



NUI Galway
OÉ Gaillimh



HPRC
Health Promotion Research Centre

***Reintegrating, Reconnecting and
Recovering: Why mental health promotion
matters***

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Professor Margaret Barry

**WHO Collaborating Centre for Health Promotion Research
National University of Ireland Galway**

Why Mental Health Promotion Matters

- Mental health is a critical component of health, wellbeing and sustainable development (WHO, 2013; UN, 2015)
 - promoting good mental health is a core function of ensuring healthy lives and promoting wellbeing for all at all ages
 - mental health is a positive resource for living - understanding of the factors that determine good mental health
 - Promoting mental health contributes to the functioning of individuals, families, communities, and the social and economic prosperity of society (WHO Comprehensive Mental Health Action Plan 2021-2030)
 - Policies and practices are needed to promote mental health at a population level - ensure that the conditions that create good mental health and reduce inequities are accessible to all
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Why Mental Health Promotion Matters

- The COVID-19 pandemic has had profound impacts on population mental health (Kelly, 2020; Salari et al., 2020; Vindegaard et al., 2020; Xiong et al., 2020; WHO, 2022)
 - rising rates of depression, anxiety, post-traumatic stress symptoms, and increases in suicidal thoughts and behaviours (Cénat et al., 2021; Sher 2020)
 - negative impacts have increased inequities for population groups, including people with existing mental health difficulties and those already experiencing health and social inequities due to homelessness, racism, exclusion, discrimination, and stigma (Bambra et al., 2020)
 - frontline workers, health and social care staff
 - Underscored the urgent need for a population level approach to mental health
 - universal and targeted mental health promotion interventions that will support people in protecting and enhancing their mental health and wellbeing and provide the necessary supports and resources to reduce mental health inequities (IUHPE, 2021)
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Adopting a Public Health Approach

'there is no health without mental health'

- Embracing a health promotion approach to population mental health
 - treatment approaches on their own are not sufficient to improve population mental health (WHO, 2001)
 - need a comprehensive public health approach embracing promotion and prevention alongside treatment and recovery (WHO, 2002; 2004; 2013)
 - Paradigm change in thinking about mental health
 - broader understanding of mental health - positive mental health and wellbeing; interrelationship between physical and mental health
 - strategies for creating the greatest mental health gain for the greatest number of people – promote, protect and restore mental health
 - shift from a deficit model of illness to the health potential of people and their everyday settings for living- mental health is created where we live our lives
- *reframing the challenge of improving mental health*

Positive Concepts of Mental Health

Mental health may be defined as:

“a state of emotional and social well-being in which the individual realises his or her own abilities, can manage the normal stresses of life, can work effectively, and is able to play a role in his or her community “ (WHO, 1999)

- Concept of positive mental health (Keyes, 2002; Huppert, 2005; Ryff et al., 2006)
 - subjective wellbeing and life satisfaction
 - positive functioning, engagement and social wellbeing
- Keyes’ dual continua model and the concept of ‘flourishing’
 - *abilities to develop psychologically, physically, emotionally, intellectually, socially and spiritually*

Promoting Population Mental Health

‘there is no health without mental health’

- The UN Sustainable Development Goals (SDGs) place mental health at the centre of the global development agenda

- Goal 3 is to “Ensure healthy lives and promote well-being for all at all ages”
- Target 3.4 “By 2030, reduce by one third premature mortality from non-communicable diseases (NCDs) through prevention and treatment and promote mental health and wellbeing”



- need for mental health promotion at a population wide level
- UN World Youth Report 2021 – Youth Mental Health & Wellbeing

Policy Frameworks

WHO Mental Health Action Plan 2013-2020; 2021-2030

“The essential role of mental health in achieving health for all”

- comprehensive strategies for promotion, prevention, treatment and recovery in a **whole-of-government** approach
- to protect and promote the **mental wellbeing** of all citizens
- responsibility extends across **all sectors** and all government departments

- Reflected in policy frameworks at regional and national levels
 - WHO *European Framework for Action on Mental Health 2021-2025*
 - *Healthy Ireland national policy framework for improved health and wellbeing, 2013-2025* (Department of Health, 2013)
 - *Connecting for Life: Ireland’s Strategy to reduce Suicide 2015-2020* (Department of Health, 2015).
 - *Sharing the Vision: A Mental Health Policy for Everyone* (Department of Health, 2020) – new national mental health promotion plan

