

# MINDMAP – survey on mental health promotion and mental disorder prevention for older people in Europe

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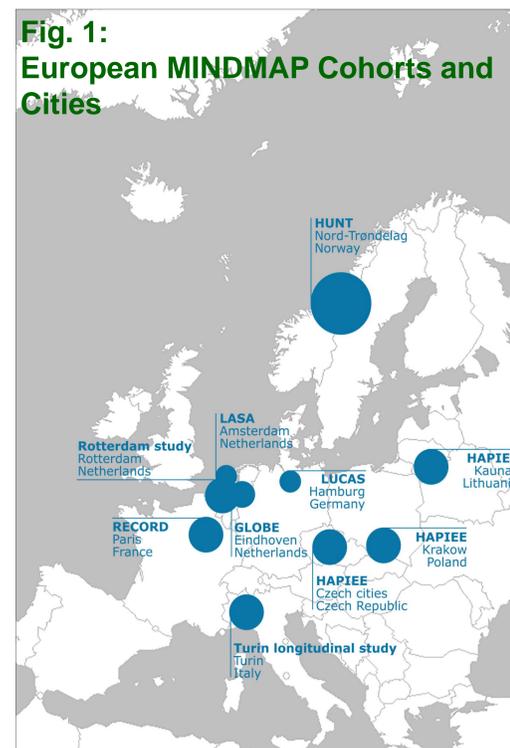
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## Background of the MINDMAP project (2016-2019)

The interdisciplinary MINDMAP consortium identifies opportunities offered by the urban environment for the promotion of mental well-being and functioning of older people by bringing together European cities with urban longitudinal ageing studies: GLOBE, HAPPIE, HUNT, LASA, LUCAS, RECORD, Rotterdam Study, Turin Study (Fig. 1). A survey on mental healthcare planning policies, strategies and programmes dedicated to older persons covering the range from health promotion to need of nursing care was performed in Amsterdam, Eindhoven, Hamburg, Helsinki, Kaunas, Krakow, London, Nord-Trøndelag, Paris, Prague, Rotterdam and Turin. The focus was on data interpretation and the development of future-proof preventive strategies considering functional ability as a combination of physical and mental capacities.

## Objective and methods

Detailed information on healthcare planning policies, strategies and programmes across the European MINDMAP cities were collected to evaluate variations and to delineate recommendations for sciences, policies and planners using experience from evidence-based practice feedback from these cities. First, the MINDMAP partners identified experts in the 12 cities who had best overview of the current mental health sector. The survey questionnaire (Fig. 2) included policies and strategies related to mental health promotion and mental disorder prevention on national and city levels according to the structure of the work packages addressed in the MINDMAP consortium (Fig. 2). The second part focussed on providers and mental health programmes offered in these cities. After pre-testing, semi-structured telephone interviews (1–2 h) were performed always by the same person from the Albertinen-Haus. All interviews were transcribed and independently analysed by two PhD students using a structured evaluation matrix based on the WHO Public-Health Framework for Healthy Aging [1] and the geriatric functioning continuum [2, 3].



### PART 1: POLICIES & STRATEGIES - LEGISLATION & FRAMEWORKS RELATED TO MENTAL HEALTH PROMOTION (NATIONAL AND CITY LEVEL)

Q. 1 Please name the policies and strategies in your city that address mental health for older people (mental health promotion and mental disorder prevention). Please think of those that could be found in documents, such as national/regional demographical concepts, health promotion action plans, national or regional health targets etc.

Q. 2 Which determinants or factors are considered in the implemented policies and strategies (s. Q. 1) of mental health (mental health promotion and mental disorder prevention) for older people in your city? As a background information: According to WHO Mental Health Action Plan within the MINDMAP project behavioural, psychosocial, physical environmental and physical geriatric determinants are in the focus (s. fig. MINDMAP structure of work packages on the right). Please think of those when answering the question.

### PART 2: MENTAL HEALTH PROGRAMMES & PROVIDERS – WHAT IS OFFERED IN YOUR MINDMAP CITY

Q. 3 Which programmes addressing mental health for older people are currently implemented in your city? Please consider programmes that help to improve mental health or to avoid specific mental health problems such as depression, loneliness, medication or alcohol abuse and so on. This may be broad and therefore could range from mental health promotion to mental disorder prevention, treatment and recovery.

Q. 4 Which institutions, organisations or departments are involved in the provision of those implemented programmes addressing mental health (mental health promotion and mental disorder prevention) for older people (s. Q. 3)?

