

## Invited review

# The Athens Mental Health Promotion Educational Programme

Maria Vassiliadou

George Christodoulou

André Tylee MD FRCGP MRCPsych  
Professor of Primary Care Mental Health

David Goldberg  
Emeritus Professor

Institute of Psychiatry, King's College, London, UK

## Introduction

Out of the ten recommendations of the World Health Organization (WHO) incorporated in the World Health Report (2001) one of the most important, but also most neglected ones, is recommendation no 4, namely education of the public on mental health issues.<sup>1</sup>

The World Psychiatric Association (WPA) Consensus Statement on Psychiatric Prevention (2003), produced by its Section on Preventive Psychiatry, advocates 'special attention to dissemination of information on prevention to the individuals, families and population at large, through special programmes and with the assistance of the mass media'.<sup>2</sup>

Furthermore, the statement emphasises the importance of dissemination of information concerning health promotion and the need for education of medical staff and non-professional caregivers concerning life stresses and their management. It also underlines the importance of early detection of symptoms, and early intervention and provision of help to primary care physicians, staff of medical and other services, the individuals, their families and the community at large in order to be able to recognise mental disorders.

Though an overwhelming number of physical doctors of all specialties are aware of their lack of technical training in mental health, they are usually expected to find answers to a very large array of mental problems that patients display, while they seek help for a physical ailment.<sup>3</sup>

Agitation, hostility, defence mechanisms, feelings of helplessness, shame and guilt may hinder

the co-operation of the patient with the doctor and reflect an adverse interaction between the patient's personality and their illness.<sup>4</sup>

Depressive disorders, anxiety and panic, eating disorders, sleep disorders, etc, may also disturb the therapeutic approach and its effectiveness, thus underlining the need for specific mental health strategies to be acquired by health professionals.<sup>5</sup>

It is, therefore, important to educate and form alliances with health professionals and also community leaders who can convey the appropriate messages and contribute to the promotion of mental health in the community.

This is indeed crucial in view of evidence that in many countries mental disorders remain undetected not only by lay people but also by primary care physicians.<sup>6,7</sup>

Education of the public has been considered as crucial for reasons associated with both public health scopes and needs of each individual. It can help awareness of the high prevalence of mental disorders, as well as awareness of the need for their early recognition and treatment. Avoidance of stigmatisation and discrimination can also be promoted by education of various sectors in the community. Empowering lay and multidisciplinary groups who are indirectly involved in mental health (such as journalists, judges, solicitors, police and military officers, teachers, the clergy, etc) to recognise and minimise risk factors early, has been considered essential in order to promote positive aspects of mental health.<sup>8</sup>

In view of all the above and in keeping with the recommendations of the WHO and the WPA, an educational challenge was conceived originally by the Athens University Department of Psychiatry

(Department of Mental Health Promotion) and the Hellenic Psychiatric Association aiming at:

- the sensitisation on issues of mental health not only of primary care physicians and other health professionals but also of societal agents, in order to help these recipients modify and advance their knowledge, dexterities and attitudes
- the creation of new educational nuclei in each participant's professional setting that could contribute through a 'radiation' effect to the advancement of the mental health of the population at large.

## The aims of the programme

The newly established Department of Mental Health Promotion of Athens University, which was instrumental in the initial goal setting, started to organise a series of initiatives for the implementation of the above targets. One of these initiatives, to be further discussed in detail, was a three-semester educational programme designed in such a way as to prepare the trainees to become collaborators and subsequently trainers in their own professional setting.

