- 'THE RECOVERY APPROACH AND THE COMPREHENSIVE MENTAL HEALTH PLAN FOR ANDALUSIA' -

Organisation / Country:	Andalusian Health Service / Andalusia (Spain)
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Summary:	**1. The regional context in Andalusia:**
	• Andalusia is a region with a population of 8,449,985 inhabitants.
	• 19.5 percent of the population is younger than 18 years and 15.4 percent is older than 64 years.
	• Size: 87,597 square kilometers
	• The life expectancy differs between men and women. On average, the life expectancy at birth is 82.1 years
	    ▪ For men: 78.0 years
	    ▪ For women: 83.6 years
	
	The mental health network in Andalusia:
	• Within the health sector, primary care and specialised mental health services exist. They are public and follow a community model. Social support programmes (public & community based)
	• Apart from public structures, users and movements of family relatives exist.
	• Access to basic services
	• Organisational structure: clinical management units
	• Coordination:
	    ▪ Cooperative model between and within sectors
	    ▪ Community approach and recovery perspective
	
	The historical context has been strongly influenced by the psychiatric reforms in Spain between 1984 and 1994.

2. The comprehensive mental health plan

The comprehensive mental health plan in the region of Andalusia is based on clear key principles, enabling factors of implementation, barriers to implementation, evaluation data, and is under the influence of the economic crisis.

Enabling implementation factors to the recovery approach
- An enabling factor for the implementation is the institutional support from the Andalusian Government.
- The regional plan seeks to establish community-based mental health and psychosocial rehabilitation models.
- The existence of a family movement network and a new self-management users' movement was supportive in the implementation of the regional plan.
- The regional plan links with international and national initiatives (e. g. UN, WHO, EC, Spanish Ministry of Health and Social Services).
- The regional mental health plan connects with regional policies across different areas:
  - Organisation of mental health services around the clinic management units (last change in 2008)
  - Public health law of Andalusia (last change in 2011)

Implementation barriers of the recovery approach
- Stigma and discrimination
- Persistence of a hierarchical health structure with a supremacy of a bio-medically oriented mental health model
- Coordination and cooperation problems between and within sectors
- Budget limitations due to the current economic crisis
- Professionals, family members and users resistance to recovery
- Cultural barriers to accepting the principles underlying the recovery approach

3. The recovery approach in Andalusia

Actions to promote recovery and empowerment

The different actions cross-cut through a wide range of sectors and activities:

- In the field of health promotion:
  - Promote socio-emotional wellbeing of children and adolescents in school settings.
  - Promote health assets in adult women through a socio-educational group strategy in the field of primary care.
- A guide to self-help resources for depression and anxiety – 4 brochures – (adapted from the Scottish NHS, Ackland et al 2006)
- Active participation of users and relatives in the implementation of the mental health plan and mental health services.
- Support and reinforce cooperation between public services and the associative movements of users and relatives
- Promotion of peer support programmes within mental health services.
- Awareness-raising and training on human rights & mental health in the context of the UN Convention on the Rights of persons with disabilities.
- 2013: Psychiatric Advance Directives and joint crisis plan
- For the field of mental health and employment: good work generates health, prevents mental health problems, and helps people with mental illness in their recovery. Actions to achieve that may include: ▪ Workplace health promotion:
  - Support people with mental health issues to stay in employment during treatment (European Project: PROGRESS 2007-2013)
  - Work integration programs for people with mental health problems
- Fighting stigma & discrimination: general public and target audiences (media professionals, health professionals, adolescents and users and relatives)

Recovery principles in other health strategies
- The recovery principles are being included in other health strategies in cooperation with users and relatives associative movements:
  - Amyotrophic Lateral Sclerosis

- Chronic health conditions in childhood and adolescence
- Hemophilia syndrome
- Prader-Willi syndrome
- Chronic bowel infections

Issues:	**Impact of economic crisis at national level** • The economic crisis has created high risks to mental wellbeing across Spain. The crisis increased mental health problems, anxiety, somatoform and alcohol-related disorders. The social and economic drivers of these mental health problems are, for example, unemployment, poverty (e.g. family households and income poverty), as well as housing difficulties (e.g. mortgage payment and rent coverage). [*Source:* findings from Spanish primary care settings 2006-2010 (Gili et al, 2012)] **The regional mental health context in Andalusia 2006-20012** • There have been substantial increases in the number of people treated with mental health problems. At the same time, however, the containment of expenditure has limited the coverage and quality of services. Those developments have implications for the regional Mental Health Plan: ▪ Need to restructure treatment programmes and services to meet increased demands ▪ Reduce the number of programmes and actions in mental health clinical management units
Resources:	n. a.

Objectives:	**Key Principles**
	
	• The recovery approach is one of the key principles of the new health and social model that is emerging in Andalusia, in the framework of the new Regional Ministry of Health and Social Welfare.
	• The regional mental health plan is based on six key objectives:
	
	1. **Quality improvement**
	2. **Equality**
	  • Commitment to work towards the reduction of inequalities, including gender inequalities
	  • Protection of the most vulnerable

	• Respect for cultural identities
	3. **Efficiency**
	  • Mental health promotion
	  • Mental illness prevention
	  • Patients and families care and treatment improvement
	4. **Users and families involvement**
	    • The recovery approach is reflected in the involvement of users and families.
	5. **Promoting professional career, training and research**
	6. **Support the organisation's human capital**

Outcomes:	The implementation has been evaluated. 64 percent of the actions have been identified in the monitoring system.
	- In 2013, the relevant stakeholders were designing health outcomes indicators to have a more nuanced evaluation. - Data from the national health survey measure the self-perceived health of citizens through surveys. - There was a comparison of results and risk factors among a particular age group between 2006 and 2011/2012: - Percentage of 15-year-old among the Andalusian population declared having suffered from a depression, an anxiety or other mental health problems in the past 12 months: **2006:** 14.9 percent **2011-2012:** 11.2 percent - Percentage of 15-year-old among the Andalusian population that faces risk for a mental health problem: **2006:** 20.1 percent **2011-2012:** 21.5 percent
Evaluation:	n. a.