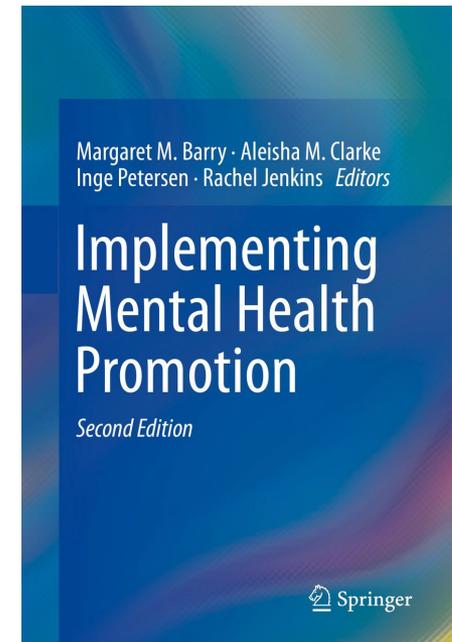
Mental Health Promotion

“Mental health promotion is concerned with strengthening protective factors for good mental health and enabling access to skills, resources, and supportive environments that enhance equity and keep individuals and populations mentally healthy” (Barry, Clarke, Petersen, Jenkins, 2019)

<https://www.springer.com/in/book/9783030234546>

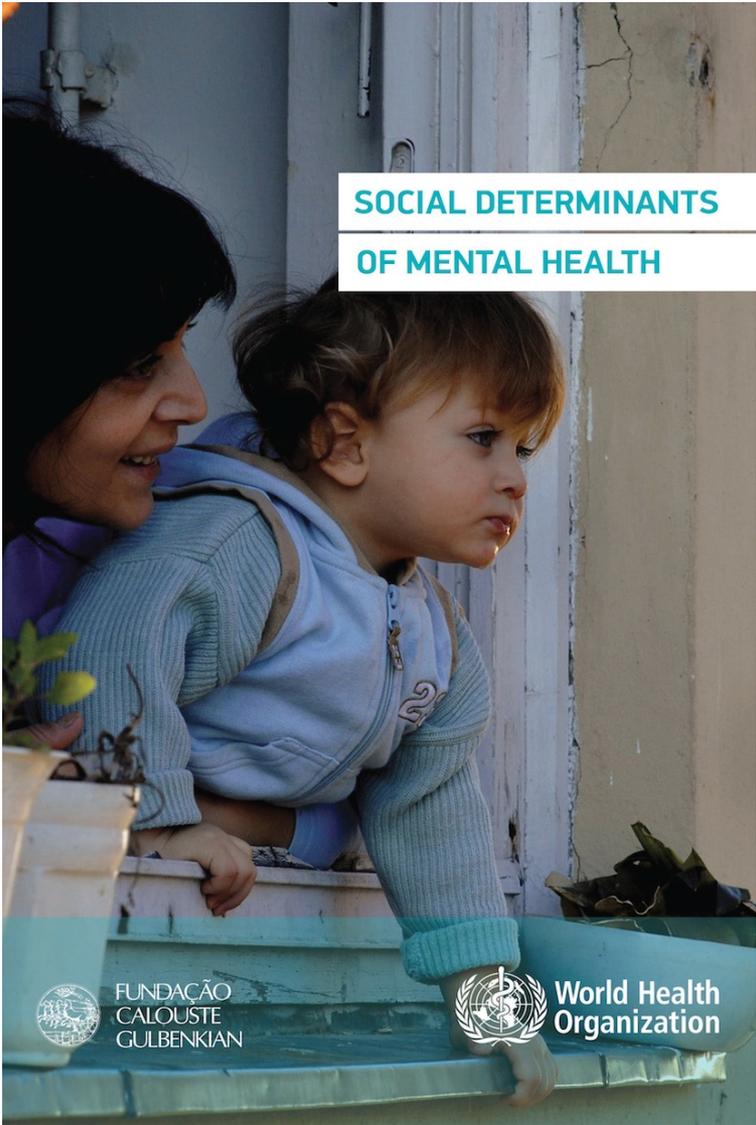


Barry, M.M. (2001) *International Journal of Mental Health Promotion*, 3(1) 25-34.



Promoting Mental Health

- Strengthen individuals and families
 - promote social and emotional skills, resilience, coping
 - Strengthen communities
 - social support, sense of connectedness, social inclusion, participation, engagement
 - Reorient health services to mental health promotion and prevention
 - integrate mental health promotion into standard health services
 - Remove structural barriers to mental health at a societal level
 - culture, environment, economic and social policies - *'mental health in all policies'*
- ***Comprehensive and universal actions across the lifecourse, multiple sectors and settings***



**SOCIAL DETERMINANTS
OF MENTAL HEALTH**

Social Determinants of Mental Health

“Mental health and many common mental disorders are shaped to a great extent by the social, economic, and physical environments in which people live”

- calls for actions to improve the conditions of daily life
- whole of government and whole of society approach – comprehensive and universal actions across the life course, multiple sectors and levels

➤ policy making at all levels of governance and across sectors can make a positive difference to mental health outcomes



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World Health
Organization

What Works?

