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# The impact of a mental health promotion programme on depression awareness

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Ljubljana, 14-19 March 2025

Mental disorders are on the rise worldwide and have a significant impact on individuals' lives and work. In 2020, the number of people suffering from anxiety and depression increased significantly due to the pandemic COVID - 19:

> 26% in anxiety disorders and

> 28% in depressive disorders.

Mental disorders often go unrecognised



### 50% who suffer of MH problems, DO NOT SEEK professional help!

### The reasons for such behavior:



Van Gogh

- Lack of knowledge about the characteristics of mental disorder
- Lack of knowledge about the consequences of mental disorder
- Stigmatization

The concept of Mental health literacy





### Is of crucial importance to:

raise public awareness of mental disorderstheir treatment and

➤ reduce stigma

MHL programs should be tailored to specific target groups and circumstances: ➤ Different work environment ➤ Age ➤ Gender

➤ Disabilities ....



Source: Chat GTP

## **Simple -** What does the acronym stand for?



The multidisciplinary programme "With increased mental health literacy to better management of mood disorders" (acronym: OMRA) was launched in Slovenia in 2017.

### Main OBJECTIVE of the OMRA programme: to raise the level of mental health literacy

The construct refers to **knowledge**, **beliefs** and **attitudes** about mental disorders.

Knowledge that helps in the identification, treatment and prevention of mental disorders .

Knowledge empowers people with mental health problems and makes others aware that mental disorders are treatable, that most people recover from mental disorders, and that they can lead creative and fulfilling lives..

REDUCE SOCIAL STIGMA AND SELF-STIGMA → SEEK HELP IN TIME

## The aim of the study

- ➤To examine participants' levels of depression literacy before and after attending the workshops and
- to determine whether selected Socio-demographic variables influence levels of depression literacy.





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### **Online and onsite workshops OMRA**

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Workshop	N of implementations	N of participants	Workshops delivered	
OMRA 1 58 (on-site) + 35 (on line)		1.485	October 2018 - March 2024	

Instrument used: D-lit; *The Depression Literacy Questionnaire; before and after the 60 minutes OMRA workshop on depression.* 

### **Sociodemographic characteristic of the study participants**

### **Results 1**

Gender (%)	Age (Mean age <u>+</u> SD)	Place of residence (%)	Education (%)	Employment status (%)
Female: 87.9	M=44.27 (SD <u>+</u> 12.12)	Urban: 48.6	Primary school or less: 2.5	Student: 3.8
Male: 12.1	M=42.70 (SD <u>+</u> 10.95)	Rural: 51.2	Shorter school education: 0.5	Employed: 79
			Vocational school: 4.5	Not employed: 10.6
			Secondary school: 15.5	Retired: 6.6
			Higher education: 12.3	
			Faculty, university: 54.3	
			Master's or doctorate: 10.3	



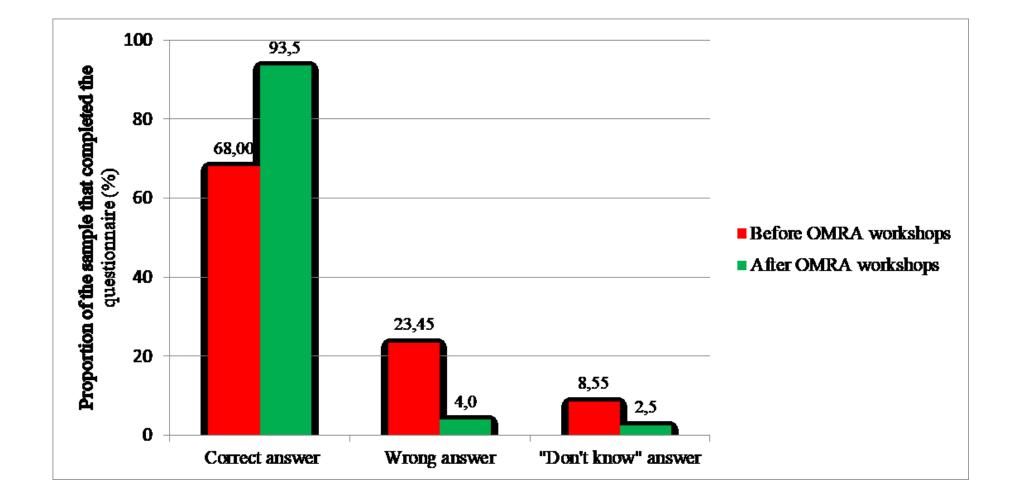
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### Impact of the OMRA workshops on depression literacy level

### **Results 2**

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## The answers of D-lit most frequently answered *wrong* or with *"do not know"* before workshops

#### Difference in **Proportion of Proportion of the** the sample the proportion sample with the with the of wrong wrong answer wrong answer answers Questionnaire (D-lit) items **BEFORE the** AFTER the **BEFORE** and workshops take workshops AFTER the place take place workshops (%) (%) (%) Counselling is as effective as cognitive behavioural therapy 67.6 34.4 33.2 for depression. Clinical psychologists can prescribe antidepressants. 65.4 26.3 39.1 Many treatments for depression are more effective 50 34.6 15.4 than antidepressants. Moderate depression disrupts a person's life as much 46.2 31.2 15 as multiple sclerosis or deafness. People with depression often speak in a rambling 42.1 16.7 25.4 and disjointed way. Cognitive behavioural therapy is as effective as 43.3 19.6 23.7 antidepressants for mild to moderate depression.