The programme aimed at:

- the continuing education of non-psychiatric physicians and other health professionals in mental health promotion and prevention, as suggested by Goldberg, Gask and Sartorius and the London WHO Collaborative Centre for Research and Training.<sup>9,10</sup> According to these directives, not only psychiatrists but also physicians of other specialties who deal with psychiatric patients as well as primary care professionals (nurses, psychologists, social workers, etc) must receive training in order to be able to:
  - recognise a psychiatric disorder as early as possible
  - avoid increasing therapeutic cost by unnecessary referrals of patient from one service to the other
  - identify which patient must be referred to the psychiatric services, when and how
  - avoid stigmatising the psychiatric patient by providing inadequate care and by labelling the patient as 'problematic', 'disturbing', 'hysterical', etc
  - promote de-stigmatisation and protect the personality of the patient and his legal rights
  - facilitate the autonomous (or semi-autonomous) living of the patients in the community

- promote rehabilitation of these patients through which their socio-economic re-integration can be achieved
- the training and sensitisation of key social and community agents on issues of mental health, in order to create alliances and thus facilitate and promote psychiatric reform. Such agents are considered to be educators, priests, judges, army and police officers, journalists, etc.

So, the underlying goal of the programme was primarily to train trainers in basic issues of psychiatric prevention and mental health promotion, with special emphasis on positive mental health. An additional aim was to encourage participants to be involved in research, sensitise themselves to crucial issues of mental health related to their professional field and encourage interaction between various professional groups.

## The trainees

A university degree was a necessary condition for admission to the programme. A committee of three senior psychiatrists from Athens University, the Hellenic Psychiatric Association and the Society of Preventive Psychiatry held an interview of each candidate on the basis of specific guidelines.

The candidate trainees were 120 people, selected from:

- health professionals:
  - physicians (GPs, specialists in internal medicine, hospital doctors)
  - nurses
  - psychologists
  - social workers
- community agents:
  - educators
  - priests
  - army officers
  - police officers
  - jurists (judges, public prosecutors)
  - journalists and other mass media professionals.

It was thought that joint training of professionals of various orientations would be beneficial for a variety of reasons among which the establishment of a dialogue among these professionals and the adoption of a common language were considered to be of particular importance.

## The design, structure and progress of the programme

The programme's design was very demanding and required quite a lot of preparation before its onset. The organisers contacted the Archbishop of Greece, the General Director of the Armed Forces, the Director of the Police, the Chairman of the High Court, the Director of the Diplomatic Service, the President of the Association of General Practitioners, the President of the Union of Journalists and other top community agents and asked each of them to suggest five representatives from each professional group to take part in our training programme.

The programme was carried out originally in collaboration with the Hellenic Psychiatric Association and the Society of Preventive Psychiatry, and later on with the Institute of Psychiatry, King's College Hospital, and the World Psychiatric Association, Section of Preventive Psychiatry.

The teaching material was decided upon on the basis of the educational needs of the recipients. The basic WPA training recommendations, the textbook of psychiatry of Athens University, and the book on preventive psychiatry were taken into account.<sup>9,11-13</sup>

Promotion of mental health, by definition, includes the protection of the human personality in its biological, moral and social dimensions.<sup>14</sup> For this reason, psychiatric intervention for the improvement of the living conditions of a patient should also include discussion of moral values.<sup>15</sup> Thus, training of the above non-psychiatric physicians and other health professionals, as well as of the societal agents with reference to the need for biological, psychological, social and ethical management of the patient as a person and not as a 'recipient' of the illness, was included since its earliest design in the educational programme.

Teaching staff were members of the academic department of psychiatry of Athens University, Sir David Goldberg, Professor André Tylee and Professor Graham Thornicroft from the Institute of Psychiatry (King's College Hospital) and members of the Hellenic Psychiatric Association and the Society of Preventive Psychiatry with academic credentials.

The programme consisted of a theoretical part and a practical part. The theoretical part consisted of Part I (one semester) and Part II (two semesters). The practical part consisted of sessions of small groups of professionals from each profession to discuss mental health issues related to each particular professional group.

The measurement of the outcome of the programme was carried out on the basis of a questionnaire delivered to the participants at six months (that will be re-administered at 18 months)

and on the basis of Cohen and Struening's attitudes about mental health questionnaire.<sup>16</sup> The dysfunctional preconceptions questionnaire (DPQ) was also given.<sup>17</sup>

The first part of the programme finished in June 2003 and the first semester of the second part finished in December 2003. The attendance was excellent. There was quite a lot of feedback from the audience and the programme was received enthusiastically by all concerned. One of the most rewarding aspects of the programme was that it provided the opportunity for interaction between the professional groups that participated in the programme. There was also feedback between the teaching staff and the participants that turned out to be particularly productive because the participants were of high calibre and their credentials allowed them to offer constructive criticism of the programme and fresh ideas concerning its improvement.