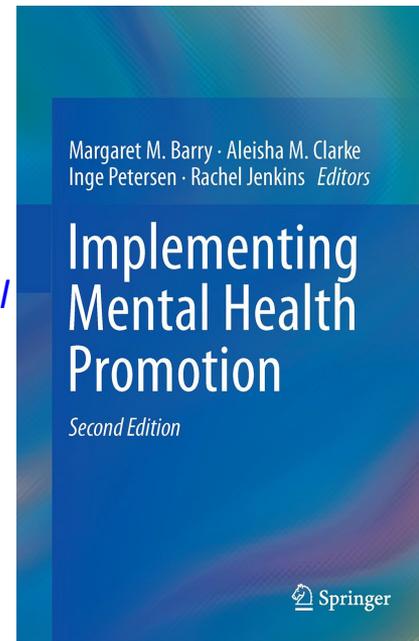
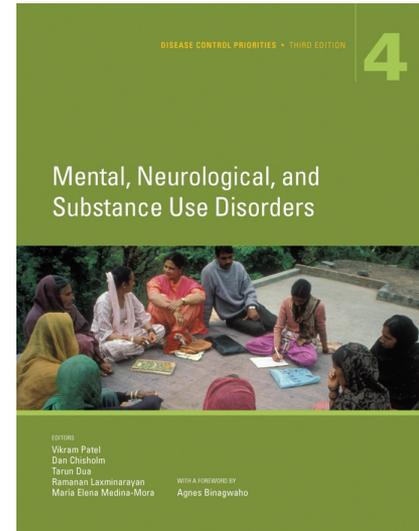
- Compelling evidence that the promotion of mental health leads to lasting benefits for the improved health and wellbeing of individuals, their families and society (WHO, 2013)
 - enhance protective factors for good health and wellbeing
 - reduce risk factors for mental and behavioural disorders
 - lead to lasting positive effects on a range of social, economic and health outcomes → academic performance, employment, social functioning and physical health
 - Convincing scientific, social and economic case for investing in the promotion of population mental health and wellbeing
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What Works?

- **Evidence-based** interventions that can be implemented and sustained at a reasonable cost, while generating clear health and social gains
 - **Lifecourse approach:** policies and interventions across the life course from infancy to older age
 - **Settings approach:** actions that can be delivered in everyday settings or contexts and across delivery platforms
 - **Determinants of mental health approach:** reduce inequities
 - Interventions for which there is evidence of effectiveness, cost-effectiveness, and their **feasibility** in terms of cultural acceptability and capacity to be delivered by existing systems
 - series of evidence syntheses and briefings prepared for WHO and government agencies across high, middle and low income countries
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Evidence Syntheses

- Kuosmanen, T., Keppler, T., Dowling, K. , Barry, M.M. (2022). Evidence Synthesis of Impact of Mental Health Promotion. Report produced for the Department of Health, Ireland.
- Barry, M.M., Kuosmanen, T., Clarke, A.M. (2017). *Implementing Effective Interventions for Promoting Adolescents' Mental Health: A Review of the Evidence in the European Region*. WHO European Regional Office.
- WHO Evidence Brief on Implementation of Global Mental Health Action Plan in the Eastern Mediterranean Region. *Promotion of Mental Health and Primary Prevention of Mental Disorders: Priorities for Implementation* Barry, Clarke & Petersen (2015) *EMHJ* 21(6), 424-432.
- Petersen et al. (2015). Population and community platform interventions (pp183-200). In Patel, et al. (Eds.), *Mental, Neurological, and Substance Use Disorders. Disease Control Priorities 3rd Edition*. The World Bank.
- Clarke, Morreale, Field, Hussein & Barry (2015) *What works in enhancing social and emotional skills development during childhood and adolescence?* Report for the Early Intervention Foundation & the UK Cabinet Office
- **Barry, Clarke, Petersen & Jenkins (2019) *Implementing Mental Health Promotion* (2nd edition), Springer.**
<https://www.springer.com/gp/book/9783030234546>



IUHPE Position Statement on Critical Actions for Mental Health Promotion (2021)



Critical Actions for
Mental Health Promotion



Position statement of the International Union for Health Promotion and Education, March 2021

https://www.iuhpe.org/images/IUHPE/Advocacy/IUHPE_Mental-Health_PositionStatement.pdf

8 PRIORITY AREAS FOR MENTAL HEALTH PROMOTION



Promote infant and maternal mental health through integrating a focus on social and emotional development and positive mental health into early child development services including prenatal care, home visiting and parenting programmes.



