Final technical report
Annex 4: Quality indicators in mental health promotion and mental disorder prevention programmes
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1. INTRODUCTION

1.1. Introduction and background

This project is one of seven linked projects based on the identified needs for widening the scope of contemporary mental health monitoring. The umbrella project is based on previous work on mental health indicators and aims to set up a comprehensive system for European mental health monitoring purposes. So far in mental health monitoring, there has been little development in the area of assessing mental health interventions with the aim to improve mental health or to prevent mental health problems. Rather, monitoring of services for mental health, have focused for example, on the provision of some psychotropic medications, the availability of mental health professionals, or the accessibility to mental health services.

During the last decade, Europe has experienced a growing interest in mental health promotion and mental disorder prevention, which has been supported by international organizations such as the European Commission (EC) and the World Health Organization (WHO), and some European Union Member States. In January 2005 the Mental health Declaration and Action Plan for Europe were signed and endorsed during the first European WHO Ministerial Conference on Mental Health, "Facing Challenges, Building Solutions". As a response to the WHO Mental Health Declaration for Europe, and building on previous work on mental health through its public health programmes, the European Commission launched in October 2005 the Green Paper on Mental Health, Improving the Mental Health of the Population: towards a strategy on mental health for the European Union. The green paper launches a debate about the relevance of mental health for the EU, the need for a strategy at EU-level and its possible priorities, and proposes the establishment of an EU-strategy on mental health. Both the WHO Declaration and Action Plan and the EC Green Paper on Mental Health, strongly emphasise the importance of mental health promotion and mental disorder prevention as integral parts of a comprehensive public mental health approach.

Mental health is determined by multiple and interacting social, psychological, biological and environmental factors, which are identified and targeted in mental health promotion and preventive interventions with the aim to improve the mental health of a population. Prevention and promotion programmes in mental health have been disseminated and implemented, especially in western European countries. Evaluation research has provided evidence that these programmes can be effective in improving mental health and reducing risks for mental disorders in different age groups, across different settings and for different mental health problems.

Most reviews of the available evidence for prevention and promotion programmes has so far provided insight in whether programmes are efficacious and do actually provide the outcomes that were expected at implementation. However there is less research synthesis available about "What makes a given programme effective?", "What are the different components, methods or intervention strategies that are more likely to produce the expected effects?".

Greater knowledge and understanding on what are the determinants of programme efficacy and what are the different issues that have to be taken into account when implementing such programmes, will support assessing the quality of available interventions, will provide
opportunities for further developing, improving and strengthening existing practice, and will provide evidence-based guiding principles if new programmes are to be developed.

1.2. Aims of the project and time schedule

a) Aims of the project

The aim of this project is to build on the available evidence to develop an overview of what are the known determinants of efficacy in mental health promotion and prevention interventions. The identification of these “effect predictors” or “quality indicators” will provide state of art information on what are the quality standards that should be applied to a given mental health promotion or mental disorder prevention intervention in order to increase their likelihood for success.

The guiding framework for quality indicators to be identified and assessed spans the scope of the following four different areas:
- Programme development (goals, risks factors,)
- Programme Content (methods, duration)
- Programme Implementation (training, support)
- Programme Evaluation (process, outcomes)

Quality indicators identified will be described and the evidence gathered will be further applied into simple training modules for quality assessment of programmes, strengthening of existing programmes and development of new programmes. The training modules will be combined into a 3 day training course to build capacity across European Member States. The training will be delivered to up to 30 health professionals engaged in mental health promotion and/or mental disorder prevention. An evaluation of the training content and delivery will be undertaken and the training modules will be improved accordingly.

b) Phases and time schedule

The project was divided into three phases:
1. Assessment of the literature and identification of quality indicators
2. Development of the modules and integration into a 3 day training course
3. Dissemination-implementation of the training programme to health professionals to support capacity building on mental health promotion and mental disorder prevention across European Member States and applicant countries.

To achieve the project aims the following activities were undertaken within each phase. The results section describes briefly each phase and reports on the results and deliverables.