All parties concerned, organisers, teachers and trainees were very enthusiastic about the programme and one year after its start they retain their enthusiasm.

In conclusion, the educational programme we have presented, and its implementation, is a paradigm of educational outreach to the community that we believe has benefited all parties concerned – teachers, trainees and the community.

A more detailed account of the outcome of the programme will be presented at a later stage.

## REFERENCES

- 1 World Health Organization. The way forward [Chapter 5]. *The World Health Report 2001. Mental Health: new understanding, new hope*. Geneva: World Health Organization, 2001.
- 2 Lecic-Tosevski D, Christodoulou G, Hosman C *et al* for the World Psychiatric Association. Consensus Statement on Psychiatric Prevention. *The Sections' Newsletter* 2003;6:6-8.
- 3 Turton P, Tylee A and Kerry S. Mental health training needs in general practice. *Primary Care Psychiatry* 1995;1:197-9.
- 4 Rundell J and Wise M. *Essentials of Consultation-Liaison Psychiatry*. Washington: American Psychiatric Press, 1999.
- 5 Goldberg D and Vassiliadou M. Specific mental health strategies in general practice. In: Christodoulou G, Liappas I, Tomaras VI and Vassiliadou M (eds). *Psychiatry in General Practice*. 2003, pp. ???.
- 6 Mavreas V. Prevention of mental disorders in primary care. In: Christodoulou GN, Lecic-Tosevski D and Kontaxakis VP (eds). *Issues in Preventive Psychiatry*. Basel: Karger, 1999, pp. 17-29.
- 7 Tylee A. Depression in the community: physician and patient perspective. *Journal of Clinical Psychiatry* 1999;60(Suppl 7):12-16.

- 8 Mezzich JE and Schmolke MM. The relevance of comprehensive clinical diagnosis to prevention and health promotion. In: Christodoulou GN, Lecic-Tosevski D and Kontaxakis VP (eds). *Issues in Preventive Psychiatry*. Basel: Karger, 1999, pp. ???.
- 9 Goldberg D, Gask L and Sartorius N. *A General Introduction to Training Physicians in Mental Health Skills*. Geneva: World Psychiatric Association, 2001.
- 10 World Health Organization Collaborative Centre for Research and Training for Mental Health. *WHO Guide to Mental Health in Primary Care*. London: Royal Society of Medicine Press, 2000.
- 11 Goldberg D and Gater R. Implications of the World Health Organization study of mental illness in general health care for training primary care staff. *British Journal of General Practice* 1996;46:483-5.
- 12 Christodoulou GN. *Psychiatriki*. Athens: Beta Publishers, 2000 [in Greek].
- 13 Christodoulou GN, Kontaxakis V and Economou M. *Preventive Psychiatry*. Athens: Beta Publishers [in Greek].
- 14 Tudor K. *Mental Health Promotion*. London: Routledge, 1999.
- 15 Spinetti G *et al*. Section of Ecology, Psychiatry and Mental Health, WPA. In: Christodoulou GN (ed). *Advances in Psychiatry*, 2002.
- 16 Cohen and Struening 1962.
- 17 Vassiliadou *et al* 2003.

#### CONFLICTS OF INTEREST

None.

#### ADDRESS FOR CORRESPONDENCE

Professor André Tylee, Professor of Primary Care Mental Health, Health Services Research Department, Institute of Psychiatry King's College London, De Crespigny Park, London SE5 8AF, UK. Tel: +44 (0)20 7848 0150; fax: +44 (0)20 7848 0333; email: [spjuatt@kcl.ac.uk](mailto:spjuatt@kcl.ac.uk)

*Accepted April 2004*