Cultivate child and adolescent mental health and wellbeing through school education initiatives and whole-school approaches, including social and emotional learning programmes in preschool, school, and youth settings.



Implement parenting and family strengthening programmes that promote the emotional and behavioural functioning of school-going children and their parents.



Support mentally healthy workplaces by integrating mental health promotion into workplace health and safety policies and practices, including organizational change.



Initiate community empowerment programmes (e.g., community participation, volunteering, youth action, community microfinance and debt management paired with life skills training, and violence prevention/promotion of healthy relationships) to enhance social capital and environments that promote mental health and wellbeing across the life course.



Incorporate mental health promotion within health services through a focus on service users' mental health and wellbeing as part of routine primary health care and mental health services.



Enhance public awareness of ways of promoting positive mental health and reducing stigma associated with mental ill health through mental health literacy programming, campaigns and local community actions.



Adopt a 'mental health in all policies' approach to promote multi- and inter-sectoral policies and actions that create supportive environments for mental health and enhance equity and social justice.

Give Every Child a Healthy Start in Life

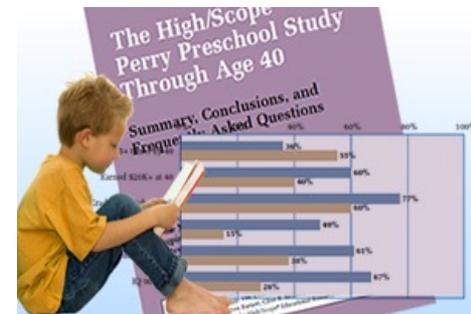
- **Promote infant (aged 0–3 years) and maternal mental health**
 - *integrate focus on positive mental health and social and emotional development into routine prenatal and postnatal care services and home visiting parenting programmes*
- **Focus:** Universal and targeted home visiting and parenting programmes
 - empowering and strengths-based approach
 - women and children at higher risk - teenage parents, mothers with postnatal depression, intimate partner violence (NICE, 2018; Shaw et al., 2006)
- **Evidence:** robust evidence of long-term positive outcomes (Jeung et al., 2021; Britto et al., 2017; Kendrick et al., 2013; Barlow et al., 2010)
 - improved child development and parenting skills
 - reduced behavioural problems
 - improved maternal health and social functioning
 - good economic investment (benefit to cost ratio of 23:1)
 - those at risk making the most gains

Give Every Child a Healthy Start in Life

- **Examples:** Nurse Family Partnership; Flourishing Families; Sure Start; Community Mothers; Philani Mothers
- delivered by trained health professionals and trained community workers
 - **Implementation:** integration into mainstream services - scaling-up
policy support, workforce training,
reaching higher-risk families
support proportionate to need
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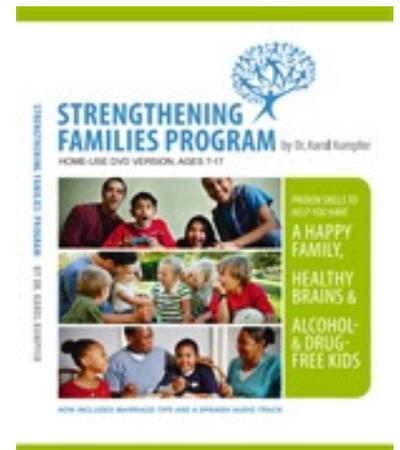
Preschool- Give Every Child a Head Start in Life

- **Promote child mental health development (aged 3–6 years) through preschool education**
 - *access to high quality preschool programmes that develop children's social and emotional wellbeing, cognitive skills, school readiness and educational success*
- **Focus:** Structured curriculum based on social and emotional learning with child-initiated activities, supportive educational environment combined with parent support (Blewitt et al., 2018; Luo et al., 2020; Yang et al., 2018)
- **Evidence:** Strong evidence base for long-term positive outcomes
 - improved school attainment, social gain and occupational status
 - greater benefits for higher risk and disadvantaged children
 - reduce inequities due to child poverty and poor health
 - good economic investment (benefit to cost ratio of 17.6:1)
- **Examples:** Head Start REDI
- **Implementation:** supportive policy on preschool education; workforce training; mainstreaming



