



## Showcase event “Synergies for integrated care”

28 October – 29 October 2024, Rome, Italy



Co-funded by  
the European Union



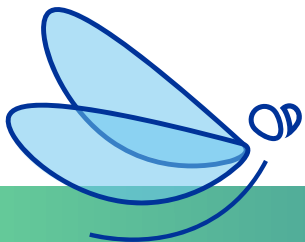
EU4H-2023-JA-IBA-04 'Healthier Together' EU  
NCD initiative – Mental health

## **MENTAL HEALTH TOGETHER – JA MENTOR**

Sibilla Neimane

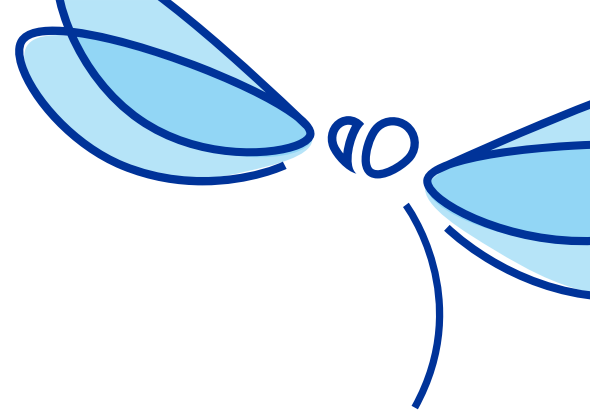
Coordinator, leader of WP1

National Centre of Mental Health, Latvia

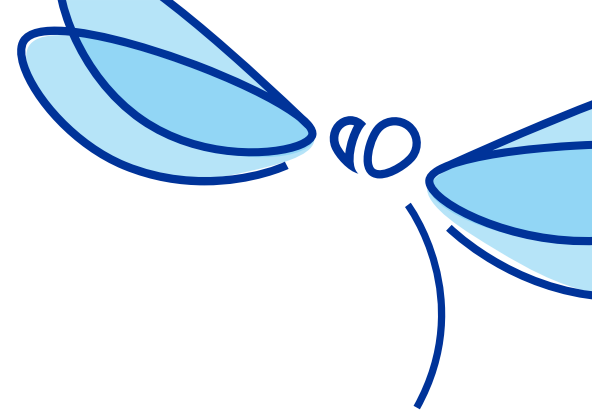


# What a Joint Action is?

- A **coordinated initiative** in which EU Member States and other eligible countries collaboratively work on health-related projects to achieve specific **public health goals**.
- These actions are **co-funded** by:
  - the European Commission (up to 80%)
  - the participating countries (around 20%)
- **Main goals** – to tackle major health issues, improve healthcare systems, and support **EU-wide** health policy implementation.

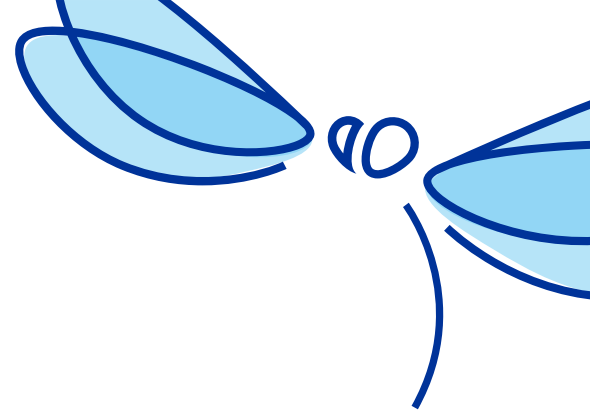


# JA MENTOR on the map



- Start date **September 1st, 2024**
- Duration **36 months**
- Total budget **€7 499 921,04**
- EU contribution **€5 999 936,42**
- **43 Partners**
- **20 Countries**
- 6 Work packages
- 13 Tasks
- 31 Deliverables

