods

Definition:	
Rate of violent deaths: 1. No, 2. Yes; Aims: Definition:	1. Statistical routine, 2. Health survey, 3. Both; Please, specify survey methods
Alcohol mortality: 1. No, 2. Yes; Aims: Definition:	3. Statistical routine, 2. Health survey, 3. Both; Please, specify survey methods
Suicide rate: 1. No, 2. Yes;	1. Statistical routine, 2. Health survey, 3. Both;

1.11. Does your country have an organisation that collects together mental health data?

1. No

2. Yes

Please, specify:

Questions concerning the demand, need and use of mental health services

2. Data on need for, demand of and use of mental health services

2.1.) Is the use of the mental health services followed in your country on a regular basis?

1. No

2. Yes

If yes, the information is based on:

2.1.1.)

1. Register (referred to further in this questionnaire as register)

2. Survey data

3. Other studies, please specify:

2.2.) Is the demand for mental health services followed in your country on a regular basis?

1. No

2. Yes

If yes, please provide further information

2.2.1. Methods in use:

2.3.) Does your country have a *national database* for admissions to or discharges from psychiatric hospitals?

1. No
2. Yes

2.4.) Does your country have a *national database* for use of psychiatric outpatient care?

1. No
2. Yes

2.5.) Does your country have *regional databases* for admissions to or discharges from psychiatric hospitals?

1. No
2. Yes

2.6.) Does your country have *regional databases* for use of psychiatric outpatient care?

1. No
2. Yes

2.7.) Does your country have a national or regional database on the number of mental patients living in community residential facilities?

1. No
2. Yes

2.8.) Does your country have a national or regional database on the number of patients admitted to residential facilities during a year?

1. No
2. Yes

2.9.) Does your country have a national or regional database on the number of patients engaged in vocational/ employment facilities?

1. No
2. Yes

2.10.) Does your country have a national or regional database on the number of patients integrated in professional activities during a year?

1. No
2. Yes

2.11.) Does your country have a database for use of mental health services at primary care level? (Primary care here is defined as health care provided by general practitioners, family doctors, occupational medicine etc.)

1. No
2. Yes

2.11.1. If yes, please indicate 1) which service use is followed, 2) purposes of this collection of data, 3) if data is collected annually, 4) if data collection is local or nationwide:

2.12.) Please indicate the structure and content of the possible national mental health database and who collects the data?:

2.13. Do the data gathered in your country provide information on, how much of the population is covered by mental health services?

1. No
2. Yes

2.14. Using the data collected in your country, is it possible to estimate, how much of the national health expenditures are used for the provision of mental health services?

- 1. No
- 2. Yes

Monitoring of mental health systematically at population level

3. Does your country have a specific system for monitoring mental health/mental well-being of the population?

Monitoring is defined here as systematic, repeated measures of the mental health of the population; data pertinent to mental health. The term system is understood here in a broad sense covering more than the need and use of psychiatric care.

- 1. No
- 2. Yes

If the answer is yes, we would be interested in receiving any printed material on the system, its indicators and their definitions.

3.1. What is the name and provider of the respective database or monitoring system

(Below: several simultaneous choices possible)

3.2. Is the monitoring or possible surveys regarding monitoring based on: 1) Population surveys, 2) Patient surveys, 3) regional case register, 4) bi-annual survey, 5) other

3.3. What is the coverness in respect to area: 1) National, 2) Regional, 3) Local, 4) Other

3.4. What is the coverness in respect to population groups: 1) Total population, 2) Children, 3) Adolescents, 4) Adults, 5) Old age-people, 6) Families, 7) Women, 8) Mothers, 9) Other: please specify: _____

3.5.) Which of the following categories does this monitoring system include?

3.5.1. demographic indicators (DI)

1. No
2. Yes

Examples: marital status, social class

3.5.2. social stress indicators (SStrI)

1. No
2. Yes

Examples: poverty, unemployment, family problems

3.5.3. social support indicators (SSuI)

Examples: number of friends, quality of social network at work

3.5.4. indicators of health and social functioning (IHStF)

1. No
2. Yes

Examples: in epidemiological studies or health surveys certain assessment tools may be applied: Locus of Control, the Affect Balance Scale, Life Orientation Test etc.

3.5.5. indicators reflecting the subjective experience of the individual (ISE)

1. No
2. Yes

Examples: surveys conducted among the Member states on matters Quality of Life (QOL).

3.5.6. indicators based on the use of and demand for services (IDU)

1. No
2. Yes

Examples: national databases for admissions or discharges, methods to estimate needs of the population for number of hospital beds

3.5.7. indicators describing morbidity, and disability (IMD)

1. No
2. Yes

Examples: alcohol mortality, sell of psychotropic drugs, disability pensions due to mental illness

3.5.8. indicators describing mortality (IMoD)

3.6.) Please provide a closer description of the monitoring system: 1) its aims (for what purposes is data gathered), 2) how the data is gathered (who gathers and by what means), 3) how are the individual indicators defined and 4) how would you group them according to the above categorisation. If you have material ready, please, provide it irrespective of the language of the possible documents.

3.7.) Is all the data gathered annually or otherwise on a regular basis?

1. No
2. Yes

If not annually, please indicate, how often:

3.8.) Is some of the data gathered annually?

1. No
2. Yes

3.8.1. Please provide information for which indicators (data on mental health or well-being, data on other relevant topics) there is regular, annual data collection?

The Experiences concerning individual indicators or mental health monitoring systems

4. Please indicate your experiences on the particular indicators or specific monitoring system in use:

4.1. The system has been experienced as:

4.1.1. Reliable

1. No
2. Somewhat
3. There are problems but we are mostly satisfied
4. System has been found reliable*

*please indicate, how?:

4.2. If specific indicators have been found successful, please indicate which:

4.1.2. Acceptable (nationally or regionally)

1. No
2. Yes

4.3.) Has the system been according to your evaluation complete enough?

1. No; please specify
2. There is some incompleteness in the system; please specify
3. Yes

4.4. Has it been useful to collect the data?

1. No
2. Somewhat
3. Yes

4.5. Any other comments on the experiences?:

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