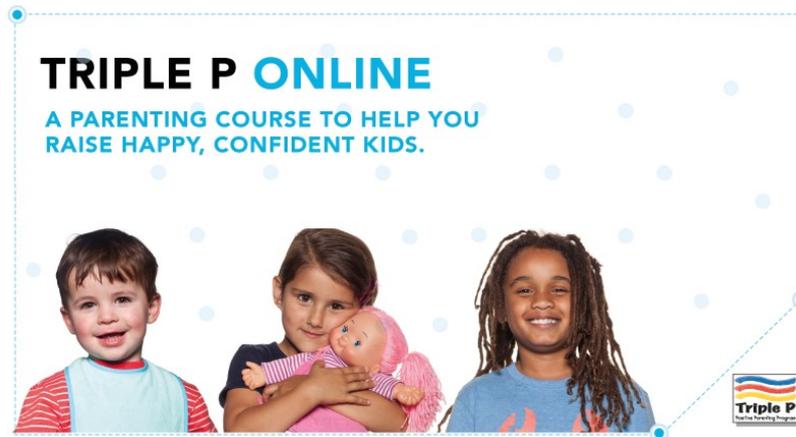
Support Families in Promoting their Children's Mental Health and Wellbeing

- **Strengthening families and parenting of school-going children (3-16 years)**
 - *access to universal and targeted parenting and family strengthening interventions promoting emotional and behavioural functioning*
- **Focus:** Equip parents with the skills and confidence to develop positive relationships, attitudes and conduct in their children
- **Evidence:** strong evidence of positive outcomes - childhood conduct disorders
 - reduced child abuse and neglect
 - reduced conduct and emotional problems
 - reduced psychological distress in both children and parents
 - targeted programmes (benefit to cost ratio of 8:1)
 - benefits in reduced crime



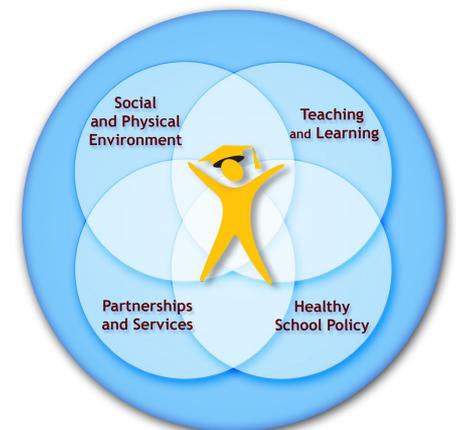
Support Families in Promoting their Children's Mental Health and Wellbeing

- **Examples:** Strengthening Families (Kumpfer & Brown 2011); Triple P Parenting (Sanders et al., 2000; 2014; Incredible Years (Webster-Stratton et al., 2001; 2011) – cross country replication
- Parents Plus (Carr et al., 2017) <https://www.parentsplus.ie/>
- **Implementation:** supportive policies on family support; staff training; multicomponent programmes with a wide range of application



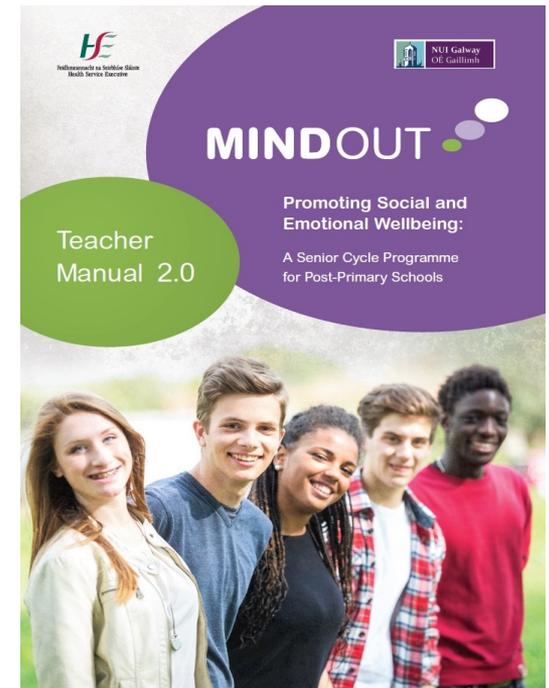
Mental Health Promoting Schools: Teaching skills for life