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PHASE 3
Implementation of training and finalization of manual and reports

- 3 day pilot course of the training manual in Spain
- Revision of manual modules after pilot course
- Implementation of training module 1
- Implementation of training module 2
- Discussion with trainees on developing capacity and implementation at the country levels
- Collection and analyses of the evaluation feedback forms
- Revisions of training modules 1 and 2
- Preparation of the final report

2. RESULTS: PROJECT PHASES AND DELIVERABLES

2.1. Assessment of quality indicators (phase I)

Review of the literature
During the first year of the project a review of the literature to identify key quality indicators of mental health promotion and mental disorder prevention programme development, evaluation and implementation has been undertaken. This data has been collected through an iterative process using a triangulation approach. Multiple literature searches using several publication databases have been undertaken using a variety of key-words that relate to, amongst others, the development, implementation, evaluation and quality of mental health promotion and mental disorder prevention programmes. These searches were not restricted to the mental health promotion and mental disorder prevention field, but included the health and mental health field as well. Broadening the searches was expected to deliver more useful literature as for many of these programmes there are similarities in developing, implementing and evaluating promotion and prevention programmes. Through the extensive literature searches, it appeared that quantitative studies in Europe relating to the development, implementation, evaluation and quality of mental health promotion and mental disorder prevention programmes are not widely available. Because of this, it was decided to also include the grey literature to identify effect predictors. In addition, there have been consultations with several experts.

2.1.1. Overview on quality indicators
An analysis of the literature, including reviews, meta-analyses, individual intervention studies and grey literature on mental health promotion and mental disorder prevention was undertaken to identify quality indicators for programme development and implementation

Deliverables:
The evidence collected was reviewed and summarized into a list of indicators to be included as basis, and check list in the training modules.
On basis of the collected evidence a first draft of the outline of the training modules was made.
In addition a paper outlining some of the key principles of intervention success across different settings has been prepared and accepted for publication in a peer-reviewed journal. This paper
aims to serve as background information to be read by all participants prior to the attendance to the course.

2.2. Development of training modules and manual (phase II)

At the beginning of the second phase the indicators for inclusion in the different training modules were selected. On basis of these selected effect predictors the content and structure of the modules were further developed. Two different training modules were developed. One on programme development, training and evaluation and one module on implementation of mental health promotion and mental disorder prevention interventions and improving their efficacy through the development and application of quality standards for implementation. At this stage experts on quality indicators and evidence levels have been consulted.

Expert consultation

In addition to the extensive literature searches and a review of the grey literature, there have been consultations with several experts in the mental health promotion and mental disorder prevention field discussing identified quality indicators and outcomes from the literature for mental health promotion and mental disorder prevention. The involvement of the experts supports the triangulation approach. Dr. Peter Anderson has been consulted in early stages of the identification process of the quality indicators and in the development of the training manual. Peter Anderson is a public health specialist with expertise in mental health and addictions. He has been an adviser to the IMHPA project, where he amongst others, co-authored the training manual for prevention of mental illness in primary care. He manages a number of EC co-financed projects, including the Bridging the Gap project, a network with partners from 30 European countries, in which he wrote and delivered a three and a half day training programme on advocacy skills for alcohol policy. He has an extensive research background in epidemiology, intervention and implementation research.

Besides there has been a consultation meeting in February with Richard H. Price in Denmark to provide us with his expert view. Richard H. Price is professor of Psychology and Business Administration at the University of Michigan and Senior Research Scientist at the Institute for Social Research, where he serves as the Director of the Michigan Prevention Research Center and is Director of the Interdisciplinary Program on Organizational Studies. Researchers at the Institute for Social Research at the University of Michigan have conducted research on the problems facing unemployed persons and their families since 1981. This research has produced detailed information, particularly on the economic hardship problems and family difficulties related to unemployment and job-seeking. After a series of studies documenting these problems and analyzing the needs of unemployed workers and their families, the Michigan Prevention Research Center (MPRC) developed and evaluated the JOBS Program to help unemployed workers to effectively seek reemployment and cope with the multiple challenges and stresses of unemployment and job-search.

In May 2006 there has been a consultation meeting with Lynne Friedli in Spain to discuss the list of identified quality indicators and the developed training manual. Lynne Friedli is a Mental Health Promotion Specialist and one of the most published authors on mental health promotion policy in the UK. She works across Europe on alliances to support the development of mental health promotion, as well as delivering training and policy advice within the UK.

2.2.1. Training Modules

On the basis of the evidence collected, a first draft of both training modules on programme development, planning and evaluation were developed. During the development of the second
module the developers and experts involved in the development recognised that instead of 2 different trainings of 2 days, 1 training of 3 days would be more comprehensive. There were areas of overlap and the topics were so closely interrelated that it was decided to change the original plan to develop two different training courses. This process of rewriting, combining and adding took that much time that the pilot studies that were planned for 2005 needed to be rescheduled.

The ongoing process of consultation, developing and improving the training manuals resulted in the training manual: Programme Development, Planning and Evaluation.

2.2.2. Background papers
Besides for the development of the training manual, the collected evidence was also used for the development of background papers to be included in the training package. These background papers provide information on the different topics addressed in the different sessions.