Information on expert: Profession, working field, experience, gender

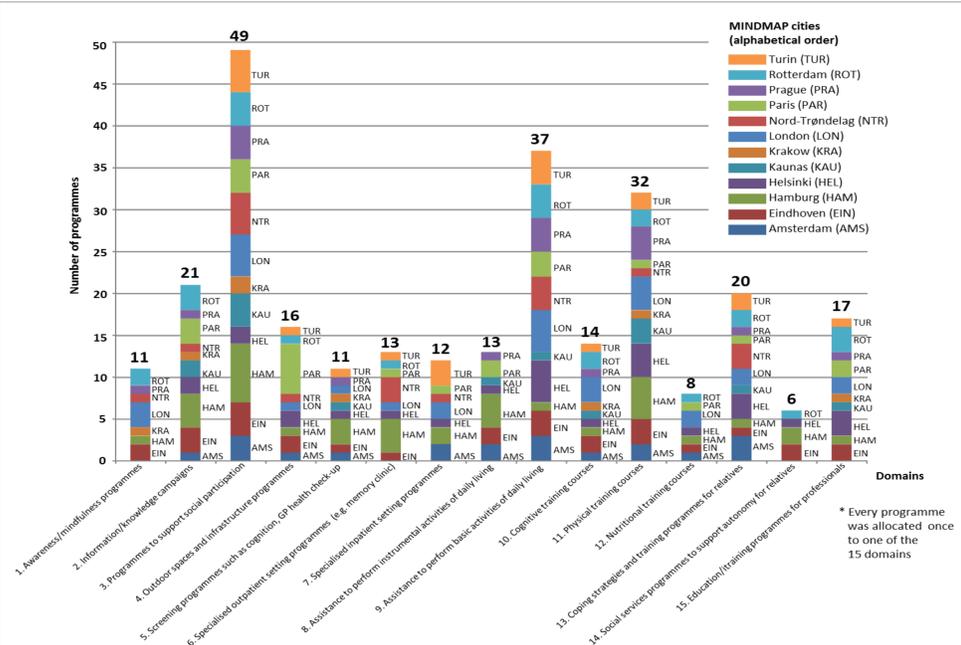
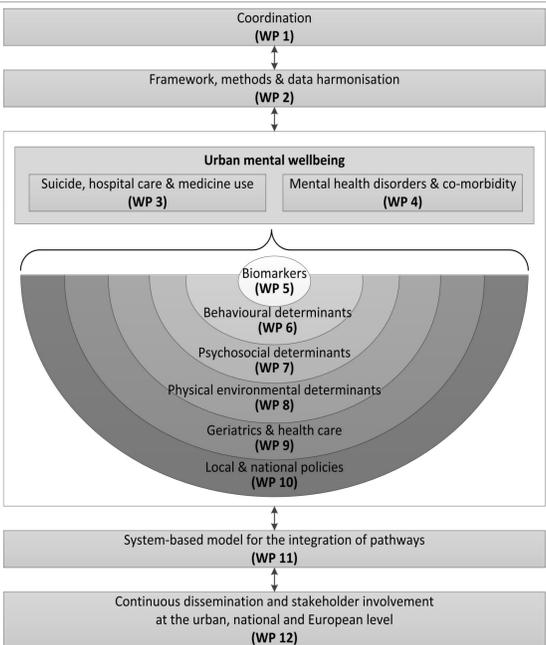


Fig. 2: Structure of the MINDMAP survey and work packages (WP)

Fig. 3: Mental health programmes in old age in the 12 cities (n = 280)

## Results

A complete survey was performed with 15 experts from the 12 cities (Tab. 1) reporting on 41 policies and 280 programmes on city level. Almost every city developed specific mental healthcare planning policies and strategies with corresponding intervention programmes (Fig. 3). Thereof 197/280 programmes were exclusively for the older population; 91/280 explicitly dedicated to health promotion and prevention for older people, and 128/280 were for selected diagnosed-based groups. Examples of good practice were based on national guidelines and local strategies incl. both physical and mental health. Promising intervention programmes for older people made use of target group identification based on the bio-psycho-social approach. The focus on older citizens, target groups and multidimensional programmes could be strengthened [4].

European MINDMAP cohort/city, country/lands	Amsterdam, Netherlands	Eindhoven, Netherlands	Hamburg, Germany	Helsinki, Finland	Kaunas, Lithuania	Krakow, Poland	London, U.K.	Nord-Trøndelag Region, Norway	Paris, France	Prague, Czech Republic	Rotterdam, Netherlands	Turin, Italy		
Longitudinal Cohort	LASA	GLOBE	LUCAS	No cohort	HAPIEE	HAPIEE	No cohort	HUNT	RECORD	HAPIEE	Rotterdam Study	Turin Longitudinal Study		
No. interviews performed	1	1	1	1	1	2	2	2	1	1	1	1		
Profession of expert	Epidemiology	Social Work	Psychology	Nursing Science	Public Health	Medicine	Epidemiology	Medicine	Social Work	Medicine	Public Relations	Medicine	Public Health	Clinical Psychiatry
Experience in the working field	> 10 years	3-10 years	> 10 years	> 10 years	0-2 years	> 10 years	> 10 years	> 10 years	0-2 years	> 10 years	> 10 years	> 10 years	> 10 years	
Gender	Male	Female	Female	Female	Female	Male	Male	Male	Female	Female	Male	Male	Male	

Tab 1: Characteristics of MINDMAP experts (n = 15 in 12 cities)

## Discussion

Policies and strategies should correspond to what is actually offered on city level. Data sources from longitudinal ageing cohorts, central city registries or health registries could be used to appropriately define indicators for the measurement of programme effects. Available evidence-based gerontologic / geriatric expertise could be integrated to develop multidimensional programmes for promotion of mental well-being and mental disorder prevention in the older population. Screening or assessment indices could be applied to address special (risk) groups within the growing heterogeneous older part of populations [4].

References:  
 [1] World Health Organization (2015) World health report on ageing and health. Online: [http://apps.who.int/iris/bitstream/10665/186463/1/9789240694811\\_eng.pdf?ua=1](http://apps.who.int/iris/bitstream/10665/186463/1/9789240694811_eng.pdf?ua=1)  
 [2] Whitson HE, Purser JL, Cohen HJ (2007) Frailty thy name is. . . Phrailty? J Gerontol A Biol Sci Med Sci 62:728–730  
 [3] Bergman H, Béland F, Karunanathan S, Hummel S, Hogan D, Wolfson C (2004) Developing a working framework for understanding frailty. Gérontol Soc 109:15–29. Online [http://www.frail-fragile.ca/docs/Bergman\\_2004\\_English.pdf](http://www.frail-fragile.ca/docs/Bergman_2004_English.pdf)  
 [4] Neumann L, Dapp U, Jacobsen W, van Lenthe F, von Renteln-Kruse W (2017). The MINDMAP project: mental well-being. Z Gerontol Geriat DOI 10.1007/s00391-017-1290-7

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