- **Promote young people's social and emotional skills and resilience through whole school interventions**
 - *access to universal social and emotional learning (SEL) programmes and targeted prevention programmes in school*
- **Focus:** Whole school approach - teaching of SEL skills - coordinated and sequenced approach
- **Evidence:** robust evidence of positive outcomes - (Durlak et al., 2011; Weare & Nind, 2011; Taylor et al., 2017)
 - improved academic engagement and performance
 - enhanced positive social behaviours
 - reduced conduct problems - aggression, bullying
 - reduced emotional distress – stress and depression
 - targeted interventions – reduced depression, anxiety and suicidal behaviours
 - good economic investment (benefit to cost ratio of 11:1 to 25:1) – benefits to education and employment



Mental Health Promoting Schools: Teaching skills for life

- **Examples:** Positive Action; KidsMatters; MindMatters; KiVa PATHS; FRIENDS; Penn Resiliency Program
- **Implementation:**
Tiered delivery within a whole school approach
 - embedded in educational policy
 - teacher training and support
 - foundational skills for a range of health behaviours
- MindOut programme for adolescents



*Dowling, K., Simpkin, A. J., & Barry, M. M. (2019). J Youth Adolesc, 48(7), 1245-1263
doi:10.1007/s10964-019-00987*

Dowling, K. & Barry, M. M. (2020). European Journal of Investigation in Health, Psychology and Education, 10(2). doi:10.3390/ejihpe10020044

Community Empowerment Programmes: Leaving no one behind

- **Promote social and emotional wellbeing through community engagement**
 - *access to community development programmes across the life course, especially for those who are disadvantaged and socially excluded*
- **Focus:** Youth empowerment programmes that promote lifeskills
 - creative arts (drama, music), sports, outdoor adventures
 - mentoring and social action projects for at-risk young people
- **Evidence:** Promising evidence from community-based interventions (Durlak et al., 2010; Kremer et al., 2015; Barry et al., 2017) especially for youth in deprived communities
- **Examples:** Communities That Care; Big Brothers Big Sisters, Youth Social Action



What works in enhancing social and emotional skills development during childhood and adolescence?

A review of the evidence on the effectiveness of school-based and out-of-school programmes in the UK

February 2015

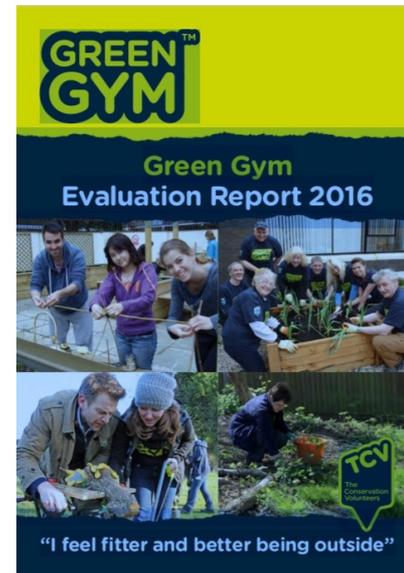
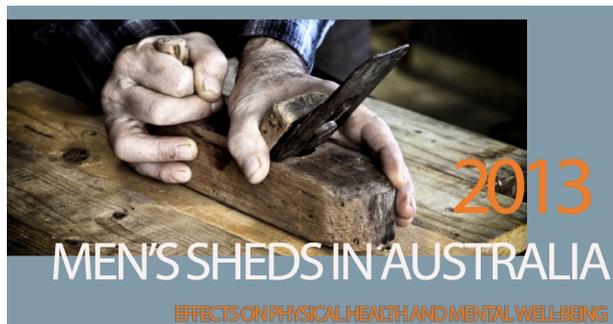
Aleisha M. Clarke, Silvia Morrales, Catherine-Anne Field, Yonna Hussein and Margaret M. Barry

WHO Collaborating Centre for Health Promotion Research,
National University of Ireland Galway



Community empowerment programmes: leaving no one behind

- **Focus:** Community participation for older people and those who are socially excluded
 - volunteering, befriending and intergenerational programmes
 - community gardening, creative arts, bereavement support
 - virtual communities – harnessing the potential of online interventions
- **Evidence:** Promising evidence base for positive mental health outcomes
- **Examples:** Act-Belong-Commit, Men's Sheds, Widow-to-Widow
- **Implementation:** community development approach
mutual support – engaging those most in need



Community Empowerment Programmes: Leaving no one behind

- **Community empowerment to promote the mental health of families in poverty and debt**
 - *access to community microfinance and debt management combined with lifeskills training interventions*
- **Focus:** microcredit combined with lifeskills
- **Evidence:** Promising evidence of positive outcomes (LMICs)
 - improved self-esteem and reduced levels of depression
 - Improved nutrition, education
 - reduced risk of violence, improved social and economic wellbeing
- **Examples:** IMAGE (gender and HIV training) & microfinance for AIDS orphaned children in Africa
- **Implementation:** microcredit must be combined with lifeskills training for benefits to be achieved; more positive outcomes for women