2.2.3. Evaluation form
An evaluation form was developed for collecting the feedback of the participants of the pilot training. The first part of the evaluation form consisted of questions on a 5 point Lickert scale, the second part consisted of open end questions.

Deliverables:
A draft of the training manual and training materials which includes: an overview of all sessions and overall goals and learning objectives for the course; complementary literature; PowerPoint presentations; case studies; evaluation form for the training; lists of quality indicators. In addition every session is specified and includes session plans, literature and necessary material for each session.

Training Manual: Programme Planning, Evaluation and Implementation
The first draft of the Training Manual: Programme Planning, Evaluation and Implementation was developed on basis of the training modules and on the evidence collected. The training is targeted to health professionals in health promotion, mental health professionals, researchers, programme implementers, experts in national institutes or in non-governmental organizations that are involved in developing, evaluating and implementing prevention and promotion programmes in mental health.

The overall goal of the training is to increase the process and the quality of programmes that are developed and implemented in Europe. It aims to improve the expertise of the participants as mental health promoters and mental disorder preventers in their own country, district or community. In addition, the training aims to contribute to the development of a generation of highly-qualified experts across Europe that possess the attitudes, knowledge, skills and leadership qualifications to further develop the field of prevention and promotion in mental health, to organize the development and implementation of prevention and promotion programmes, and to generate significant mental health effects and related benefits in their countries and communities.

The training is a 3 day course with a total of 6 sessions of 3.5 hour. Each session, accept the first and the last, is divided into 2 themes, and target:

- **Session 1**: Introduction
- **Session 2**: Needs assessment and problem analysis
Theme 1 Community needs assessment; problem analysis; setting priorities and policy making
Theme 2 Problem analysis for programme development
- Session 3: Programme design and development
Theme 3 Defining goals and target populations
Theme 4 Designing intervention strategies
- Session 4: Methods and Evaluation
Theme 5 Selection, adoption and reinvention of evidence based model programmes
Theme 6 Aims and methods of evaluation: process and outcomes
- Session 5: Dissemination, implementation and policy development
Theme 7 Dissemination and implementation of programmes
Theme 8 Moving towards policy
- Session 6: The next steps: Moving policy and practice ahead

The training is intended to be highly participatory and therefore, the methods used are intended to help participants to learn from each other and share their ideas and expertise.

2.2.4. Selection of trainees
The pilot course could be delivered to up to 30 participants. In order to reach professionals in the different European Member States, the members of the European Network for Mental Health Promotion and Mental Disorder Prevention (IMHPA) were asked to nominate one person of their country to participate in the course. These persons received an invitation to join the pilot training course.

2.3. Implementation of training and finalization of manual and reports (phase III)
Originally it was planned to have 2 pilot courses. Because of the decision to combine the two different modules into one training, only one pilot course could take place

2.3.1. Pilot training: Mental Health Promotion and Mental Disorder Prevention: Programme Planning, Evaluation and Implementation
This full pilot training took place in Spain in April 2006. The course had capacity for up to 30 participants of which 25 places were reserved to allow one participant from each European Member State. Eventually 28 participants out of 22 different European Member States followed the training. The group of participants was diverse in professional backgrounds and in experience with mental health promotion and mental disorder prevention, but all were interested in mental health promotion and mental disorder prevention. After the 3 day course participants gave their feedback on the training.

Deliverables:
Evaluation forms were collected after the training. In general, there was a very positive reaction to the training, where participants identified the training as very useful, interesting, crucial as such training was still lacking in Europe. The training was also identified as very supportive for practitioners working on mental health promotion and prevention across Member States as it
provided the possibility to share experiences and knowledge with other participants from different professional and cultural backgrounds.

The used training methods were positively evaluated. The presentations were seen as enjoyable, just as the interactive group-work. The plenary presentations of 20 minutes were too short according some participants. They had the feeling that too much information was presented in too short time. But what was presented was seen as useful and relevant. The group-work was received very well and seen as very useful. Participants seemed to like the fact that they were able to put the learned theory in practice and learn from each others perspectives.

In relation to specific components of the training, the most useful sessions were considered to be the session on evaluation, the problem analysis and need assessment and the use of the planning models. The participants recommended creating more time for these themes in future trainings. The themes that were perceived as most difficult were the use of the planning models and the session on problem analyses and needs assessment.

2.3.2. Revised training manual: Programme Planning, Evaluation and Implementation

After collecting and analysing the evaluation forms, changes have been made to the training and the training manual where needed, following the comments of the training participants.

