DATAPREV: EVIDENCE-BASED PROGRAMMES FOR PROMOTION AND PREVENTION IN MENTAL HEALTH

A database, guidelines and training for policy and practice
Outline of a research project funded by the European Commission

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BACKGROUND

Mental health disorders account for 20 per cent of European ill-health and premature death. The implementation of mental health promotion (MHP) and mental disorder prevention (MDP) is poor. The greatest barrier is the lack of evidence-based knowledge: there is a mismatch between what is known about evidence-based programmes and what is implemented. The consequent reliance on interventions of unproven effectiveness wastes human and material resources. The World Health Organisation and the European Commission have called for the development of integrated databases of mental health information, on both delivery and implementation of evidence-based activities.

DATAPREV is a multi-country 6th Framework European project led by Radboud University, Nijmegen, Netherlands. It began on 1 January 2007 and concludes on 31 December 2009.

AIMS AND OBJECTIVES

Gathering and building on research and evidence across settings and relevant sectors, DATAPREV aims to add value to EU and country policies by deepening the understanding and enhancing the scientific base for mental health promotion and mental disorder prevention.

DATAPREV will develop a standardised online information system collecting information on available MHP and MDP practice for infants and children, and working and elder populations. It will describe and synthesise the evidence base and describe programme outcomes for increased cognitive and emotional development, reduced mental ill health, decreased psychiatric symptoms and disorders, and improved positive mental health.

DATAPREV will outline some of the potential social and economic outcomes such as increased educational attainment and improved performance and reduced absenteeism within the labour force. The project will also support policy making at both a European and national level by making available information in an accessible and concise format on available research and practice. Guidelines will be developed and training provided for effective approaches for facilitating the use of evidence in the decision-making process. It is crucial to convey in a meaningful fashion information not only on what interventions work and what gains may be achieved, and in what settings, but also to elicit what resources and structures are required for implementation. Such information is integral to making the case for a greater level of investment in effective MHP and MDP interventions across Europe.

The LSE is leading on work to look at the socio-economic impact of prevention and promotion programmes.

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METHODOLOGY

- Synthesis of the cost effectiveness and economic outcomes in the collected programmes and quantitative analyses of the outcomes (through meta-analytical techniques when possible).
- Estimation of human and material resources required to deliver interventions of proven effectiveness.
- Building of a series of decision analytical models looking at the potential cost effectiveness of interventions in different countries and settings across Europe.
- Sensitivity analysis, including threshold analysis to determine the level of uptake required of intervention to be cost effective.

OUTPUTS

A report of the state of the art will be prepared, with an overview of cost effectiveness and economic outcomes across Europe. Other reports to the European Commission are planned and journal papers will be submitted.

PROJECT TEAM

At PSSRU LSE this work is being carried out by
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The PERSONAL SOCIAL SERVICES RESEARCH UNIT undertakes social and health care research, supported mainly by the Department of Health, and focusing particularly on policy research and analysis of equity and efficiency in community care, long-term care and related areas— including services for elderly people, people with mental health problems and children in care. Views expressed in PSSRU publications do not necessarily reflect those of funding organisations. The PSSRU was established at the University of Kent at Canterbury in 1974, and from 1996 it has operated from three branches:

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