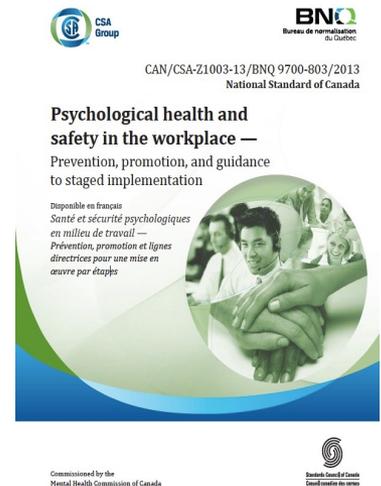


Creating Mentally Healthy Workplaces

- **Workplace policies and programmes that improve the mental health of working adults**
 - *integrating mental health into Health and Safety regulations and management practices*
- **Focus:** Individual and organisational level interventions for reducing risks such as work-related stress and promoting mental health and wellbeing
 - Workers' rights, job security, increased job control and autonomy
 - Work-related stress, ill-treatment and bullying, work-life balance
 - Addressing common mental health problems - stigma and help-seeking
 - Retention and re-integrating people with mental disorders into the workforce - supported employment schemes

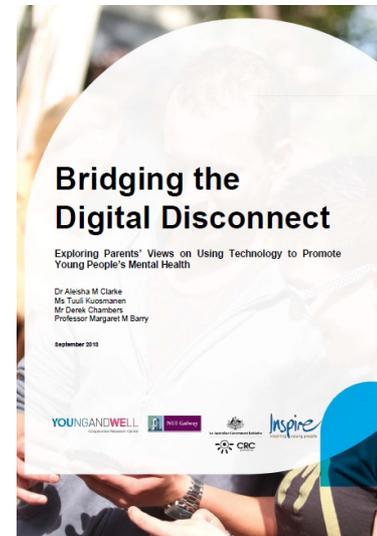
Creating Mentally Healthy Workplaces

- **Evidence:** promising evidence from comprehensive approaches
 - benefits in terms of improved mental health, reduced absenteeism, presenteeism and improved productivity
 - early intervention- outreach & care management; CBT – depression and anxiety
 - stress management, self-compassion – healthcare workers
 - stigma & awareness (*beyondblue* Heads Up; The Working Mind)
 - return to work and supported employment schemes
- **Examples:** WHO Healthy Workplace Framework and Model; UK & Canadian National Standards for Psychological Health and Safety in the Workplace; Supported employment schemes - Clubhouse Model
- **Implementation:** Supportive legislation, policy and management practices, whole organisation approach engaging all stakeholders



Digital Interventions

- Use of internet and social media - tools and a 'virtual setting' for promoting mental health and wellbeing
 - evidence for computerised CBT prevention programmes – Deprexis (Twomey et al., 2020); MoodGym, SPARX for young people
- Clarke, Kuosmanen & Barry (2015) *Journal of Youth & Adolescence* - systematic review of online MHP interventions for young people (aged 12-25 yrs)
 - online gaming; mobile phone interventions
 - structured online modules; blogging & online support
- Kuosmanen, Fleming, Newell & Barry (2017) - evaluation of the SPARX-R gaming intervention. *Internet Interventions*, 8, 40-47
 - low engagement and drop-out rates
- Mental health literacy and digital literacy
Clarke, Chambers & Barry (2017). *School Psychology Intl, Special Issue on Int Approaches to School-based Mental Health*, 1-18