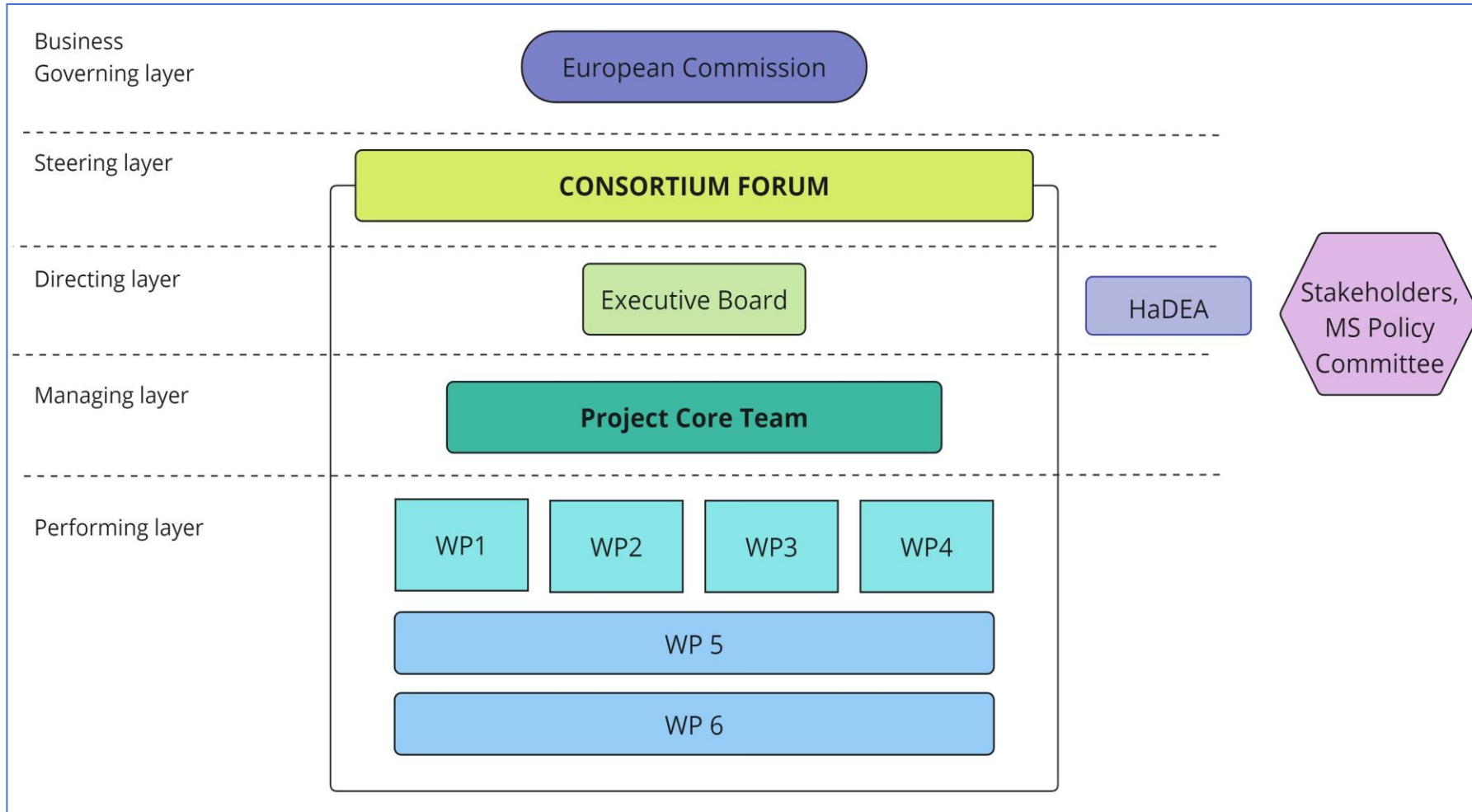
# Project aims and goals

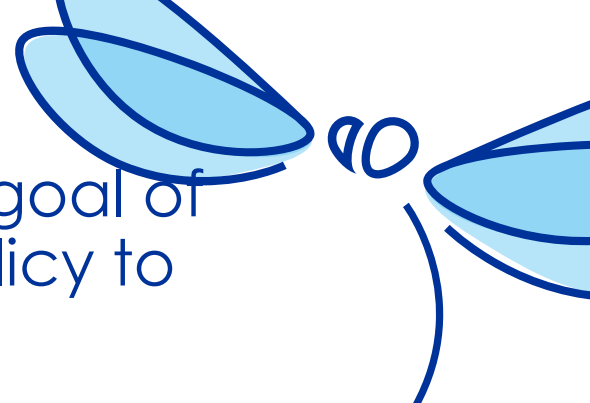


MENTOR aims at promoting mental health by:  
sharing experiences from the **political to the clinical** scope,  
incorporating **evidence-based best practices** and  
adapting **initiatives** to achieve **long term sustainability** of  
promoting mental health and well-being both at **personal** and  
**population level**.