### **Results 3**



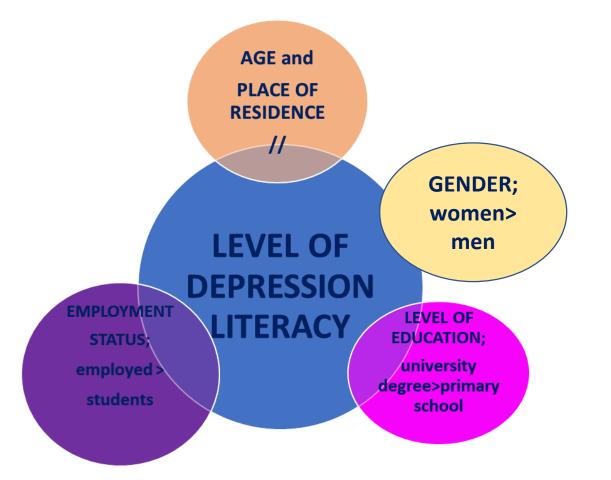


Effect of sociodemographic variables on the level of depression literacy









### The OMRA programme - an example of good practice

### In the national report of WHO

(Looking back, looking forward: Rapid assessment of the mental health system in Slovenia; september 2020; p. 10-8)

OMRA is highlighted as an example of best practice that contributes in an innovative way to improving mental health literacy in Slovenia.

<u>https://dmi.zrc-sazu.si/sites/default/files/who\_porocilo\_-</u> \_rapid\_assessment\_of\_the\_mental\_health\_system\_in\_slovenia\_.pdf WORLD HEALTH ORGANIZATION REGIONAL OFFICE FOR EUROPE



ORGANISATION MONDIALE DE LA SANTÉ BUREAU RÉGIONAL DE L'EUROPE

WELTGESUNDHEITSORGANISATION

#### ЕМИРНАЯ ОРГАНИЗАЦИЯ ЗДРАВООХРАНЕНИЯ ЕВРОПЕЙСКОЕ РЕГИОНАЛЬНОЕ БЮРО

#### Looking back, looking forward:

#### Rapid assessment of the mental health system in Slovenia

Report of a virtual mission by the WHO Regional Office for Europe (September 2020)

#### Summary

Slovenia is in the process of reviewing its mental health system performance and planning the future development of services in the country. As part of this, the WHO Regional Office for Europe was requested by the Ministry of Health to undertake a mental health system assessment, with a view to identifying recent achievements as well as continuing gaps in service provision; this evaluation will inform the continuing implementation of the national mental health action resolution and plan for the period 2018-2028.

This report sets out the context for and findings of the mental health system assessment mission. Members of the mission team were Dr Dan Chisholm (Programme Manager for Mental Health), Dr Aiga Rurane (WHO Representative to Slovenia) and Dr Francesco Amaddeo (WHO consultant), with support from other regional and country office colleagues. Owing to the prevailing COVID-19 situation in Europe in 2020, the mission was carried out virtually over the course of three working days in early-September, during which a wide range of national stakeholders were invited to share their views concerning past achievements as well as the current status and future needs of the mental health system and services.

Looking back at progress made since an earlier WHO mission in 2015, a key development has been the preparation and approval of a new Resolution on mental health for the period 2018-2028, which provides a comprehensive framework and strategy for multi-sectoral action on mental health service development in the country. There has been important progress made in implementing different elements of the Resolution as well as the recommendations of the earlier WHO mission, notably the establishment of several new community-based mental health centres. However, mental health and social care services are inequitably distributed, remain fragmented and mainly rely on institutional modes of service delivery. Accordingly, several opportunities exist for improved performance, including closer inter-sectoral planning and coordination, renewed prevention efforts, enhanced service access and further development of the mental health workforce.

### Investing in mental healt pays off!

Increased mental health literacy Identify mental health problems in time Seek appropriate professional help Reduce economic burden of mental disorders

*By investing in mental health prevention* and *promotion programmes* for depression and anxiety alone, countries save *four times* as much.

### Thank you for your attention!

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This presentation was prepared as part of the Research Program Group "Studies on Distress and Being Well" (code: P5-0115-23), which is co-funded by the Slovenian Research and Innnovation Agency and Programe OMRA, co-funded by the Ministry of Health.