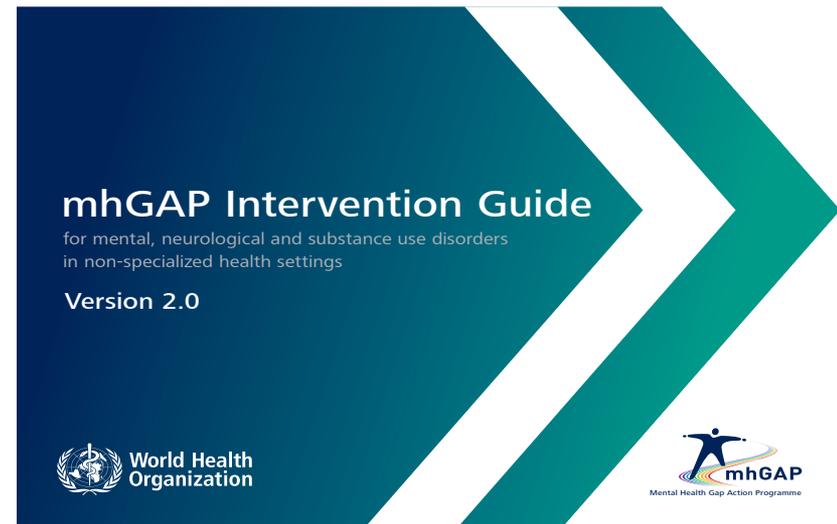


Health Services: Promoting mental health in primary care

- **Promote mental health at the first point of contact with the health services**
 - *training primary health care providers in opportunistic mental health promotion and primary prevention*
- **Focus:** Promotion of mental and physical health and wellbeing through accessible community-based health services across the life course
- **Evidence:** range of evidence-based approaches
 - Early years, families, adults and older people
 - Incorporate mental health promotion as part of routine consultations – screening and brief interventions, digital interventions
 - Early identification of mental health problems and appropriate referral – depression, suicide, dementia
 - Social prescribing or non-medical referrals to community support services, e.g. exercise, arts, learning, social participation, family support
 - Management of mental disorders at primary care level – physical health checks

Health Services: Promoting mental health in primary care

- **Examples:** WHO Mental Health Gap Action Programme (mhGAP) *Intervention Guide*
- **Implementation:** Inclusion within primary care service structures; training of primary care staff to recognise and respond to mental health needs



Health Services: Mental health promoting mental health services

- **Integration of mental health promotion within mental health services**
 - *programmes that promote recovery and strengthen opportunities for empowerment, mental health and wellbeing improvement*
- **Focus:** inclusion of mental health promotion in service delivery and care management plans
- **Evidence:** promising evidence-based practices in routine services
 - Recovery approach - wellbeing
 - Early intervention programmes for depression and psychosis
 - Enhancement of social support for informal carers
 - Psychosocial rehabilitation
 - Psychoeducation for service users and families
- **Examples:** WHO mhGAP *Intervention Guide*; service user involvement in policy and decision-making
- **Implementation:** Inclusion of mental health promotion within service structures and organization; training of staff; changes in the culture of service provision; protection of rights

Society: Promote public awareness and stigma reduction

- **Promotion of public awareness on promoting good mental health**
 - *interventions that promote mental health literacy, stigma reduction and a broader understanding of positive mental health and wellbeing*
- **Focus:** Promotion of mental health as a positive resource and awareness of how to promote and protect mental health in everyday life
 - mass promotion through media – anti-stigma campaigns
 - dedicated websites and education programmes
 - embracing a broader concept of mental health literacy - positive mental health and its determinants
- **Evidence:** promising evidence-based approaches
- **Examples:** country-level campaigns – See Me (Scotland); Like Minds Like Ours (NZ); See Change (Ireland) setting-specific approaches in schools, workplaces, community; social media
Mental Health First Aid; headspace (adolescents & young adults)
- **Implementation:** country-level campaigns plus local community actions

Policy: Mental Health in All Policies

- **Promote policy making at all levels of governance and across sectors that will make a positive difference to mental health outcomes**
 - *policies, legislation and regulations that will create supportive physical, social, economic and environments for mental health and promote mental health as a human right*
 - **Focus:** Improve conditions of daily living, promote equity and social justice
 - housing, planning, urban regeneration, access to green and blue spaces
 - access to education and employment; welfare policies and social security
 - safe living environment (crime and violence) ensuring respect and dignity
 - promote social capital and social inclusion - strengthen community participation and social networks
 - reduce inequity, poverty, discrimination and social exclusion
 - **Examples:** country level in Finland; globally SDGs - healthier living environments
 - **Implementation:** Public policies and actions that will ensure that the conditions that create and promote population mental health are accessible to all
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Evidence-informed Policy and Practice

- Robust case for action - high quality comprehensive interventions carried out in collaboration with young people, parents, families, communities and services can produce ***multiple and lasting positive benefits***
 - lead to improvements not only in mental health but also improved social functioning, academic and work performance and general health and wellbeing
 - effects are especially evident for the most vulnerable groups
 - cost-effective interventions - health, social and economic benefits

Capacity Development for Population Mental Health

- **Policies** that will deliver on improved mental health at a population level – cross-sectoral
 - **Research** to advance and support effective action – implementation, impact of social change interventions
 - **Practice** that will strengthen effective implementation – workforce capacity, delivery mechanisms for mainstreaming mental health promotion
 - **Public engagement** – mental health becomes central to population wellbeing and government policy
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