# JA MENTOR Governance structure



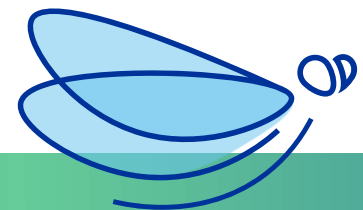


**WP5 activities** are designed to meet the overall MENTOR goal of promoting mental health by sharing experiences from policy to clinical and from individual to population levels.

- Mapping an implementation of a **Mental Health in All Policies (MHIAP)** approach and developing a flexible methodology/process to support Member States at national and regional levels.
- Supporting prevention/promotion **actions targeted at young people** in community settings.
- Involvement and joint ownership of **people with lived experience (PLE)** in mental health policies.
- **Integrated care pathways** (policies, funds, services, human resources, etc.) for promoting social inclusion and quality of life for people with Mental Health disorders targeted on the person's needs and preferences and aimed at recovery and inclusion in the community.

# WP5 Outcomes

- **Support policy-makers** at national and regional levels in designing, implementing, and innovating MHIAP approaches by developing a flexible methodology.
- Share methods and best practices to identify evidence-based practices in communities, focusing on **vulnerable groups**, while addressing stigma and discrimination related to mental health and addiction.
- Provide recommendations for **stakeholders** on how to **better include people with lived experience** (PLE) in mental health policy-making and services.
- Offer care pathways promoting proactive, **person-centered care** for people with mental disorders through the **Personal Health Budget**, adapting service designs for different European contexts.





# WP6: Innovative digital solutions for improving Mental Health accross Europe

## Global goals

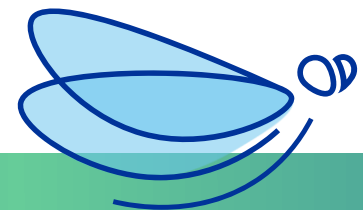
- Improve access to interventions
- Support vulnerable groups
- Enhance early detection

## Strategic approaches

- Leverage modern technology
- Share and develop evidence-based resources

## Main activities

1. Identify & share good practices
2. Adapt & pilot digital intervention tools
3. Develop & pilot online self-report tools & guidelines



# WP6 Outcomes

## At project end

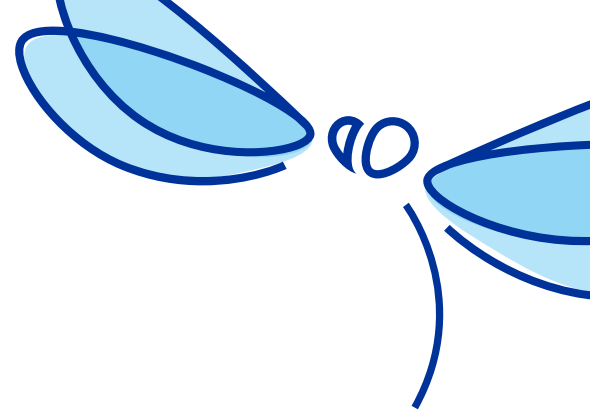
- Online repository: Mental health promotion & assessment
- Recommendations for action against early problematic digital technology use
- Piloted digital self-report tools for Adverse Childhood Experiences, youth mental health
- Pilot study mapping youth mental health across countries, including displaced persons from Ukraine
- Validated digital self-administered version of Composite International Diagnostic Interview