Deliverables:
The training manual: Programme Planning, Evaluation and Implementation for a three day group-based training. More specified the training aims to 1) motivate participants to implement promotion and prevention policies and programmes in their own country, 2) provide the participants with basic knowledge about the planning process of developing, implementing, evaluating and disseminating effective prevention and promotion programmes and 3) to provide participants with the basic skills that are needed for the development and implementation of prevention and promotion of programmes.

2.3.3. Enhanced capacity on monitoring, implementation and programme development

Enhancing the capacity of health professionals/organizations in all applicant countries on monitoring, implementation and programme development of mental health promotion and mental disorder prevention programmes can be achieved by rolling out the training.

Deliverables:
From now on the training can be rolled out through Europe by training the trainers. By doing this capacity can be build through European Member States which will affect the workforce and will increase the quality of programme development, implementation and evaluation.

2.3.4. Report on quality indicators

The data that has been collected for identifying the quality indicators through an iterative process using a triangulation approach for gathering information because of the complexity of the field and broadness of the topics that were involved in the searching strategy was also used for a report on quality indicators. The data has been collected through extensive literature searches, grey literature and expert consultation.

Deliverables:
A report on quality standards and evidence base for evaluation, implementation and development of mental health promotion and mental disorder prevention programmes. This report is included as chapter in the final publication of the Mindful project.

3. ANALYSIS OF THE RESULTS AND DISCUSSION

3.1. The scarcity of indicators that are easily available and can quantify prevention and promotion programmes, policies and infrastructures

This research showed us once again, that easy available indicators that can quantify mental health promotion and mental disorder prevention programmes, policies and infrastructures are scarce. More time, resources and research should be used for identifying these indicators and to make them widely available.

3.2. The level or quality of interventions if data is available

When a mental health promotion or mental disorder prevention programme has been analysed and the research showed its efficacy, than this does not automatically mean it is a good intervention as there are often a number of limitations of the research. Some effective programmes for example, have limited reach amongst the target populations and the effect sizes are moderate. Another limitation is the fact that an intervention is often studied in an experimental situation and still need to be tested for efficacy in the population. To increase the quality of interventions these limitations should be kept in mind in future research and when analyzing the available research outcomes.

4. CONCLUSIONS AND RECOMMENDATIONS

4.1. The need to develop more sensitive indicators for monitoring availability and quality

Ongoing monitoring procedures are essential for successful intervention. However, we found that there is a lack of sensitive indicators for monitoring the availability and quality of mental health promotion and mental disorder prevention programmes. By developing indicators for monitoring availability and quality more successful interventions can be guaranteed.

4.2. The need for a sustained system for monitoring availability

At the moment there is also a sustained system lacking for monitoring the availability of mental health promotion and mental disorder prevention programmes. One solution to overcome this problem is a prevention and promotion of mental health portal, from where all relevant information can be easily found. Another solution is the development of a database for Europe, which collects all effective mental health promotion and mental disorder prevention programmes that are available in the different Member States. Such a database will give countries the possibility to choose from different effective programmes which they can adopt.

4.3. The need for easily quantifiable system of quality indicators

In order to move the mental health promotion and mental disorder prevention field forward there is a need for an easily quantifiable system of quality indicators, which professionals can use during the development and implementation of their promotion or prevention programme. Such
a system, when easily accessible, could guarantee a higher level of quality and effectiveness of programmes that will be put in place in the future.

4.4. **Make use of tools that enhance efficacy and effectiveness**
Existing knowledge about available tools to improve efficacy of interventions should be made available and their use by researchers, practitioners and policy makers should be stimulated. The efficacy and effectiveness of a programme could be strengthened if tools to disseminate knowledge, support programme development and their implementation were developed and, where already available, used.

4.5. **The need for improvement systems of existing programmes**
In the countries of Europe, many promotion and prevention programmes are implemented at this moment, or have been implemented but turned out not to be sustainable. By adopting and adapting effective programmes, the wheel will not be reinvented over and over again and a lot of resources can be saved. Besides the saving of resources there is also the advantage of putting in place programmes that have already proven to be effective.

4.6. **Its practical application into a training for quality assurance of prevention and promotion interventions**
In order to improve the quality of mental health promotion and mental disorder prevention programmes, policies and infrastructures across the European Member States, these identified quality indicators for promotion and prevention and the developed training should be used for professionals involved in mental health promotion and mental disorder prevention in different kind of professions. The training should result in the development of a generation of highly-qualified experts across Europe that possess the attitudes, knowledge, skills and leadership qualifications to further develop the field of prevention and promotion in mental health, to organize the development and implementation of prevention and promotion programmes, and to generate significant mental health effects and related benefits in their countries and communities.