## Long term

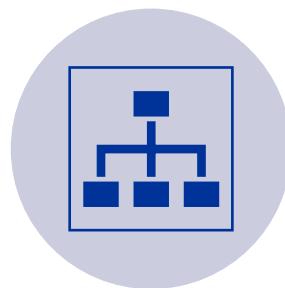
- Improved accessibility of mental health interventions, especially for marginalized groups
- Enhanced capability to identify at-risk individuals
- Scaled-up, affordable interventions across Member States



# How to ensure compliance?



**Project Core Team**  
meetings every  
**2-3 weeks**



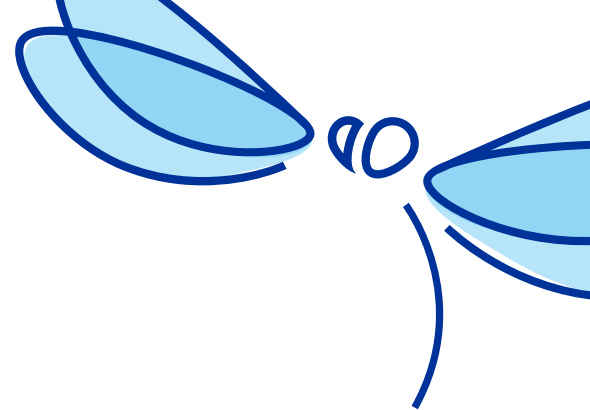
**Monitoring and evaluation** (WP3) of  
activities



**Project budget control**  
and **interim progress**  
**reports** every 6 months



**Sustainability is the key!**  
No overlaps with other  
projects



# Sustainability is the key!

- Building on previously established boards:
  - Stakeholders
  - Member State Policy Committee
  - Other expert groups
- Involving coordination and sustainability from the previous JA
- Monitoring in a sustainable manner – Spain (Biosistemak) leading WP3, now they will coordinate the new project
- Collaboration between different **on-going Joint Actions**
- **Coordinator network**
- **Sustainability network**

# Lessons learned?

- Challenging to include activities for all target groups – must **narrow down** target groups to tailor activities for them
- Online tools in mental health provide easy access to information on low-cost solution, available to use in various community settings
- MHIAP, promotion/prevention activities, other guidelines and methods are **tailored to be used beyond the lifespan of the JA MENTOR**
- A user-friendly tools/screening instruments are essential to ensure accessibility across Europe
- Sharing experience - **learning from other projects**, collaboration with HaDEA and DG Sante are crucial

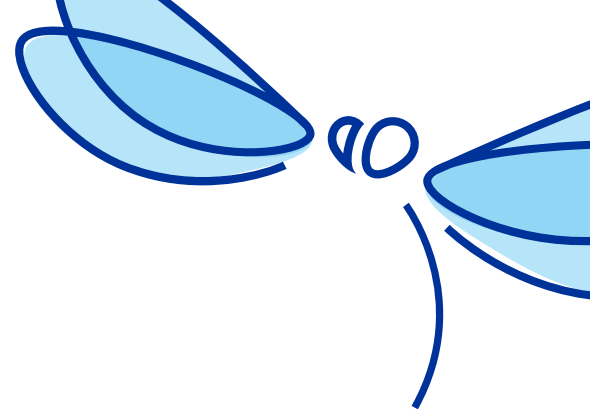
# What can be done to improve JA even more?



- **Sharing experiences:**
  - Learning from other projects, partners, seeking guidance
  - Close collaboration with HaDEA officer can save the day
  - Strong partners in the management team is crucial
- Prepare coordinator/WP leaders with **learning workshops** at the start of the project (peers?)
- Proactive involvement
- Provide coordinator with additional funds
  - During project development phase
  - During project implementation phase (e.g. higher funding rate)
- **Develop a Joint Action Repository** (web pages, resources, deliverables)

# Coordinator Team

## National Centre of Mental Health, Latvia



**Sibilla Laura Neimane**  
Project manager



**Dr. med. Liene Sīle**  
Scientific officer



**Dāvis Knesis**  
Assistant project manager



**Linda Barone**  
Financial coordinator



**Evita Baukerte**  
Financial coordinator



**Anīta Daiga Priēžkalna**  
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**Inese Minajeva**  
Legal officer



**Fabio Abbrescia**  
Project co-coordinator, PROMIS



# Thank you very much!

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